ASHGATE HOSPICECARE

England & Wales · Charity number 700636

Details

Other names	THE ASHGATE HOSPICE, ASHGATE HOSPICE
Status	Registered
Legal form	Charitable company
Company number	02263980
Registered	1988-09-14
Register	View on the Charity Commission register

Contact

Address	Ashgate Hospice Ashgate Road Chesterfield S42 7JD
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Website	www.ashgatehospice.org.uk

Activities

Objects: THE RELIEF OF SICKNESS AND THE PRESERVATION OF HEALTH AMONG PEOPLE RESIDING PERMANENTLY, OR TEMPORARILY, IN NORTH DERBYSHIRE.

Activities: The Charity enables people with palliative care requirements to have access to appropriate professional assistance and care and helps patients achieve the best possible quality of life in accordance with their wishes.The Charity provides care related services in a variety of settings: In Patient, Day Care, Home Care, Hospital Care, Therapy, Social Work, Family Support & an Out Patient service.

Classification

- **How:** Provides Services
- **What:** The Advancement Of Health Or Saving Of Lives
- **Who:** Other Defined Groups

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Geography

- Derbyshire

Finances

Period end	Income	Expenditure	Assets	Employees
2025-03-31	£15,583,032	£16,346,653	£9,638,303	421
2024-03-31	£14,400,800	£14,983,279	£10,395,872	397
2023-03-31	£14,437,652	£12,799,146	£10,920,804	354
2022-03-31	£11,075,124	£11,567,199	£9,371,317	339
2021-03-31	£13,967,177	£10,982,881	£9,843,451	337

Trustees

Name	Role	Appointed
Christopher John Hallam	Chair	2024-05-21
Alison Wasteney		2025-07-25
Christopher Laxton-Kane		2026-01-29
Dr Ruth Elizabeth Cooper		2022-09-29
Helen Johnson		2025-07-24
John Simms		2025-07-24
Jonathan Sargeant		2025-07-24
Louise Allen		2025-07-24
Philip David Kirkham		2026-01-29
Stephen Holgate		2025-07-24
Steven Brennan-Collis		2023-12-14

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ASHGATE HOSPICECARE

England & Wales - Charity number 700636

Accounts

Outstanding care, every day

Compassionate care for everyone



Ashgate Hospice Annual Report
April 2024 – March 2025

www.ashgatehospice.org.uk
Registered Charity No. 700636

Ashgate Hospice

Together, we are Outstanding



This year, we were recognised as Outstanding by the Care Quality Commission (CQC). We were very pleased that they recognised it because we see extraordinary care, dedication and compassion in every corner of Ashgate every single day.

This rating belongs to everyone who makes our work possible. Our patients and those important to them. Our colleagues, volunteers, supporters and donors. Our partners across the health system. And the people in our community who trust us to walk alongside them when it matters most.

From the bottom of our hearts, thank you.

Ashgate Hospice

Ashgate Hospice Annual Report
April 2024 – March 2025

Contents

A message from our Chief Executive, Barbara-Anne Walker 4

A message from our Chair of the Board of Trustees, Chris Hallam 5

Telling our story in numbers 6

Who we are and where we're going 7

Our care services overview 10

Being Outstanding: the story of our year 16

Our Care 17
Our People 26
Our Voice 35
Our Community: Funding outstanding care 41
Our Future 52

Leadership and oversight at Ashgate 54

Meet our Board of Trustees 54
Public benefit 55
Upholding fundraising standards 55

Our finances at a glance 56

Financial statements 58

Legal and administrative details 58
Independent auditors report 62
Our financial statements 65

A message from our Chief Executive, Barbara-Anne Walker



The end of the 2024/25 financial year brought a moment of immense pride for all of us at Ashgate: being rated Outstanding by the Care Quality Commission (CQC). Our Outstanding award – one of the highest in the country – recognises the compassion, skill and commitment shown by our teams every single day, and it reflects the experiences of the thousands of people we care for each year.

But the national picture for hospices during the year was, and remains, increasingly challenging. Rising costs, greater complexity of care and long-term underfunding of end of life services are pushing many hospices into extremely difficult territory. Here in North Derbyshire, chronic underfunding from Derby and Derbyshire Integrated Care Board (DDICB) meant that less than a third of our income in 2024/25 came from our core NHS contract. Despite record-breaking generosity from our community and tireless work from our teams, the gap between what it costs to provide outstanding hospice care and what we are funded for continues to widen. In March 2025, we formally warned DDICB that without increased funding we would be forced to make changes to jobs and services. We continued to raise concerns in the months that followed, making clear the growing risk to patient care.

By October 2025, we were no further forward. Despite our best efforts, and the support of Derbyshire's MPs, we had no choice but to announce proposals to save £2.6 million. These proposals include drastically reducing our specialist inpatient beds, reshaping services, and losing as many as 52 staff members. Many of our care and support services may need to change significantly. So while the 2024/25 year closed with the high of an Outstanding CQC rating, as I write this in November 2025, we are navigating one of the most challenging periods in Ashgate's history.

Throughout the consultation, our priority has remained constant: to provide safe, compassionate care to patients, and to support our colleagues with honesty and care. As I am writing this no decisions have yet been finalised, but we have been clear that without fair, sustainable NHS funding, the hospice cannot continue in its current form.

Amid all of this, our community has shown extraordinary solidarity. We launched our Save a Precious Bed Appeal to help keep two of our specialist inpatient beds open for six months – or longer, if enough funds can be raised. The response has been remarkable, and a powerful reminder of how deeply people across North Derbyshire value hospice care.

This report reflects the full picture of the year 2024–2025: the moments of pride, the achievements across care, retail and fundraising, and the wider challenges we are now facing. You won't find details of the current proposals in these pages, as they fall outside this financial year. What you will find is a clear reflection of who we are – a hospice rooted in compassion, honesty and determination, and a team that continues to deliver outstanding care even in the hardest of times.

We will keep pushing for fair funding for our specialist hospice care. We will keep speaking up for the people of North Derbyshire. And, together with our community, we will keep working to protect the end of life care local people need and deserve.

Thank you to everyone who has stood with us this year and continues to stand with us today.



Barbara-Anne Walker
Chief Executive

A message from our Chair of the Board of Trustees, Chris Hallam



The word outstanding carries weight, and this year it has carried particular meaning for Ashgate. Our Care Quality Commission (CQC) rating recognised the compassion, expertise and commitment shown by our teams every day. Since becoming Chair in May 2024, I've seen first-hand what sits behind that achievement, and I could not be more proud of the people who make this hospice what it is.

That pride has sat alongside something much harder. Like many hospices across the country, Ashgate has faced increasing pressure as the gap between the cost of providing specialist care and the funding received for it has grown wider. Rising costs, increasing need and long-term underfunding have brought us to one of the most challenging moments in our history. The proposals announced in October 2025 – while outside the scope of this report – reflect the seriousness of the situation and the difficult decisions the hospice is being forced to consider to safeguard its future.

Throughout all of this, what has stood out most to me is the unwavering dedication of our colleagues. Even as they navigate uncertainty themselves, they continue to offer safe, compassionate care to patients and support the people important to them. Their professionalism and kindness have been evident at every step, and the Board is deeply grateful to them.

We are equally grateful to our community. Their ongoing support – and their response to our Save a Precious Bed Appeal – has been a powerful reminder of how much Ashgate means to people across North Derbyshire. It reinforces our determination to keep pushing for fair, sustainable funding and to speak up for the value of hospice care.

As Trustees, our role is to uphold Ashgate's values, support its leadership, and ensure that the hospice remains here for everyone who needs it – not just today, but for generations to come. The year 2024/25 has shown both the strength of Ashgate and the scale of the challenge ahead. But it has also shown the extraordinary resilience of the people who make this hospice outstanding.

Thank you to every colleague, volunteer, supporter and partner who has helped, and continues to support, Ashgate through both remarkable and difficult times. Your commitment gives us hope for what comes next.



Chris Hallam
Chair of the Board of Trustees

Telling our story in numbers

The annual report gives us the chance to tell the story of who we are, what we do and why it matters. This snapshot captures just some of the ways our care, support and partnerships have made a difference across North Derbyshire this year.

341
people received care on our Inpatient Unit

207
people supported through our Virtual Ward

273
people accessed support through our Day Services

678
people accessed physiotherapy support

1,118
trees collected through our Treecycle scheme

229,235
items sold through our clearance shops

600
people supported through our Lymphoedema Service

368
people supported by our Complementary Therapy team

649
people supported by our Occupational Therapy team

1,334
people cared for in their own homes

10,500
lottery players taking part each week

£735,832
raised through our weekly lottery

200
children and young people supported by our specialist children's services

694
people supported by our Social Work, Counselling and Spiritual Care teams

2,601
patients and those important to them supported across North Derbyshire

Patients stayed with us for an average of
13 days
on our Inpatient Unit

£341,854
raised by our record-breaking Sparkle Night Walk

Behind every number is a person, and an outstanding team working together to provide the best possible care.

Who we are and where we're going

Everything we do starts with the people we care for and the community we serve. We're here for those living with a life-limiting or incurable illness, for the people important to them, and for anyone who needs support through death, dying and grief.

We are proud of the quality of our care and deeply committed to the values that shape how we work.

But that work doesn't stand still. The need for hospice care is growing, and funding continues to fall short. That's why we're focused on the future, making sure Ashgate remains here for generations to come, and that everyone in North Derbyshire has access to the care they need, when they need it most.

In this section, you'll find an overview of who we are, what we stand for, and the ambitions guiding us as we look ahead.



Founded in 1988 to serve the people of North Derbyshire

Who we are

Whether you're living with a life-limiting or incurable illness, caring for someone who is, or grieving someone important to you, we're here for you.

We're proud to care for people across North Derbyshire, offering expert palliative and end of life care that's free to those who need it, shaped by compassion, dignity and respect. Our care supports not just patients, but the people important to them too, because we know how vital that is.

From the moment of diagnosis, through to the end of life and into bereavement, we work with energy and hope to improve quality of life, ease distress and make every moment count. Whether that's helping someone stay at home, managing complex symptoms, or offering emotional support, we're there.

We support adults aged 18 and over with life-limiting or incurable conditions, including cancer, neurological diseases and end-stage heart, kidney and lung disease.

In 2025, our care was once again rated Outstanding by the Care Quality Commission, a recognition of the difference we make every day. But we never take this for granted. We're always striving to do better and reach further.

We couldn't do any of it without the generosity of our community. This year less than a third of Ashgate's total income came from our core NHS contract, and that percentage is reducing each year. The rest must be raised through donations, fundraising, gifts in wills and other activities.

That's why every gift, every hour volunteered and every story shared helps us continue to be here for the people who need us.



‘Such a difficult time was made that little more bearable’

When Dawn Hamilton’s cancer returned and doctors said there was no cure, she chose to spend her final weeks at Ashgate, a place where she felt safe, comfortable and cared for.

Her daughter, Amy Smith, says that choice brought comfort and dignity at an unimaginably painful time.

“We were a little apprehensive about the hospice at first. Mum had always said she wanted to be at home,” said Amy. “But as soon as she was at Ashgate, she felt at ease, and she chose to stay.”

Dawn died at the hospice in April 2016, aged just 44.

Amy remembers her mum as “the most loveable, amazing and beautiful woman, with an infectious cackle of a laugh.” Despite being unable to speak or eat like before, Dawn continued to joke and smile until the very end.

“The care both mum and us as a family received was more than we could have asked for,” Amy said. “The staff were so caring towards all of us. They were there for anything we needed, before and after mum died.

“Such a hard time in our lives was made that little more bearable because of the hospice and the staff.”





Outstanding care, wherever it's needed

When someone living in North Derbyshire is diagnosed with a life-limiting or incurable illness and has complex needs, they can be referred to Ashgate Hospice by a GP, hospital team or community nurse.

From that point on, we provide expert care and support in the way that suits them best, whether that's in the comfort of their own home, on our Inpatient Unit at Old Brampton, or often a combination of both. For example, someone might come to the hospice for a period of time to help manage their symptoms, then return home if they are able to do so.

We also offer emotional, practical and bereavement support to the people important to them. The care we provide depends on how advanced someone's illness is, but we also look at wider needs, such as their home environment, support network and how well their symptoms are being managed.

Whatever someone's situation, we're here to offer outstanding care and support at the right time, in the right way.

Care at home

Many people prefer to be at home in their final weeks and days, and we do everything we can to make that possible.

Our specialist team of nurses, support workers, doctors, allied health professionals and support services work together to provide all the care someone needs, in the place that matters most to them.

We take a holistic approach, supporting not only physical symptoms but also emotional, social and spiritual needs. We liaise closely with GPs, community services and other professionals, and we're here for the people close to our patients too, offering everything from practical advice to bereavement support.

We also help with financial planning and future care decisions.

Inpatient Unit

Our Inpatient Unit provides round-the-clock, specialist care for people who need extra support, often for help managing complex symptoms.

Our expert team includes doctors, nurses, healthcare assistants and physiotherapists, occupational therapists and other specialists. All these teams work together to deliver personalised care, based on what matters most to the patient and those important to them.

Support includes emotional and psychological care, complementary therapies, physiotherapy, occupational therapy and lymphoedema management. Every patient is under the care of an experienced consultant in palliative medicine.

Virtual Ward

Ashgate's Virtual Ward offers rapid, personalised care for the most unwell palliative patients, supporting them to stay at home, where they feel safest.

The team can respond quickly, often within 24 to 48 hours, whether someone is recovering after a hospital stay, managing complex symptoms, or nearing the end of life.

The service is NHS-funded and part of a national drive to provide high-quality urgent care in the community. The service supports early discharge from hospital and helps to avoid unnecessary readmissions by providing urgent care and regular monitoring at home.

If a patient's condition changes, extra support can be arranged immediately to ensure their needs continue to be met.

Day Services

Our newly refurbished Day Services are here for people earlier in their palliative care journey. We offer advice, education, activities and support for patients and the people important to them.

Through drop-in sessions and planned appointments, people can access physiotherapy, complementary therapies, emotional support and expert medical advice in a relaxed, welcoming setting.

Physiotherapy

Our specialist physiotherapists support people with breathlessness, fatigue, weakness, discomfort and mobility issues, always with the aim of improving comfort, confidence and quality of life.

Treatment plans are realistic and tailored to each person's needs and goals.

Lymphoedema specialist support

Our dedicated lymphoedema nurses, supported by our wider clinical team, provide thorough assessments and personalised treatment plans for people living with lymphoedema.

This might include skincare advice, massage, exercise and compression therapy, all designed to manage symptoms and enhance daily life.

Caring at home with Ashgate's Virtual Ward: A nurse's perspective

Since launching in early 2023, Ashgate's Virtual Ward has been delivering expert, personalised care to patients in their own homes.



Amanda Hall, Head of Community Services and Development, leads the team. With over a decade's experience at the hospice, Amanda has spent more than two years developing this vital service.

Here, she shares what this service means to her and the difference compassionate care at home can make for patients and those important to them.

"As the head of this service, I support patients through home visits, assessments, and prescribing when needed. I also guide our nursing teams to ensure we all deliver the best care possible.

"I'm very clinical and patient-focused, my happiest moments come from being directly involved in care. It's a privilege to help manage complex symptoms and keep people comfortable at home.

"What makes this work truly special is helping patients spend their final days where they want, surrounded by people important to them. Hospice care is not just about sadness; it's about dignity, respect and finding joy even in difficult times.

"I've been supported in my own development, completing a degree in 2016 and my master's in advanced clinical practice in 2025. Alongside growing personally, I'm passionate about supporting and educating colleagues across the hospice and community, helping them build confidence and skills to provide outstanding care."

Steph's story: Finding support and strength while living with lymphoedema

When Steph was diagnosed with breast cancer at 34, she never expected to face lymphoedema too. This lifelong swelling and pain in her arm came after multiple surgeries and treatments, making an already tough journey even harder.

"I'd never heard of lymphoedema before. After everything else, it was tough to manage the pain and swelling. That's when I was referred to Ashgate."

With Ashgate's Lymphoedema Service, Steph found expert care and practical support that helped her regain control.

"They sorted me out with pain relief and taught me massage techniques. The team really know their stuff, other healthcare professionals just don't have the same level of knowledge."

Nearly four years on, Steph says Ashgate has become more than just a treatment centre.

"I actually really like visiting the hospice. The receptionists and canteen staff are so lovely, it's just a really good place to be."



Counselling and therapies

Our counselling team, based onsite at Old Brampton, provides a safe, understanding space for patients and those important to them to talk openly and work through difficult thoughts and feelings.

Support is available before and after a death, and can include one-to-one counselling or group sessions, depending on the person's needs.

Children and young people's service

We support children and young people up to the age of 18 when someone important to them is dying or has died. Support is tailored to each child and can include play, art, storytelling, talking therapies and counselling.

Sessions can take place at the hospice, at home, in school or online. We also offer peer support groups and work closely with schools to offer advice, resources and training.

Outpatient care

Some of our services are delivered on an outpatient basis, including lymphoedema treatment, counselling, medical consultations, physiotherapy, and support from specialist nurses.

This helps people stay well for longer, stay out of hospital, and feel supported.

Social work

Our Social Work team supports people with practical matters, helping patients and the people important to them feel more in control.

This might include arranging care packages, advocating for people in need, or signposting to local services. We also support children and young people who are experiencing bereavement or preparing for the death of someone important to them.

Spiritual care

Our spiritual care team offers compassionate support for people of any faith or none.

They're here for patients, those important to them, and our staff and volunteers, helping people explore what brings them comfort, strength or meaning during difficult times.

Occupational therapy

Our occupational therapists help people stay as independent as possible, wherever they're being cared for.

This might include adapting everyday tasks, providing specialist equipment, or helping someone prepare to return home from the hospice.

They work in people's homes, on the Inpatient Unit and in Day Services, and they also advise nursing and residential homes to help ensure joined-up, person-centred care.

Complementary therapy

Our Complementary Therapy team provides treatments such as massage, aromatherapy, reflexology, acupuncture and Reiki, designed to sit alongside conventional medical care.

These therapies can ease pain, reduce anxiety, improve sleep and help people feel more relaxed.

Support is available to inpatients, people using Day Services, and those attending bereavement groups.



Why we're here

Everything we do is guided by what we believe. From the care we give, to the way we campaign and speak out, it all comes back to our commitment to providing outstanding palliative and end of life care for the people of North Derbyshire.

Our vision

Our vision is for everyone with a life-limiting or incurable condition to be able to live well and experience a good death. We want them, and the people who are important to them, to have the right information and support, and to feel cared for and understood.

Our purpose

We offer specialist palliative and end of life care and bereavement support. We also campaign for better care and educate others about these crucial services. Our aim to is to grow as a centre of excellence, working with the wider healthcare system with energy, openness, compassion and hope.

Our values

We are compassionate. We work as a team. We are respectful, open and inclusive.





How we're working towards our vision

In 2024–25, we continued to build towards the future we believe in, one where everyone has access to excellent palliative and end of life care.

Our Four Ambitions set out the difference we want to make. They focus on the quality of our care, the strength of our team, the power of our voice, and the future of our hospice.

They shape every decision we make, helping us provide the very best support to patients and the people important to them.

Our care

We will care for more people than ever before, and we will do it exceptionally well.

- We will increase access to our services.
- We will reach people earlier.
- We will continue to improve the quality of our services.

Our people

We will be a positive and inclusive environment which recruits, develops and nurtures the best people.

- We will continue to develop our clinical expertise.
- We will ensure we have a skilled and supported workforce, enabled by technology.
- We will foster a positive and inclusive work environment.

Our voice

We will use our voice to make things better for everyone at the end of their life.

- We will campaign for sustainable hospice funding.
- We will fight for fair end of life care for everyone, locally and nationally.
- We will encourage open conversations about death and dying and help people understand hospice care.

Our future

We will make sure that Ashgate is here for future generations who need our care.

- We will continue to manage hospice costs and grow our fundraising and retail net income.
- We will pilot new business projects to diversify our income streams.
- We will work to protect the environment and make our hospice as eco-friendly as possible.



Being outstanding: The story of our year

We know that being outstanding isn't just about inspection ratings, it's about what people feel when they come into contact with Ashgate; the care, the support, the compassion.

It's about the patient who feels safe to die at home, the carer who knows they're not alone, the volunteer who gives their time with pride. It's about thousands of individual moments of kindness, skill and support.

What follows is a snapshot of what that looked like in 2024-25.



Photo: Nick Rhodes

Our Care

At the heart of everything we do is outstanding care, personalised, compassionate and responsive to the needs of each person and those important to them. Whether it's in our Inpatient Unit, out in the community, or through services like our Virtual Ward, we're here to help people live well and die well, wherever they are.

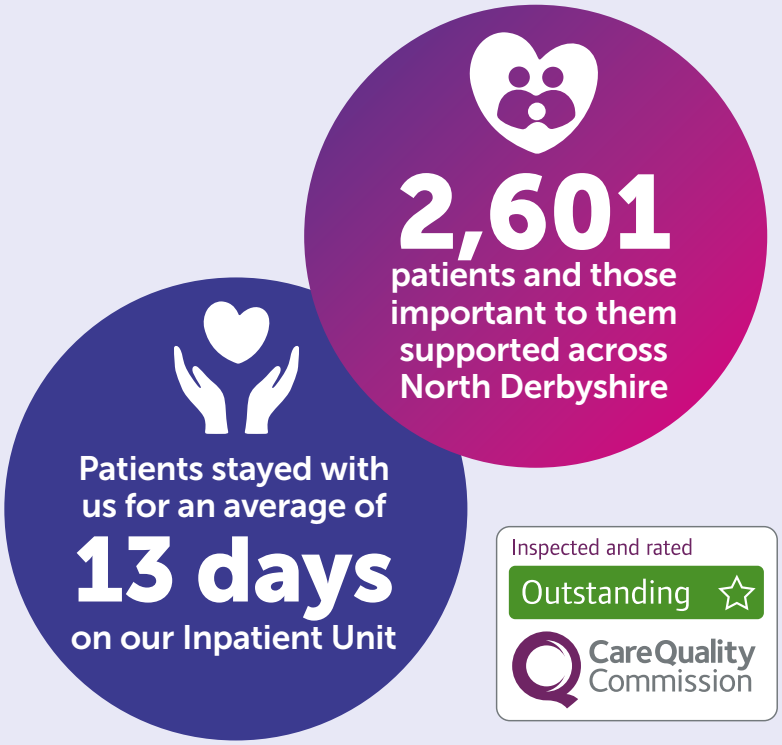
Outstanding care recognised once again

Over the past year, Ashgate has improved our exceptional outstanding rating from the Care Quality Commission (CQC). This is the second time in a row we've been awarded this highest rating, meaning our care has officially been recognised as outstanding for 11 years running.

When the inspectors visited the hospice, they looked at every part of what we do, how we care for people, how we support them, and how we make every moment matter. After their visit, we sent them more than 600 pieces of evidence to show just how much care and dedication goes into making Ashgate the place it is. And then, they confirmed what we've been working so hard for, our care is truly outstanding.

A year of caring in numbers

2,601	patients and those important to them supported across North Derbyshire
1,334	cared for in their own homes
341	received care on our Inpatient Unit
207	supported through our Virtual Ward
273	accessed support through our Day Services
368	supported by our Complementary Therapy team
649	supported by our Occupational Therapy team
678	accessed Physiotherapy support
600	supported through our Lymphoedema Service
694	supported by our Social Work, Counselling and Spiritual Care teams
200	children and young people supported by our specialist children's services



Inspected and rated
Outstanding ☆
CareQuality Commission

Here's what the CQC had to say:

Effective
Our care isn't just good, it's evidence-based, measurable, and continuously improving. We make sure patients and the people important to them are involved in decisions, and our learning and development programme ensures we're always providing the best possible support.

Caring
Patients and the people important to them told the CQC that we are amazing, compassionate, and caring. They said staff and volunteers are always available, always listening, and always treating them as individuals.

Responsive
When someone needs us, we respond, fast. Whether it's a home visit or multiple face-to-face contacts throughout the day and night, we're there. Our team makes sure every patient's needs and choices are at the heart of their care.

Well-led
The CQC recognised that we have a clear vision, compassionate and effective leadership, and an open, inclusive culture. They saw a team that works together, learns from experience, and constantly strives for better.

Safe
Patients and people important to them feel safe, supported, and listened to, whether on the ward or in the community. They told inspectors they were treated with kindness, dignity, and respect. Our environment is clean, our equipment well-maintained, and patients have everything they need to feel secure.

One person who uses our services said:

"It makes us feel a bit frightened when it's the end of life and what will be available. But they have helped us to prepare and made me feel so unafraid of dying."

This Outstanding rating is a testament to the dedication of everyone at Ashgate, staff, volunteers, and trustees alike, who work tirelessly to provide the highest standards of palliative and end of life care across North Derbyshire.

A conversation with Claire Blakey: What our Outstanding CQC rating means for Ashgate



Claire Blakey, our Director of Quality, has been part of Ashgate since 1994 and has seen our care evolve from early days of palliative care to today's specialist services.

"Our Outstanding rating from the Care Quality Commission (CQC) reflects over a decade of consistently high standards," Claire says. "Since 2015, we've maintained this rating by continually improving, listening to feedback, and adapting our care."

Claire explains that this recognition not only reassures the people we care for but also strengthens our reputation in the community.

She said: "It helps us secure sustainable funding, so we can keep delivering the best possible care.

"Our 'One Ashgate' culture unites staff and volunteers around shared values of compassion and innovation."

Looking ahead, Claire is confident in Ashgate's future, adding: "We're committed to continuous improvement, always finding ways to raise the bar in specialist palliative and end of life care."

A newly refurbished space that puts patients first

This year, we reopened our Day Services space following a major refurbishment, and we're already seeing the difference it's making for the people we care for.

The newly refreshed space means we can offer more support, earlier in someone's illness, and create a more modern, inclusive experience for everyone who walks through our doors.

The new layout means we can now offer several group activities, drop-in sessions and wellbeing services at the same time. It's already making a big difference to the number of people we can reach and the variety of support we can offer.

Thanks to the refreshed space, we've been able to introduce more activities like Tai Chi and yoga, and we've added a quiet room, ideal for a private conversation or a moment of peaceful reflection.

Our new kitchen and serving counter bring a more comfortable and sociable feel, and we've made sure the whole space is fully accessible, including new toilets with a hoist and changing table.

We're also able to open Day Services for an extra two days each week, reaching even more people in our community who need us.

When we started to plan the refurbishment and began considering how it could look, we knew it wasn't just about updating a space, it was about making Ashgate feel even more welcoming for everyone who walks through our doors.



To help us do that, we partnered with local accessibility consultants, Access and Inclusion – their advice helped shape a space that's easier to navigate for people with physical and learning disabilities, dementia, and those who are neurodivergent.

Some of the key changes include:

- A fully accessible toilet with plenty of space and equipment to support dignity and ease
- A calm, quiet room with soft lighting and neutral tones to support neurodivergent people and those living with dementia
- Comfortable, accessible seating that suits a range of needs
- A new therapy room, designed with privacy and relaxation in mind.

Thanks to funding from charitable trusts, foundations and charitable funds, and the generosity of 19 businesses and individuals who donated time, materials and expertise, we saved more than £370,000 in refurbishment costs. And, thanks to a £213,510 grant from the government's new £100 million capital fund, we were also able to cover the remaining costs through this dedicated funding, meaning **the entire refurbishment didn't cost Ashgate a penny**.



Sarah Kerry on transforming Day Services



Sarah Kerry, Head of Day and Support Services, was part of the team that led the transformation. She shares what the new space means for staff, volunteers and, most importantly, the people we support:

"The biggest change is the layout. The large open room that used to house all our activities has been divided into separate areas, so we can run multiple sessions at once, from Tai Chi and creative groups to support sessions, without distractions.

"We've also created a quiet space for anyone who needs time alone or privacy, which has already proved incredibly valuable. Accessibility was key too. Our kitchen is now fully accessible, and we've added more food and drink options for those who can't easily get to the café.

"Some of the changes might seem small, like the addition of a coffee machine, but they've made a huge difference. Being able to make your own hot drink might not sound like much, but it helps people feel at home and encourages independence. That's what this space is all about.

"I can't wait to see how we'll use the new space in future. It's more flexible, more functional, and full of potential. There's so much we can do, and this is just the beginning."

What the new space means to our patients

The refurbishment isn't just about new walls and colours, it's about creating a welcoming environment where people with life-limiting and incurable illnesses and the people important to them can feel comforted and cared for.

Linda Biggs (main photo) first came to Ashgate following the death of her husband Keith. She has since accessed counselling support and now attends Day Services after being diagnosed with pulmonary fibrosis.

"As soon as I walked in through the door there was this air of tranquillity," she said. "It was so nice, and it felt so welcoming. Everything is so comfortable.

"Just knowing these services are there is such a comfort. Someone has time for you, someone makes you feel welcome, that's a huge thing in itself."



Mand Black (insert photo) accesses support, advice and activities at the unit after being diagnosed with metastatic breast cancer in 2015.

She said: "Day Services is an environment where everybody knows that there's something going on, but we just accept each other as we are and often don't even talk about our illnesses.

"There are so many complementary therapies you have access to. I've had some amazing massage and reflexology at the drop-in sessions, I've learnt tai chi and the craft activities are just excellent.

"You can get medical and financial advice that has given me instantaneous reassurance and meant I haven't had to try and get a hospital appointment – that's been just priceless."

How feedback is shaping our care

We believe that the best way to improve our care is by listening closely to the people who use our services.

Over the past year, our Patient Experience work has gone from strength to strength. We've now collected hundreds of pieces of feedback through our bespoke patient surveys, designed in-house and continually refined to reflect what really matters to people.

These dynamic surveys allow us to hear from people wherever they're receiving care. From patients in their own homes to those on our Inpatient Unit, we're capturing feedback in real time.

This approach was recognised nationally when our 'Hearing Our Patients' Voice' project was shared at the Hospice UK conference in Glasgow in November 2024.

We're also gathering deeper insights through focus groups and one-to-one conversations with the help of our Patient Engagement and Activity Volunteers. Their work has uncovered powerful stories and suggestions, helping shape everything from individual care plans to the refurbishment of our Day Hospice.

Our recent CQC inspection highlighted how willing patients were to share their experiences, and how proud they were to talk about the care they received. Their voices helped secure our outstanding rating, and continue to guide how we evolve and improve our services.



Making it easier for people to get the care they need

Since launching in August 2023, our Single Point of Access (SPA) team has transformed how people connect with Ashgate's care.

It's become an essential part of our support, helping people get the right care quickly, without delay or confusion. Whether someone is living with a life-limiting or incurable illness, or referring on behalf of someone else, the team is there to guide, listen and act from the very beginning of a person's journey with us.

What is the Single Point of Access?

The SPA is Ashgate's central contact point for referrals. It means patients, carers and healthcare professionals can get information, advice and access to our services quickly and easily. The team provides a consistent, supportive first step, coordinating initial assessments and helping people move smoothly into the right care at the right time.

Over the past year, the team has expanded to include the Virtual Ward, allowing us to offer more flexible and responsive support at home. As we've added more referral areas, we've seen a huge growth in the number of people reaching out to us.

More than 8,800 referrals have come through SPA since launch, a clear sign that people are using and benefiting from the service. Almost all referrals are responded to within 48 hours, often sooner. For patients and those important to them, that quick response makes a world of difference, giving reassurance, clarity and practical help when it matters most.

The SPA also plays a vital role behind the scenes, working closely with clinical leads to streamline how people move through our care. From refining referral pathways to making processes more consistent, this often invisible work is having a big impact on patient experience.

Supporting an informed and confident workforce beyond Ashgate

As a centre of excellence for palliative and end of life care, we're proud to share our expertise beyond our own walls.

Our two senior nurse End of Life Care Facilitators, Shelagh Freeman and Erica Robins, play a vital role in supporting the wider health and social care workforce across North Derbyshire.

Working closely with partners across the system, they help equip professionals, from GPs and care home staff to admin teams, with the confidence, knowledge and compassion needed to support people approaching the end of their lives.

Their work directly supports the ambitions of Derby and Derbyshire Integrated Care Board's end of life care strategy and this year it's had a far-reaching impact through a varied and thoughtful education programme:

- **SAGE & THYME foundation communication skills**
  A nationally recognised workshop open to all, helping participants build confidence in listening and responding to people in distress.
- **Enhanced communication skills (Tier 2)**
  A new Ashgate-designed training exploring how to compassionately respond to difficult questions like "Am I dying?", how to break bad news, and how to support distressed families. RealTalk videos offer real, anonymised footage of healthcare conversations, which are used to analyse communication and reflect on empathy in action.
- **End of life care education network**
  Monthly online sessions that bring together professionals from every care setting to share good practice on topics like managing breathlessness, caring for people with motor neurone disease, memorial activities, and childhood bereavement.
- **Syringe driver and symptom management training**
  Bi-monthly practical training for nursing home staff, ensuring safe, confident use of this essential care equipment.
- **Verification of expected adult death training**
  Another bi-monthly course, helping care home teams approach death with clinical competence and compassionate communication.
- **ReSPECT authorship training**
  A new course developed to support nurses in leading ReSPECT conversations, underpinned by ethics, digital record-keeping, and shared decision-making. Based on a framework originally developed by Ashgate and now adopted across Derbyshire. ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) is a personalised care plan that records someone's wishes and clinical recommendations for emergency situations where they may not be able to speak for themselves.
- **GP lunch and learn sessions**
  Supporting GPs with the rollout of Digital ReSPECT and proactive identification of people approaching the end of life.
- **Last Days Matter**
  A three-hour interactive workshop designed to help people care for someone with a life-shortening illness. It explores recognising when someone is dying, how to say goodbye, and adjusting to the 'new normal' after death. After three successful local pilots, including a public session, plans are in place to further develop this meaningful offer for the wider community.

By sharing our expertise in such a wide-reaching way, we're helping build a more informed, confident, and compassionate system of care, ensuring more people across our community can experience the kind of support everyone deserves.

‘Nursing – and especially end of life care – is where I belong.’

Erica Robins has spent her nursing career supporting others, from working in hospitals to being a District Nurse. In 2022, she joined Ashgate as an End of Life Care Facilitator, training and supporting health and social care teams across North Derbyshire.

Last year, Erica was awarded the Queen’s Nurse title, a recognition of her dedication to high-quality, compassionate care.

Erica said: “When I was told I’d won the award, I felt incredibly proud. It recognises all the hard work I’ve put into my career, but also reminds me that there’s always more to learn.”

Community nursing, particularly supporting people at the end of their lives, has always felt like a calling for Erica.

“Helping someone to stay at home, honouring their wishes, and providing comfort and reassurance in their final days is the kind of care that stays with you.”

At Ashgate, Erica continues to pass on her knowledge and experience to others. She’s now working towards a teaching qualification, helping to ensure more people receive outstanding care, wherever they are.



Early support that lasts a lifetime

This year has seen real growth in our Children and Young People’s Service, with 200 referrals and every child receiving a tailored offer of support. From comfort packs and storybooks to 1-1 therapeutic sessions and peer groups, we’ve continued to provide early, compassionate care at a time when it’s needed most.

More children are now being supported in their school environment, helping them feel safe, heard, and understood in a place they know and trust. We’ve also launched two drop-in groups in remote Derbyshire schools where bereavement is particularly high.

The rollout of our School Support Pack has helped strengthen relationships too. We reached out to 168 schools, with 55 getting in touch for further information and support. By visiting schools in person, we’ve been able to clarify referral pathways and equip staff to better support their pupils.



Referrals for children experiencing anticipatory grief are also on the rise. Working more closely with our Inpatient Unit and community nursing teams means we can now offer support earlier, often during a family's first encounter with Ashgate. Our comfort and wellbeing packs, which include mindfulness tools and therapeutic resources, are offered as part of every visit, alongside time to talk, ask questions and explore feelings.

Our monthly peer groups, one for teenagers and one for families, are now fully back up and running following building works. These groups create a safe space for children and young people to connect with others facing similar experiences, build resilience, and find a sense of belonging.

We've also continued to support parents and siblings over 18, recognising the wider impact of life-limiting and incurable illness and bereavement on the whole family.

Our focus for the year ahead is sustainability, accessibility and quality, so every child and young person affected by serious illness or bereavement in our community can get the help they need, when they need it most.



Going above and beyond every day

At Ashgate, it's the little things that make a big difference. From organising afternoon teas to celebrating birthdays, anniversaries, and even weddings, we're here to create meaningful moments for the people important to us.

Take last Christmas, for example. Two reindeer, Michael and Mistletoe, paid a surprise visit to patients and visitors at the hospice. The joy of stroking the gentle animals brought comfort and festive cheer, lifting spirits during what can be a very difficult time.



Photo: Ellie Rhodes

Jean, a patient, said: "It made me feel more Christmassy because I had been feeling a bit low."

Not long before that, twin calves Bonnie and Bella, just weeks old, visited from a local farm. Their gentle presence brought smiles and calm to patients like Carol, who said:

"The cows have been gorgeous. I have had a lovely day. Plus I had a lovely bath, reflexology and did some crafts. There is something all the time for you to do and everything is tailored to you."



These visits aren't just about animals, they're about connection, comfort and kindness, helping to ease anxiety and bring moments of joy.

Our ward leader, Karen, says it best:
"We do everything we can to make every moment special, because these extras mean so much to the wellbeing of the people we care for."

Our People

Ashgate's strength lies in the people who show up every day with compassion, skill and commitment.

With around 400 staff and 1,000 volunteers, our team includes everyone from nurses and palliative care support workers to sales assistants and fundraising champions. It's their dedication that makes our care outstanding.

This year, we're proud to celebrate the kindness, resilience and teamwork that runs through every part of our hospice.

89% ↑from 86% in 2024 of staff would recommend Ashgate Hospice as a place to work

93% ↑from 89% in 2024 of our volunteers would recommend Ashgate Hospice as a place to volunteer

99%* of staff and volunteers would be happy with the standard of care provided by Ashgate

* There was an option of 'I can't comment as I have no experience of the care provided'

70% of staff
71% of volunteers feel supported in developing their careers through additional learning opportunities (where desired)

79% of staff
86% of volunteers say they receive the training and development they need to enable them to do their work / carry out their role well

Listening to our people

In January, we ran our latest Pulse Survey, a short, anonymous questionnaire focused on learning and development. With 507 responses, including 76% of staff and 37% of volunteers, it was our highest response rate to date, making the results more representative than ever.

We've seen a steady and significant rise in survey scores since 2016, when overall results were in the 60s. This continued improvement reflects the impact of ongoing efforts to listen, learn and act on what our people tell us.

These regular surveys are one of the ways we hear directly from our people. Because being Outstanding isn't just about delivering great care, it's also about how we support, develop and value the people behind it.

The latest results show real progress:

- 91% of staff and volunteers said they'd recommend Ashgate as a place to work or volunteer
- 99% said they'd recommend us as a place to receive care
- 79% of staff and 86% of volunteers felt they have the training and development they need to carry out their role well.

The 91% figure has risen significantly since 2021, when 80% of staff and 93% of volunteers said the same, a reflection of our continued focus on supporting and growing our teams.

Laura Gee, Organisational Development Lead at Ashgate, said: "These results show that many of our people feel supported, included and valued, which is exactly what we're striving for. It's a clear indicator that investing in our teams makes a difference, not just for them, but for the quality of care we're able to provide."

Investing in our people

We're committed to helping our people grow, continually developing the expertise to deliver outstanding care. We want everyone here to feel confident, capable and supported in their roles, which is why we continue to invest in high-quality learning and development.

As of 31 March 2025, 97% of staff and 87% of volunteers had completed their mandatory training, a strong sign of engagement and a shared commitment to maintaining a safe and inclusive environment.

High engagement across our teams has been sustained throughout the year, supported by visible role modelling from our managers. All managers took part in our newly-launched Being a Manager at Ashgate workshop, now a mandatory part of induction for anyone stepping into a leadership role.

The workshop helps to build a shared understanding of what confident, compassionate leadership looks like at Ashgate. It's about equipping our managers with the tools to lead in a way that reflects our values, creating a culture where people feel supported, listened to and able to thrive.

We also supported 13 colleagues through apprenticeship programmes during the year, with nine successfully completing their qualifications, and four still underway. Ranging from level three to level seven, these apprenticeships are helping our people build specialist skills and confidence in areas like data, digital marketing and leadership.

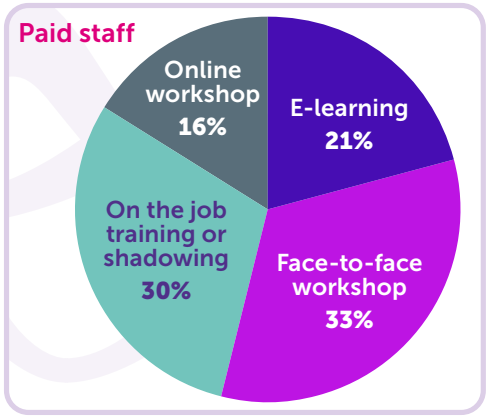
We also strengthened the way we support and learn from students on placement with us, introducing a new process to ensure consistency across teams. These placements are an important part of how we help shape and inspire the next generation of hospice professionals.

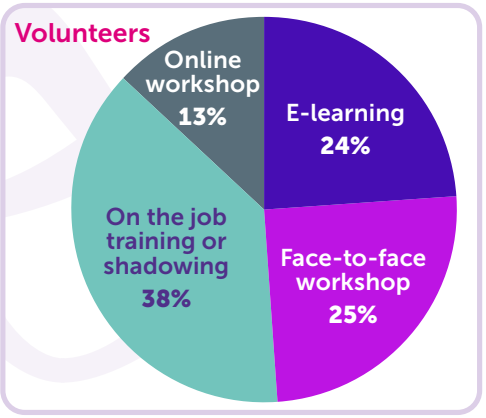
Alongside this, we offered tailored training to meet the needs of specific teams, including a dedicated Equality, Diversity and Inclusion session for colleagues at our Hasland Furniture Store. We also launched a Facilitator's Forum to boost the confidence and skills of those delivering education and training on behalf of Ashgate.

70% of staff
71% of volunteers
feel supported in developing their careers through additional learning opportunities (where desired)

97% of staff
87% of volunteers
had completed their mandatory training as of 31 March 2025

Preferred method of learning





"Even though I've been doing digital marketing for years, having the formal qualification to back it up has been incredibly validating. It's given me the confidence to take on more responsibilities and broaden my role."

– Rebecca Littlewood,
Ashgate's Digital Marketing Manager



Student spotlight: Amy's passion for palliative care



Amy Vardy was a fourth-year nursing student at the University of Derby when she came to Ashgate on a four-week placement with our Virtual Ward team.

Her interest in palliative care was first sparked while working as a pharmacy dispenser in hospital, but it was her time at Ashgate that confirmed her future lies in this area of nursing.

She said: "I feel that a person's final stages should be calm and peaceful, not just for them, but for the people important to them too. Being part of that is such a privilege."

During her placement, Amy joined home visits, took part in telephone assessments and supported patients and the people important to them alongside specialist nurses.

While she plans to build her skills in acute care first, Amy hopes to return to Ashgate one day as a qualified nurse.

"The team was so supportive, and it felt like such a warm and welcoming place to work. I'd absolutely love to come back."

Championing inclusion, every day

We know that being outstanding isn't just about what we do, it's about how we do it. We're proud to be creating an inclusive, compassionate environment where everyone feels safe, valued and supported, whether they're receiving care, working with us, volunteering their time, or visiting one of our shops.

Over the past year, we've continued to embed equality, diversity and inclusion into every part of life at Ashgate. From small changes that create a sense of belonging to bigger conversations that challenge the status quo, our people are helping to make Ashgate a place where everyone can thrive.

Honouring culture, faith and identity in our care

At Ashgate, compassionate care means understanding each person as an individual – including their culture, faith and identity. Led by Director of Care Services, Claire Shaw, and Ward Leader, Karen Walker, the Inpatient Unit team takes time to understand what matters most to each patient so their care reflects their beliefs, traditions and ways of life.



Claire Shaw
Director of Care Services

Cultural and religious needs are explored during admission and recorded so the whole team can tailor care with confidence and respect. This might mean arranging visits from faith leaders, supporting rituals after someone has died, offering privacy for prayer, or involving the people important to them in meaningful ways.



Karen Walker
Ward Leader

Claire, Karen and the wider team work closely with local community organisations to deepen their understanding and ensure care is sensitive, inclusive and person-centred. Honouring identity is not an extra step – it's essential to providing outstanding care when it matters most.

Recognising the power of difference



Volunteer Counsellor Sarah Knee, who is openly Autistic and ADHD (AuDHD), brings a unique and deeply empathetic perspective to her work supporting people through palliative care and bereavement.

"There's a misconception that autistic people lack empathy, in fact, most of us are highly sensitive," says Sarah. "I bring that emotional insight into every session, helping people feel heard and understood when it matters most."

Sarah's openness about her neurodiversity helps others feel safe to be themselves too.

She's a passionate advocate for meeting people where they are, including clients and colleagues who may also be neurodivergent. "We are different, not less," she says.

Welcoming everyone with warmth and respect

We also continue to learn from the experiences of people in our care and the people who are important to them. One of our volunteers whose wife was cared for by our hospice team, shared how inclusive language and simple acts of kindness made a huge difference as a lesbian:

"When I arrived at the hospice, the care assistant greeted my partner and said: 'Your wife is here.' That set the tone. I didn't need to explain anything, or assert my right to be there. I just felt safe."

Creating an inclusive and welcoming hospice

In March 2024, Ashgate was awarded Rainbow Accreditation by Derbyshire LGBT+ for our commitment to making our hospice a safe, welcoming and inclusive place for everyone.

We know that people from LGBT+ communities haven't always felt heard or included in healthcare. That's why we signed up for the Rainbow Accreditation scheme, to take a closer look at how we work and make sure we're getting it right for everyone.

As part of our commitment in being accredited, we offer LGBT+ awareness training to staff and volunteers, review our language and policies to make sure they're inclusive, and celebrate Pride in meaningful ways. We've also made our commitment to inclusion more visible in our shops, coffee shops and online, so whether someone comes to us for care, work, volunteering or support, they can feel safe and respected from the start.

We're proud to join other organisations in Derbyshire working to make our communities more inclusive, and we're especially proud that the Rainbow Accreditation has helped us learn, reflect and keep improving.



Standing up for equality and belonging

This year, we launched in-person equality, diversity and inclusion renewal training for all staff, with optional sessions for volunteers too. We've also worked in partnership with others to co-produce anti-racism workshops, ensuring our learning is shaped by real experiences and community voices.

Following the riots that unfolded in the summer of 2024, we shared a public message to reassure everyone that Ashgate is a place of safety and compassion. Our statement, affirming that racism and discrimination have no place here, was widely welcomed on social media and sparked hundreds of messages of support.

We're proud of the way our teams respond with care, action and allyship. Working alongside local and national partners like MacIntyre, Derbyshire+, ACCA, the Asian Association, JUCD, Age Pledge and Hospice UK, we're making sure our care is shaped by the people who need it, now and into the future.



What it means to be an ally by Barbara-Anne Walker, Ashgate's Chief Executive

"As a heterosexual, white, cis woman, I recognise the privilege I hold, the 'lack of inconvenience' that others don't have. It was only in my twenties that I truly became aware of the prejudice faced by the LGBT+ community.

"At Ashgate, our Rainbow Accreditation journey showed me that being an ally isn't about grand gestures, it's about the small, everyday actions. Whether it's respecting someone's pronouns, joining awareness training, or simply wearing a rainbow badge, these acts matter.

"I strive to listen, learn, challenge prejudice, and support others, even when it's uncomfortable. Because allyship isn't about applause; it's about standing with marginalised communities because it's the right thing to do.

"To our LGBT+ community, you are valued, seen and supported. Together, we are stronger and more joyful in our diversity.

"To everyone at Ashgate, I invite you to join me in being the best ally we can be."



Committed to fairness and equity

We're proud to be an organisation where equity matters. We want every member of our team to feel respected, supported and fairly rewarded, regardless of their gender or background.

We continue to have a positive gender pay gap, meaning women at Ashgate are, on average, paid more than men. This is largely because women hold the majority of senior roles across the hospice, and most of the shift-based clinical roles that attract enhancements, such as night and weekend work.

As of April 2024:

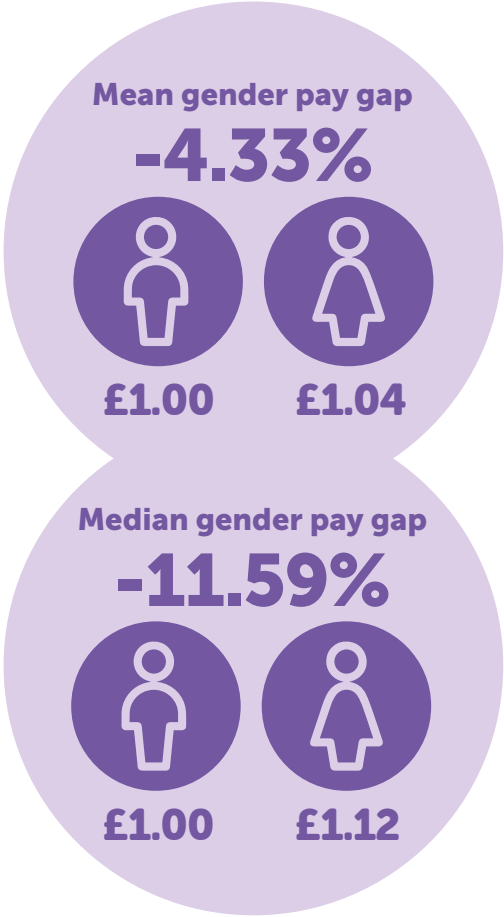
- Our mean gender pay gap is -4.33%, meaning that for every £1 paid to a man, a woman is paid £1.04.
- Our median gender pay gap is -11.59%, meaning that for every £1 paid to a man, a woman is paid £1.12.

This year's data shows a slight increase in the percentage of female staff, from 83% in 2023 to 84% in 2024. The difference in mean and median pay continues to reflect workforce patterns, for example, a higher proportion of men working in our retail teams, where pay enhancements are less common and turnover is typically higher.

We know that real fairness is about more than pay. That's why we continue to invest in ways to support women at work, from flexible working and tailored wellbeing support to our menopause provision. We're also actively looking for ways to increase male representation in patient-facing roles, as part of a wider, sector-wide need for a more inclusive and representative healthcare workforce.

Looking ahead, we're preparing to widen our pay gap reporting to include other protected characteristics. This will help us better understand the make-up of our workforce and ensure we're creating the right environment for everyone to grow, thrive and belong.

We work hard to ensure that we pay our staff fairly and competitively whilst balancing our charitable objectives. Pay for our clinical staff tracks closely with the Agenda for Change within the NHS, whilst pay for our non-clinical roles are in line with other charities. Remuneration for senior staff is set by the board of trustees.



Supporting those who support others



Our commitment to outstanding care extends beyond the people we support, it includes everyone who makes that care possible. Ruth Bailey, our dedicated Health and Wellbeing Advisor, plays a vital role in ensuring that all our staff and volunteers feel valued, supported, and empowered in their roles.

Ruth's work has been a key factor in our recent outstanding CQC rating, with a focus on nurturing mental, physical, and emotional health across the team. From wellbeing workshops and flexible working policies to regular one-to-one check-ins and access to mental health resources, Ruth ensures there's a safety net in place for everyone.

The impact is clear from the feedback we receive:

- **"The support Ruth provides is vital to service delivery, helping individuals overcome barriers to their work."**
- **"She has created a safe and inclusive space to talk about wellbeing, building resilience and coping strategies."**
- **"Volunteer wellbeing is equally valued, with Ruth providing crucial professional advice alongside line manager support."**

Investing in digital tools to support care and connection

This year, we've continued to invest in the technology and systems that support outstanding care, improve staff experience, and help keep our data safe and secure.

Smarter rotas

We introduced RotaGeek, a new rota system integrated with our HR platform, Cascade. This has improved efficiency, streamlined rostering and given teams a smoother, more user-friendly experience.

Connected, secure devices

The rollout of Microsoft Intune is helping us manage and secure staff mobiles and laptops. It gives staff safe, reliable access to the apps they need while protecting sensitive data, especially in the event of loss or theft.

Leading the way with patient systems

We're proud to be the first off-site organisation preparing to go live with NerveCentre, a patient information system newly adopted by Chesterfield Royal Hospital and now being introduced at Ashgate too.

This integration will improve patient care, reduce duplication, and ensure that vital information is where it's needed, when it's needed. It marks a significant step forward in how we work together across the local health system to support people at the end of their lives.

Getting AI-ready

We've started work to ensure Ashgate is ready to explore the safe, ethical use of AI in the future. From licensing and systems to tools and policies, we're taking a measured and mindful approach to what could be a transformative shift in how we use technology to support care.

Keeping data safe

Protecting sensitive data remains a top priority. We continue to carry out regular vulnerability scans, penetration tests and external audits. We've also updated our password policy and run hospice-wide training to help everyone play a part in keeping Ashgate secure.

Celebrating the volunteers who make our care outstanding

At Ashgate, our volunteers are the heartbeat of everything we do. Whether it's offering a listening ear, keeping our gardens beautiful, sorting donations in our shops or cheering people on at the Sparkle Night Walk, their time, skills and kindness are what help make our care outstanding.

This year, about 1,000 volunteers supported Ashgate. They range in age from 15 to 92, and their roles are as varied as the people who fill them. Six of our longest-serving volunteers started before the year 2000; one remarkable person began in 1986, part of the original group who raised the funding to open the hospice!

We're proud that volunteer training compliance has now topped 80%, a brilliant reflection of just how committed our volunteers are. It means they're confident and equipped in their roles, helping us keep care safe, high quality and personal for everyone we support.

We've continued to strengthen how we work with volunteers beyond their day-to-day roles too. Volunteer Forums now offer a deeper insight into the hospice and give people space to share ideas and help shape improvements.

And most importantly, people tell us they feel valued. They feel part of something. They feel like Ashgate.

- "I feel valued as a volunteer."
- "There's a real sense of One Ashgate, we're all in it together."
- "I've made new friends."



Thank you to each and every one of our incredible volunteers. You make Ashgate a kinder, stronger and more joyful place to be.

How volunteering at Ashgate brought June and Lynne together

We often talk about the difference our volunteers make to patients and the people important to them. But sometimes, the impact is just as powerful between the volunteers themselves.

Volunteers June Spreckley and Lynne North met a couple of years ago when they both started helping at our Inpatient Unit as Meal Assistants. They didn't know each other beforehand, but as Lynne puts it: "We just clicked, I wouldn't want to work without June by my side."

Since then, their friendship has grown into something truly special.

"We always try to enter a patient's room together," says June. "It helps us make sure we've understood the patient's needs clearly, and we support each other too."

Their working partnership is rooted in trust and respect, and they've learnt a lot about each other, and themselves, along the way.

"We're quite different people," says June. "But working together for a shared goal has brought great joy and an amazing friendship."

"June is one of the kindest people I've ever met," says Lynne. "She's so thoughtful and meticulous. And she always brings her calm presence to everything we do."

June is equally full of praise, adding: "Lynne has this infectious energy, she lifts everyone's spirits, no matter what's going on."

Their time at Ashgate has been filled with unforgettable memories, from working Christmas Day and sharing a fit of giggles during a photo shoot, to travelling together to a live TV interview when June was feeling nervous.

"Lynne gave up her day to support me," says June. "She helped me prep and kept me calm the whole way. I'll never forget that kindness."

Both say it's the warmth of Ashgate that helped their friendship flourish.

"The inclusive environment meant we could figure out how to work together in a way that suited us and still gave the best care," says June.

"Ashgate has given me the opportunity to make friends not just with June but with so many lovely people," adds Lynne. "I'd urge anyone to give volunteering a go."



Our Voice

We use our voice to champion better end of life care, to open up honest conversations about death and dying, and to stand up for the people we care for. This year, we've continued to speak out about the challenges facing hospice care and the urgent need for fairer, sustainable funding.

Staying connected

Outstanding care starts with a connected and informed workforce, and we've continued to invest in how we communicate with our people to make sure everyone feels included, valued and up to date.

Our new and improved intranet has become a one-stop shop for essential updates and resources, with improved navigation and tailored content driving more engagement, especially from our volunteers.

We also introduced a bring your own device policy, enabling staff and volunteers to access internal updates from their personal phones and tablets, making communication more flexible and accessible than ever.

And through The Break Room, our internal podcast, we've created a new space to share updates and stories in a more human, informal way, helping colleagues feel connected wherever they work, and shining a light on the voices behind the care.



Sharing stories that matter

Series five of The Life and Death Podcast launched during Dying Matters Awareness Week in May 2024, continuing our mission to open up honest conversations around death, dying and grief.

Hosted by Stephen Rumford, this season featured some of our most high-profile and thought-provoking guests yet, from comedians and authors to nurses and philosophers, all with unique perspectives on life, death and what comes after.

Since launching in 2020, the podcast has been listened to more than 19,000 times, helping to spark meaningful conversations across homes, hospitals, hospices and beyond.

The Life & Death Podcast

Since launching in 2020, the podcast has been listened to more than **19,000** times.

Scan me

Scan the QR code and listen



Ed Byrne
Comedian and Mock the Week regular Ed joined us in Buxton ahead of his grief-inspired show Tragedy Plus Time. In one of our most listened-to episodes, Ed shared the story behind the show, and how the death of his brother, Paul, shaped his outlook on life, loss and laughter. (Photo by Roslyn Gaunt)



Rebecca Soffer
The founder of Modern Loss and bestselling author, Rebecca spoke candidly about being orphaned in her early 30s, the disorientating grief that followed, and how she's since built a global community around shared loss and storytelling.



Julie McFadden (Hospice Nurse Julie)
A hospice nurse with millions of TikTok views, Julie joined Stephen to talk about what it's really like to be with people at the end of their lives, and why she's on a mission to help more people understand what dying looks and feels like.



Simon Critchley
Philosopher and author Simon brought wit and wisdom to a fascinating discussion on the history, humour and humanity in how we die, from Pythagoras to Bentham, and beyond.



Dr Katie Lawlor
Psychologist Katie has built a powerful platform on the often-overlooked grief of pet loss. She spoke about the real emotional toll this type of bereavement can bring, and why it deserves to be acknowledged.



Josefine Speyer
One of the UK's leading voices in natural death and death education, Josefine shared her decades-long commitment to empowering people to take control of their dying and after-death care, and how she's helped challenge outdated taboos.

Encouraging open and honest conversations about death

We believe talking openly about death and dying helps people feel less alone and more supported. We know it can be difficult to find the right words, especially when it comes to children or those unfamiliar with death. That's why we've developed helpful resources and guidance to make these conversations easier.

Shelagh Freeman, our End of Life Care Facilitator, reflects on the challenges of discussing death.

"We often use phrases like 'passed away' or 'gone to a better place' to soften the reality," she said.

"While well-meaning, these can sometimes prevent honest communication. Using direct language helps people understand and come to terms with what's happening. It's about practicing compassion and empathy and being brave enough to face the discomfort, so no one feels lost or confused."

Supporting children through grief is a vital part of our work. Emily Wilton, Family Support Worker, explains:

"Children process grief very differently to adults. Some may become withdrawn or act out because they don't fully understand what's happened. Our role is to provide a safe, flexible space where children feel comfortable to express their feelings in their own way. It's important to remember that there's no 'right' way to grieve, we offer tailored support to help each child and family find their path."



Erica and Shelagh

Using our voice to push for fairer funding

We are not an NHS hospice.

That means we must raise over

£11 million

each year to continue to provide our crucial palliative and end of life care.

In 2024-25, we continued to speak out about the urgent need for fairer and more sustainable hospice funding, both locally and nationally.

We joined the national Write to Your MP campaign, led by Hospice UK, encouraging people to contact their local MP in support of better hospice funding. Our message was clear: the money we receive from the NHS does not cover the cost of the care they ask us to provide. That leaves a shortfall of £11 million each year, money we must raise ourselves to keep going.

We shared this message across our website, emails and social media, empowering our community to take action if they felt moved to do so. And they did.

More than 1,990 letters were sent to MPs in our catchment area, making up 12.4% of the national total. Chesterfield, North East Derbyshire and Bolsover were the top three constituencies in the UK for letters sent.

As a direct result:

- Toby Perkins MP submitted four Parliamentary Written Questions on hospice funding to the Secretary of State for Health.
- He also pledged his support in Parliament and in a blog for Twist magazine.
- Over 880 of his constituents contacted him about the campaign, a huge show of local support.

- Louise Sandher-Jones MP named hospice funding as the number one issue being raised by fellow MPs.
- We secured visits from MPs Toby Perkins, Louise Sandher-Jones and Jon Pearce to discuss the challenges we face.

We also achieved several pieces of media coverage in local and national outlets, helping to raise public awareness of the realities behind our funding model.

We know that when people understand the pressures we face, they want to help, whether that's by donating, sharing their story, or calling for change.

Life's Final Chapter

In October 2024, to coincide with Hospice Care Week, we launched Life's Final Chapter, a powerful online photography exhibition created in collaboration with Derbyshire-based photographer Billy Bye.

Through striking portraits and honest stories, the exhibition gives voice to 15 people whose lives have been touched by death from those facing a terminal diagnosis, to people grieving someone important, to the healthcare professionals who care for them.

One of those featured was Michael Siddall, from Clowne, who lives with stage four prostate cancer and accesses our Day Services support.

Michael shared: "Sharing my story for the exhibition has made me think positively, with an aim to live as good a life as possible for as long as I can."

Billy's raw and moving images, captured on site at Ashgate, sought to destigmatise conversations around death and dying, while offering moments of empathy and reflection. The stories were brought to life by Ashgate's Marketing and Communications team, supported by volunteer videographer Emily Brown.



The response was overwhelmingly positive, from those at Ashgate and beyond. The exhibition received regional media coverage, including from BBC News and Derbyshire Times, and Life's Final Chapter was one of the most visited pages on our website that week.

By creating space for people to share their experiences and be heard, the exhibition helped open up conversations that too often go unsaid.

View the full exhibition:
www.ashgatehospice.org.uk/final-chapter

Scan me

Making headlines

This year marked our most successful year ever for media coverage, with 569 stories published or broadcast, a 52% increase over the previous 12 months.

From national TV news to local newspapers, radio and online platforms, our stories reached more people than ever before. This growing visibility helped raise public understanding of hospice care, highlight the devastating impact of underfunding, and encourage more open conversations about death and dying.

One of our biggest moments came in April, when we worked with Hospice UK on a major news story about the national hospice funding crisis. As part of this, our Director of Care Services, Claire Shaw, appeared live on the BBC Breakfast sofa, calling for urgent financial support from government and decision-makers.

Claire was joined by a representative from Hospice UK, and together they spoke about the growing pressures on hospices like Ashgate, at a time when costs are rising and funding is falling short. The segment aired just hours before a debate in parliament, helping shape the national conversation.

Later in the year, BBC Health Editor Hugh Pym visited Ashgate as part of a special feature on the hospice funding crisis. Broadcast on BBC News at Six and Ten, the report featured powerful interviews with our Chief Executive Barbara-Anne Walker, Medical Director Jamie Mayers, and people receiving care at the hospice, alongside those important to them.

Hugh's report brought national attention to the human cost of underfunding, including the painful reality that we cannot open all 21 of our inpatient beds due to a lack of sustainable funding.



Connecting with our community online

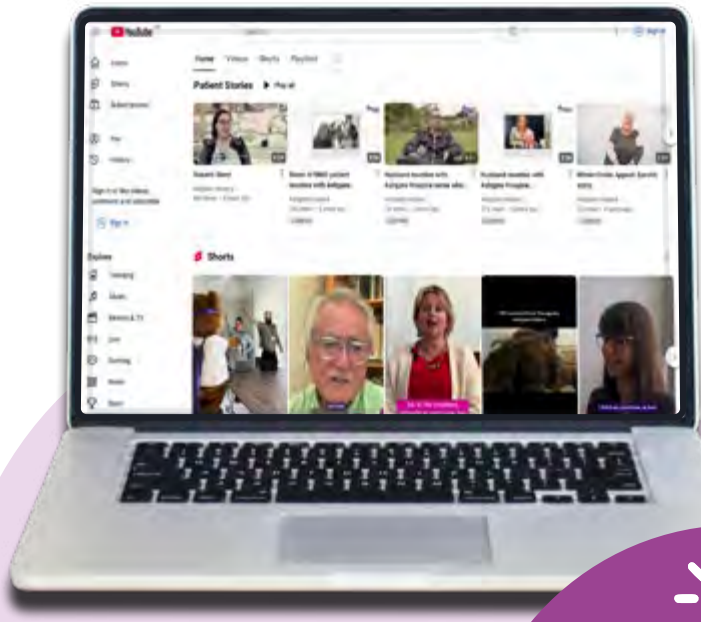
Our online community is an extension of everything we stand for, a space where people can connect, share, support one another and feel part of something meaningful. Whether it's through Facebook, Instagram, LinkedIn, YouTube or TikTok, these platforms help us reach thousands of people with important conversations about hospice care, bereavement, dying and what matters most at the end of life.

More than 34,000 people now follow Ashgate on social media, a growing, compassionate community. Whether they're fundraising, sharing their stories, supporting others, or simply finding comfort in knowing we're here, each one is part of something meaningful.

It's where we shine a light on stories that need to be heard. Campaigns like Life's Final Chapter helped spark conversations that too often go unspoken. At Christmas and in spring, targeted online appeals raised vital funds to support local people. Our podcast reached wider audiences through collaboration, with guests helping spread our message even further.

These platforms are also how we live our values, by creating safe, respectful spaces where everyone feels seen and supported. We continue to stand as proud allies to marginalised communities and mark significant cultural and religious moments throughout the year. And in keeping with those values, we stepped away from X (formerly Twitter), choosing to focus our energy on spaces that support more thoughtful, kind and constructive conversations.

Our online community matters, to us, and to so many people across North Derbyshire and beyond.







More than 34,000 people now follow us on social media



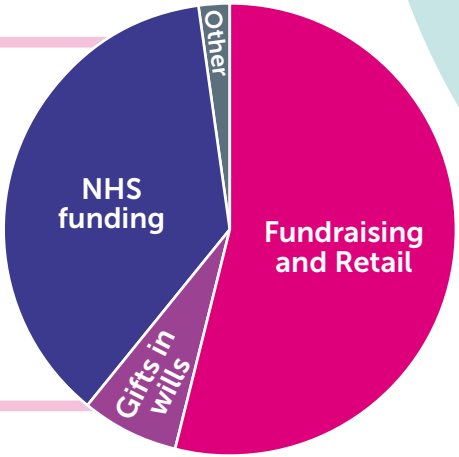
Our community: Funding outstanding care

Ashgate simply could not be here without our supporters. Whether through taking on fundraising challenges, donating or shopping in our charity shops and coffee shops, giving in memory, or leaving a gift in a will, every act of generosity plays a vital role in funding outstanding care for local people.

This year, our community once again came together to raise this crucial income. Their support has helped patients spend their final days in the place they feel safest, made sure the people important to them can be by their side, and ensured no one has to face death alone.

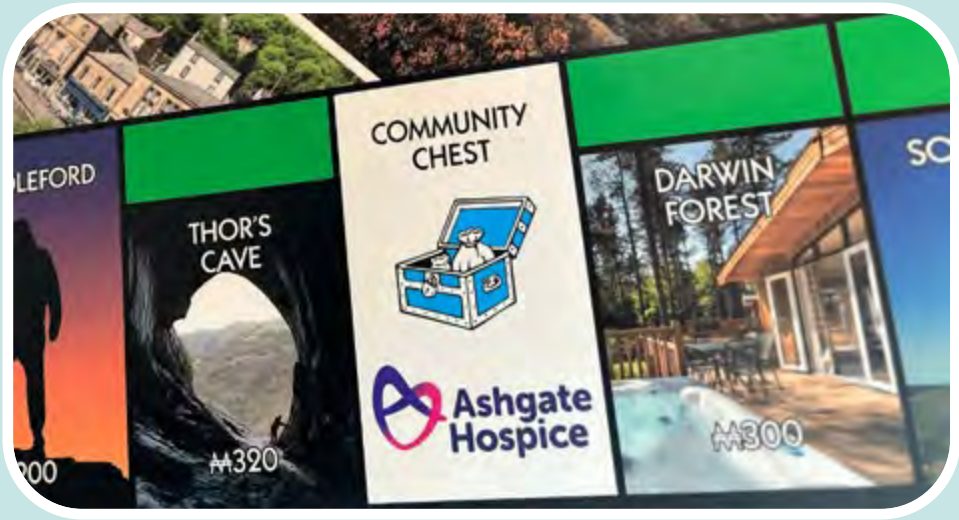
From spectacular events like our Sparkle Night Walk, to the quiet commitment of regular givers, together, they've made outstanding care possible.

We are not an NHS hospice. Less than a third of our income comes from local NHS budgets, and that percentage is reducing each year. That leaves a funding gap of over £11 million, which we must raise through fundraising, retail and donations to keep our care going.



Did you know?

Ashgate now features on the Peak District edition of the Monopoly board! We're proud to be one of the local landmarks chosen to represent our beautiful region. Thank you to Winning Moves for including us.



Outstanding impact through our shops and coffee shops

Our Retail teams have once again delivered an exceptional year, helping to fund outstanding care through their dedication, creativity and tireless hard work. Across our shops, coffee shops, donation centre and online sales, they exceeded our income targets for the fourth year running, achieving the highest level of income in Ashgate's history.

Coffee with a cause

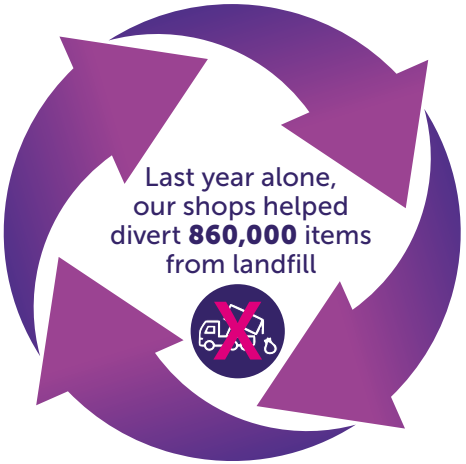
Our two coffee shops continue to be warm, welcoming spaces where customers can connect over a cuppa. In 2024-25, we sold 16,886 lattes and toasted 7,105 teacakes, our most popular drink and food items of the year.

Our coffee shops also provided support to their local communities, from the Warm Spaces initiative in Clowne to the "Cuppa with a Copper" sessions hosted in partnership with Derbyshire Police in Hasland.



Record-breaking retail success

From vintage treasures to everyday essentials, every item sold in our shops helps fund specialist palliative and end of life care for the people who need us. In 2024-25, we processed more than half a million transactions, with customers buying more than a million individual items. Of those, over 860,000 were donated by our community, saving them from landfill and giving them a new lease of life.



Customers continued to show their support through our Retail Gift Aid scheme, with 4,522 new donors signing up this year. The scheme generated an incredible additional income of £237,177.

Our clearance shops alone sold 229,235 items, raising over £320,000 and supporting our commitment to sustainability.

Meanwhile, our Online Sales team had their best year to date, including a record-breaking auction lot which raised over £20,500 from a mixed donation of collectable coins.



A record-breaking auction lot raised over £20,500 from a mixed donation of collectable coins.

‘They’ve never seen me so happy!’

After her sister-in-law Elaine died, Gloria Cantrell knew she wanted to give something back. So, when she saw a sign outside her local Ashgate shop in Matlock asking for volunteers, she stepped inside and hasn’t looked back.

Now 74, Gloria volunteers four times a week as a Retail Assistant and says she’s never been happier.

“My family tell me they’ve never seen me like this,” she said. “There’s such a sense of satisfaction knowing you’re helping people, and we have such a laugh too!”

Gloria’s connection to Ashgate began when Elaine was cared for on the Inpatient Unit. She remembers visiting every day and being struck by the kindness and compassion of the team.

She added: “The care was brilliant, you couldn’t fault it. Elaine would have said the same.”

From sorting donations and serving customers to trying on fancy dress outfits when they come in, Gloria brings joy and energy to everything she does.

“Life’s too short, you’ve just got to go and do things. Volunteering at Ashgate is the best thing I’ve ever done.”



Reaching further into the community

Our donation centre processed over 115,000 bags of stock this year, keeping our shops well-stocked and raising vital funds. On average, every customer purchased two items per visit, demonstrating the value and variety our shops offer.



Retail recognised in our CQC report

This year, our shops were praised by the Care Quality Commission (CQC) as part of our overall Outstanding rating. The report highlighted our commitment to inclusion and accessibility, reflecting the care and thought that goes into every aspect of our retail operations.

None of these achievements would be possible without our brilliant staff and volunteers, whose commitment and kindness help make outstanding care possible every day.



Our younger fundraising heroes

In October, more than 1,300 children and adults pulled on their capes and masks to take part in our second Superhero Night Walk, raising a brilliant £60,725 towards our care.

The family-friendly event, sponsored by Motan Colortronic, took place in Queen's Park, Chesterfield, with walkers taking on one or three-mile routes to celebrate or remember the people important to them. It was a night full of stilt walkers, big bubbles, glow-in-the-dark masks, and moving tributes to loved ones.

We're proud that more of our fundraising events are now open to people of all ages, helping children and families come together to have fun, share memories and raise money for a cause that means something to them.

Thanks to the incredible support of our community, the money raised could fund a Palliative Care Specialist Nurse to deliver expert care at home for more than a year, supporting people at the end of their lives to be where they want to be, with those important to them.



Photos: Nick Rhodes

Fletcher's story: Walking in memory of his superhero dad

Fletcher Parkes was just 10 months old when his dad Gavin was diagnosed with a rare and incurable form of bladder cancer. In the last weeks of his life, Gavin was admitted to our Inpatient Unit where we supported him, his partner Lori and baby Fletcher.

The hospice team arranged a special wedding for Gavin and Lori just days before he died, complete with hair and makeup, cake, and a car to take them to the chapel. Fletcher was right there with them.

Now six, Fletcher took part in his second Superhero Night Walk dressed proudly in his Superman costume, walking in memory of the dad he calls his hero.

His mum Lori said: "Fletcher is just starting to feel the impact of losing his dad. He's receiving child bereavement counselling from Emily at Ashgate, which he loves. Taking part in the Superhero Night Walk was Fletcher's way of giving something back, and dressing up as Superman made it all the more special."

Since Gavin died, Fletcher's family and friends have raised more than £10,000 to support our care.



Pushing limits for hospice care

Challenge events raised a fantastic £164,250 last year, thanks to the determination and generosity of our supporters. From the London Marathon to the Great North Run, skydives and epic cycling routes, people pushed themselves to their limits to make a difference.

One of them was lifestyle coach Levi Stefan, who completed an incredible 'Man vs Mountain' challenge in memory of his grandad, Philip Saunders, a Paralympic gold medallist who was cared for at Ashgate before he died in 2012.

Levi hiked both the National and Yorkshire Three Peaks in just 48 hours, before cycling 100 miles back to the hospice. At each summit, he planted a memorial flag for Philip, who inspired him with his strength, resilience and zest for life.

"Despite a sad ending for my grandad, I knew I wanted to give back one day," said Levi. "I got to witness first-hand the amazing work all the staff do to help comfort, support and look after everyone in their care at the hospice."









Challenge events raised a fantastic £164,250 last year!

Every step sparkled just a little brighter this year

The Sparkle Night Walk broke every record going last year, raising more than £341,000 for end of life care in North Derbyshire. A staggering 3,400 walkers donned pink and flashing bunny ears and lit up Chesterfield's streets in memory of someone special and in support of local hospice care.

The total raised, an incredible £341,854, is the most we've ever seen from the event! It could fund a bed on our Inpatient Unit for a year, giving someone specialist 24/7 care when they need it most.

Thanks to generous support from our headline sponsor NOCN Group and other local businesses, we saved £47,000 in products and services to make this event possible, helping even more of the money raised go directly to the care we provide.

Behind every sparkling pair of ears is a story. One of the families who walked this year was 'Kate's Legacy', a 21-strong team walking in memory of Kate Holmes, who died in June 2023 after being supported by our community nurses.

Her granddaughter Leanne said: "The night was just beautiful, it was almost a memorial. We wanted to turn our grief into something positive. Nana would've been so proud."

And it's not just the walkers who made it possible. Volunteers like Hannah Taylor, whose dad Richard died at Ashgate in 2021, gave their time to make sure everything ran smoothly.

Hannah said: "Even if you don't have a personal connection with the hospice, you can offer your support for those who do. The Sparkle Night Walk is a fun, colourful and special way to help."

Since Richard's death, Hannah and her family have raised more than £15,000 to support hospice care.



A staggering 3,400 walkers raised the most we've ever seen from the event!



'Kate's Legacy' team



Hannah (left)

Photo: Eliie Rhodes

Did you know?

We handed out more than 3,200 bananas to keep our walkers going – that's a lot of potassium-powered fundraising!

Stepping through Derbyshire

This year's High Peak Trail Walk was nothing short of extraordinary, with 600 walkers taking part, nearly double the 306 who joined in 2024!

Held on Sunday 23 March, the challenge follows the historic route of the former Cromford and High Peak Railway, winding through some of Derbyshire's most scenic countryside. Walkers could choose from a 17-mile trek, an 11-mile ramble, or a shorter 3.5-mile walk perfect for families and those new to walking.

We're thrilled to announce that the event raised a record-breaking £66,235 to support our hospice care.

A huge thank you to every walker for their incredible fundraising and the wonderful energy they brought on the day! We're also very grateful to our main sponsors, Darwin Forest Luxury Lodges, our T-shirt sponsors, We Do Workwear, all the local businesses who helped make the event possible, and our amazing volunteers for their unrivalled dedication.

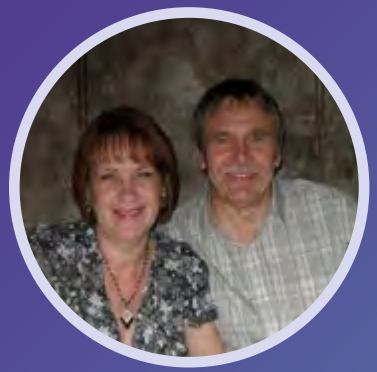


Photo: Nick Rhodes

Photo: Simon Wilkinson

Photo: Nick Rhodes

Remembering Linda



Among those taking part was Mick Ellison, who walked in memory of his wife Linda, after she received care on our Inpatient Unit before her death in October 2022.

Mick shared how the walk gave him and his family a precious opportunity to remember Linda and celebrate her life.

"I first took part in the High Peak Trail Walk last year in memory of my lovely wife of 46 years, Linda," he said.

"We walked together many times in the Peak District and would stay out there all day. Doing the walk with my children gave us a chance to talk, spend time together and remember Linda for the kind and caring person she was.

"It is a place where the care and compassion are unrivalled. I could not have got through the terrible time of Linda's illness without Ashgate Hospice's support. I have since benefitted from the hospice's bereavement services and met many lovely people."



Hospice-led events that raised the roof

As well as our flagship events like Sparkle Night Walk and Light up a Life, we host a range of other hospice-led events through the year, all helping to raise vital funds and bring people together.

- Santa came to visit our site at Old Brampton and raised £5,650, with smiles and mince pies all round
- Tractor Fest rolled in with £18,600
- The long-standing 33rd Annual Golf Day raised £30,539
- Our glittering Annual Ball raised a phenomenal £66,370
- Treecycle raised £23,536, with 1,118 trees collected by 10 vans and volunteers from seven brilliant businesses.



Photo: Nick Rhodes

Photo: Ellie Rhodes

Photo: Ellie Rhodes

How our community came together to remember someone special



This year's Light up a Life was our most successful yet, raising over £52,000 from more than 1,000 dedications made in memory of someone special.

In December, over 650 people came together at the hospice to remember, celebrate and pay tribute, with many travelling from across North Derbyshire and beyond.

About 300 supporters took part in a 1.2-mile procession through Chesterfield, lighting up the streets with personalised lanterns in honour of those no longer with us. At the end of the route, they were joined by others for a moving outdoor ceremony in our hospice gardens. The event was led by our Spiritual Care Practitioner, Siobhan Hoyes, and featured music from Sheffield Cancer Choir.

In the days that followed, our open gardens gave people another opportunity to visit, reflect and find comfort during the festive season.

We're incredibly grateful to **Harold Lilleker & Sons Ltd** for sponsoring the appeal, and to everyone who made a dedication, joined us on the night, or supported in any way.



Photos: Tom Hodgson

Festive giving and ongoing support

Our Christmas Appeal raised more than ever before, an incredible £48,000 from kind-hearted supporters across the region.

We also ended the year with 1,000 committed regular givers, a 5% increase on the previous year. Their ongoing donations provided over £100,000 in sustainable, predictable income to help fund vital care when it's needed most.



A legacy of care

This year we proudly joined Hospice UK's national legacy campaign, helping more people understand how leaving a gift in your will, no matter the size, can have a powerful and lasting impact.

We're so grateful to those who've chosen to remember Ashgate in this special way.

In recent years, we've been gifted everything from cash gifts, jewellery and cars to caravans and even houses, all helping to fund vital care for future generations.

Gifts in Wills made a life-changing difference

This year, we received £1,000,192 in Gifts in Wills. These donations are a vital part of our future, allowing us to plan ahead and continue providing free specialist care when it's needed most.

A huge thank you to the local solicitors who supported our free Will writing scheme, **BRM Solicitors**, **Graysons Solicitors**, **Best Solicitors** and **Elliot Mather Solicitors**, together raising **£23,000**.

£1,000,192
left to Ashgate as gifts in wills



Cuddle bed support brings comfort to Ashgate patients

Over the past ten months, the community in Clay Cross and Holmgate, together with the dedicated friends of The Woodthorpe Inn, have raised an extraordinary £23,453. This remarkable support has enabled the purchase of a cuddle bed, providing comfort to patients here at Ashgate.

Their generosity is a powerful reminder of how much local support contributes to the outstanding care we deliver every day. The group is already planning further fundraising to provide more much-needed equipment, and we look forward to seeing their continued impact.



Our lottery players raised an incredible £735,832 this year

With over 10,500 players and 3,400 lucky numbers in play each week, the Ashgate Lottery is one of our biggest sources of regular income. In return, we gave away £97,500 in cash prizes and £26,000 in shop vouchers, including our rollover wins!

Our seasonal bumper draws raised even more:

- **Spring draw:** £20,394 in tickets and £6,715 in donations
- **Christmas draw:** £26,310 in tickets and £9,488 in donations



Did you know?

giftaid it ☑

By ticking the Gift Aid box, our supporters helped us claim an extra £246,763 from the government, at no extra cost to them. That's money that went straight back into hospice care.

How local people and businesses made outstanding care possible

Outstanding care at Ashgate wouldn't be possible without the generosity and support of the people around us. Whether it was a business choosing us as their charity of the year, a local supplier offering goods and expertise, or people coming together to remember someone important, every act of kindness helped us be there when it mattered most.

Corporate fundraising: from bake sales to skydives

Businesses across North Derbyshire chose Ashgate as their charity of the year, and went above and beyond to support local hospice care.

- **Global Brands** raised £6,400 through staff-led activities, from bake sales and pub quizzes to walks and donations for our drinks trolley.
- **Handelsbanken** raised £6,500 through a 34-mile walk, a sky dive, and a Care for a Cuppa event.
- **The Insurance Institute of Sheffield** raised £2,700 for Ashgate as their chosen charity.
- **Julia Rausing Trust** gave us a grant of £150,000 per year for three years.
- **Albert Hunt** gave us a grant of £30,000.
- In total, more than **50 corporate volunteering days** were gifted by local organisations, giving their time and talents to support our work.

Alternative ways to give

This year we launched our Amazon Wishlist, giving supporters a simple way to donate items that make a difference to the people we care for, from physiotherapy aids and comforting pyjamas, to books and sensory toys for bereaved children.

Gifts in kind: practical help with a big impact

- We received **£416,725 worth of gifts in kind**, generous donations of time, services and goods that helped us do more with every pound raised.
- **MPC Systems** helped set up our new Fundraising Centre, installing racking and warehouse equipment.
- **PDM** printed our promotional materials free of charge.
- **Buxton Water, Andrews Coaches** and **Sunbelt** supported events with refreshments, transport and equipment.
- Many suppliers donated materials, from ceiling tiles and plasterboard to flooring, blinds and curtains, to help us refurbish our Day Services space.

Event partnerships that made a big difference

From dance anthems to decked-out tractors, our community found all sorts of creative ways to support our care.

As the chosen charity for Chatsworth's Classic Ibiza event, we raised an incredible £7,699, with guests donating generously throughout the night to support local hospice care.

Transforming our Day Services together

Thanks to donations and gifts in kind, we raised and saved more than £370,000 to refurbish and reopen our Day Services, giving people living with a life-limiting and incurable illness a welcoming space to meet others, access therapies, and get the care they need.

- **£145,000** came from generous trusts
- The rest was gifted in the form of materials, expertise and fundraising from local supporters.

Did you know? Your pennies really do make a difference, our 740 collection tins dotted around North Derbyshire raised an incredible **£45,505** last year.



Our Future

To continue being here for local people, we must look ahead with clarity and courage. We're investing in our teams, strengthening our services, and planning for a future where everyone in North Derbyshire has access to the outstanding care they deserve, now and for generations to come.

Reaching people earlier and faster

We're expanding our Single Point of Access (SPA) team so we can respond to referrals more quickly and consistently. We're also developing a rapid response service to support people at home with symptom management and end of life care. Together, these changes will help us reach more people, earlier, and keep them where they feel safest and most comfortable.

Making sure people are in the right place at the right time

We're improving how care flows across our services, from home, to clinic, to ward, so that people are always supported in the place that's right for them. New nurse-led clinics and better coordination between teams will help us offer more personalised, joined-up care.

Sharing our expertise to support others

As a centre of excellence for palliative and end of life care, we're growing our education work to help more people feel confident talking about and supporting others through symptom management, dying and grief. We'll also keep listening and learning from the people we care for, their experiences shape how we improve and adapt for the future.

Campaigning for sustainable hospice funding

We've spent the past year raising our voice in the media, in Parliament and in our community, to highlight the growing crisis in hospice funding. But despite our efforts, we still don't have secure or sustainable funding for the care our community needs.

In 2025-26, that campaign becomes even more urgent. Costs are rising, demand is increasing, and NHS funding simply isn't keeping pace. Without change, services like ours are at real risk.

In the year ahead, we'll keep pushing for long-term solutions. We'll work closely with Hospice UK, challenge decision-makers, and ask our community to stand with us, because our care isn't a luxury. It's a lifeline. And it must not be allowed to disappear.

Exploring new income opportunities

We've already started putting innovative ideas into action to help secure Ashgate's long-term sustainability, and we'll continue to build on this over the year ahead.

This includes exploring new business opportunities that align with our mission to provide compassionate, specialist palliative and end of life care across North Derbyshire. From launching an in-memory fundraising product to identifying new locations for our shops and testing new retail formats, we're working to strengthen and diversify our income.

In 2025-26, we'll continue to trial new approaches, review what's already working, and focus on increasing both the financial and social return of our retail and fundraising operations, ensuring we deliver real value for the communities we serve.

Developing and supporting our people

In the year ahead, we'll continue to invest in the growth and wellbeing of our workforce, supporting every person at Ashgate to feel confident, valued and empowered.

We'll deliver new opportunities for learning and development, including bitesize workshops for managers focused on building the key skills and behaviours needed to lead with compassion. We'll widen our use of Spotlight, a strengths-based tool to help individuals and teams excel at what they do best, improving performance and connection across the hospice.

To further our commitment to inclusion, we'll launch a new programme to develop Ashgate Allies, creating a supportive network to champion equality, diversity and inclusion alongside our growing EDI advisory group.

We're also expanding our education offer, creating and sharing new materials to support more people, both within and beyond Ashgate, to talk openly about death and dying.

By reaching more of our workforce, patients, carers and local communities, we'll help build the skills and confidence needed to care for others, and to be cared for, with dignity and compassion.

Empowering our team through digital confidence

As technology continues to transform the way we work, we're committed to building the digital confidence and skills of our workforce.

Over the coming year, we'll invest in targeted training and practical resources to ensure staff and volunteers feel equipped to use the right tools in the right way, helping them work more efficiently, feel more connected, and deliver even better care to patients and the people important to them.

By embedding digital literacy into our everyday practice, we'll support a more empowered workforce and a more responsive, future-ready hospice.



Leadership and oversight at Ashgate

Meet our Board of Trustees

Our Trustees are volunteers who bring their professional skills and life experiences to guide our strategic direction. They are not involved in the daily operations of Ashgate; instead, they delegate this responsibility to the Chief Executive and the Leadership Team. Their main role is to ensure that the hospice is governed effectively and meets high standards of quality, safety, and regulatory requirements.

Trustees receive a full induction and take part in important training, just like our staff and volunteers. They also take part in shadowing days, where they shadow both clinical and non-clinical teams. This helps them understand our services better, meet staff and volunteers, and ensure we maintain high performance and quality.

For more information, please visit our website.

Scan me

Our Leadership Team



Barbara-Anne Walker
Chief Executive

Matt Corbishley
Deputy Chief Executive

Claire Blakey
Director of Quality

Heidi Golden
Head of Corporate Governance

Richard Jones
Director of Finance

Jamie Mayers
Medical Director

Rebekah Neelin
Director of People and Culture

Claire Shaw
Director of Care Services

Laura Stevens
Deputy Director of Income Generation

Jack Wood
Director of Income Generation

Our Board of Trustees



Chris Hallam
Chair of the Board of Trustees

Louise Allen

Lucy Atkinson
Associate Trustee

Jon Burton
Associate Trustee

Steven Brennan-Collis

Ruth Cooper

Stephen Holgate

Helen Johnson

Philip Kirkham
Associate Trustee

Chris Laxton-Kane
Associate Trustee

Jon Sargeant

Mike Simms

Clare Wasteney
Freedom to Speak Up Trustee Lead

Kirstie Wilson
Chair of the Ashgate Hospicecare Shops Ltd Board

Ashgate Hospice

Compassionate care for everyone

Registered Charity No. 700636

Our Ashgate Governance Framework outlines a strong structure for governance and assurance throughout the hospice. It ensures a clear connection from the frontline staff to the Board. We use a proponency approach to champion our four strategic ambitions.

Each ambition has a committee which oversees the relevant delivery plans:

- **Our Care Committee:** Oversees clinical quality, safety and patient experience.
- **Our People Committee:** Focuses on staff, volunteers, and information governance.
- **Our Future Committee:** Covers income generation, financial management, procurement, and estates.
- **Our Voice Committee:** Looks at communications, campaigning, research, and education

This structure allows our Board meetings and development days to focus on long-term strategy, charity performance, risk management, and sustainability. The Board and committees meet every quarter to ensure we stay on track with our strategic ambitions.

This approach gives trustees the flexibility to engage with the hospice in more meaningful ways whilst keeping a focus on key areas of strategic importance. It also ensures that the Board remains focused on the bigger picture, while the Leadership team manages the day-to-day operations.

Public benefit

Our Trustees follow the Charity Commission's guidance on public benefit when they review and plan Ashgate's goals and activities. They think carefully about how our work supports these goals. The Trustees are confident that this report clearly shows our commitment to public benefit by explaining our purpose, goals, plans, services, improvements, and how we aim to make our care even better in the future.

Upholding fundraising standards

Ashgate prioritises supporter care by regularly training our staff and volunteers. We are registered with the Fundraising Regulator and adhere to principles of legality, transparency, honesty, and respect in all our fundraising efforts. We actively monitor third-party fundraisers by seeking supporter feedback, providing training, and promptly addressing any concerns raised. Notably, Ashgate received no complaints in the past year.

Our comprehensive approach includes robust policies and standards to safeguard vulnerable individuals and the public from inappropriate conduct. We provide training to all involved in fundraising and maintain clear processes to oversee and manage every interaction. Throughout the year, we found no instances where staff, volunteers, professional fundraisers, or commercial partners failed to comply with our established policies and standards.

Registered with FUNDRAISING REGULATOR



Our finances at a glance

When it comes to delivering crucial palliative and end of life care, we make every penny count.



Increasing Challenges

2024-25 continued to be financially challenging, with no sign that this is about to change. Despite the improvements to the Joined up Care Derbyshire (JUCD) contract which in 2024-25 had an annual value of £4,659k (£5,351k including virtual ward monies), the NHS funding only covered 56.7% of the total cost to Ashgate of delivering those services. In 2023-24 this figure was just over 60% and in 2025-26 this will be even lower than 2024-25 levels based on current planning assumptions. Whilst this situation is not unique to Ashgate, it is clearly not one which is sustainable in the long term and the leadership team and board of trustees remain committed to the ongoing campaign for fairer funding for Specialist Palliative End of Life Care.

Performance vs Budget

The hospice board approved a deficit budget of £781k for 2024-25 and whilst this represented an overall larger deficit than the 2023-24 outturn deficit of £525k, the overall performance was in line with this target. Total Income for the year was £29k higher than budget at £15,583k with a better than budget performance in fundraising (£577k higher than budget at £1,336k) and the unbudgeted Hospices UK grant income (£214k) more than offsetting the legacies income shortfall of £650k (£1,000k vs budget of £1,650k). Total expenditure at £16,347k was just £12k (0.1%) higher than the budget of £16,335k – reflecting a focussed approach to cost control whilst still delivering outstanding services.

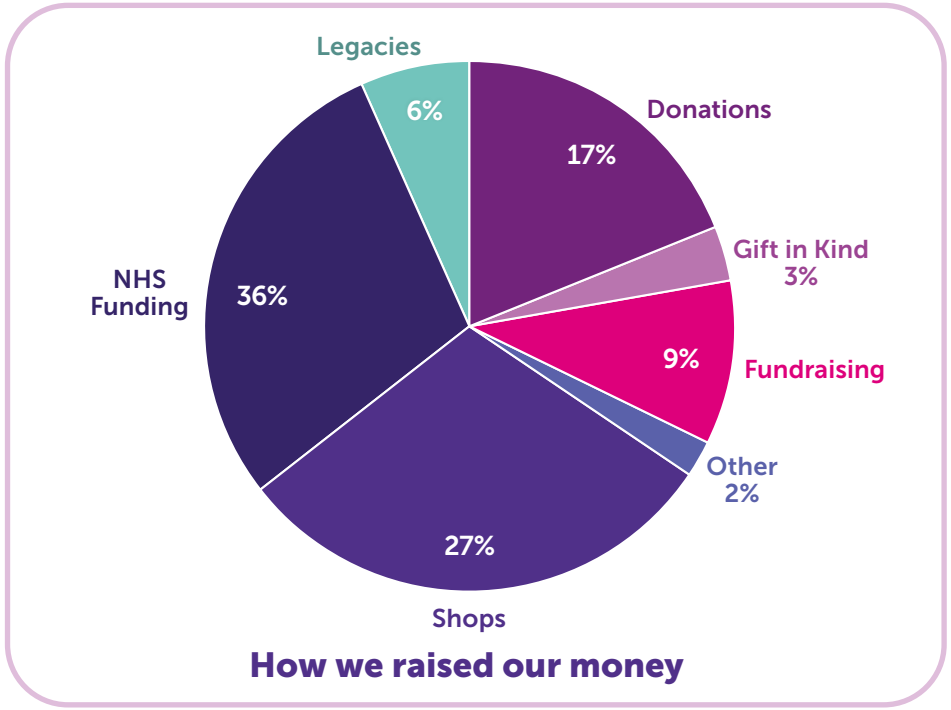
Whilst the £214k of capital grant income received from The Department of Health and Social Care (DHSC) via Hospice UK was extremely welcome, it is important to note that there are restrictions in the way we are allowed to spend this money, including the fact that we cannot use it to fund the ongoing costs of caregiving such as staff salaries.

Financial review

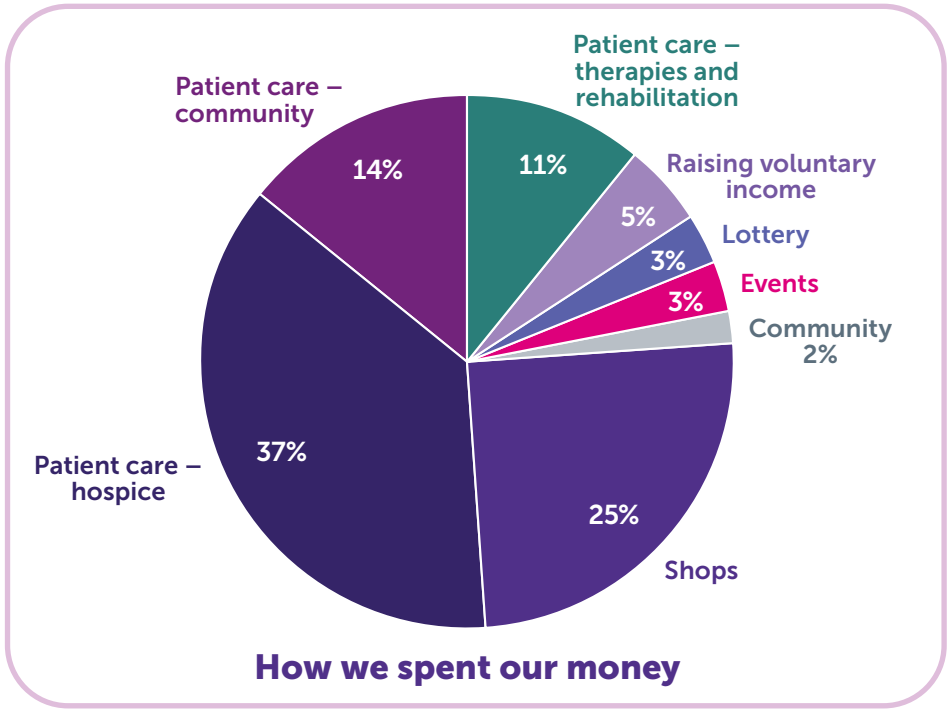
Here for the future

The outlook remains challenging. We are forecasting that costs will continue to rise at a faster pace than income. In addition, our charitable reserves will not allow for us to continue to cross subsidise the shortfalls in funding which we receive from the NHS, and we have made this clear to the Derby and Derbyshire Integrated Commissioning Board with whom we continue to negotiate. In order to mitigate against all of the above, in October 2025 we announced plans to reduce expenditure by £2.6m and to make reductions in services to achieve this.

We will continue to rely on the contributions of our dedicated supporters – for which we are truly grateful – and will continue to look for innovative ways to increase our fundraising and retail income whilst exploring new business initiatives to diversify and increase our revenue in line with our ethos and charitable ambitions. At the same time to continue to control expenditure, we will continue to monitor our costs and seek efficiencies within our supply chain and we will assess our suppliers and explore how we can benefit from more gifts in kind opportunities.



How we raised our money



How we spent our money

Reference and Administrative Information

Charity Name: Ashgate Hospicecare
Charity Registration Number: 700636

Company Registration Number: 02263980

Registered Office and Operational address:
Ashgate Road, Old Brampton, Chesterfield, S42 7JD

This Trustees' Report also meets the requirements of a Directors' Report for Companies Act purposes.

Directors and Trustees

Louise Allen (appointed 24/07/2025)
Lynn Andrews (resigned 29/10/2024)
Mark Bailey (appointed 21/05/2024, resigned 23/10/2025)
Steven Brennan-Collis
Dr Ruth Cooper
Christopher Hallam, Chair (appointed 21/05/2024)
Stephen Holgate (appointed 24/07/2025)
Helen Johnson (appointed 24/07/2025)
Kirsty Mcmillan (resigned 18/03/2025)
Nigel Myhill (resigned 06/12/2024)
Malcolm Pope, Chair (resigned 22/10/2024)
Tim Robinson (resigned 23/10/2025)
Jonathan Sargeant (appointed 24/07/2025)
John Simms (appointed 24/07/2025)
Alison Wasteney (appointed 24/07/2025)
Victoria Webb (resigned 30/05/2025)
Kirstie Wilson

Company Secretary

Heidi Golden

Leadership Team

Claire Blakey
Matt Corbishley
Heidi Golden
Richard Jones
Rebekah Neelin
Jamie Mayers
Claire Shaw
Laura Stevens
Barbara-Anne Walker
Jack Wood

Auditors

Azets Audit Services Limited,
12 King Street,
Leeds, LS1 2HL

Bankers

Barclays, 1 St. Paul's Place,
121 Norfolk Street,
Sheffield, S1 2JW

Governing Document

Ashgate Hospicecare is a charitable company limited by guarantee, incorporated on 2 June 1988 and registered as a charity in England and Wales on 14 September 1988.

The charity's objects are specifically restricted to the relief of sickness and the preservation of health among people residing permanently, or temporarily, in North Derbyshire.

The company was established under a Memorandum of Association and is governed under its Articles of Association which were revised and amended in 2016, to ensure that appropriate consideration was given to tenures and succession planning for the Chair and Trustees.

Related Parties

Ashgate Hospicecare Shops Limited is a subsidiary of Ashgate Hospicecare. During 2024/25, it operated seventeen shops and two coffee shops, the profits of which are spent wholly supporting the work of Ashgate Hospicecare.

Ashgate Hospicecare is a partner and shareholder in Hospice Quality Partnership (HQP). HQP was set up to support independent hospices with procurement, benchmarking and collaboration regarding the improvement of value and reduction of cost, as well as the potential to generate new income through dividends in the future. The hospice sees significant benefits in being a Partner/Shareholder with HQP and is supportive of the company's aims.

Financial Review

The consolidated net deficit before investment movements and tax for 24/25 is £764k compared to a net deficit of £582k in 23/24.

Overall income has grown by almost £1.2m from £14,401k in 2023/24 to £15,583k in 2024/25, which was driven by a number of factors.

Overall Donations and Legacies income grew by £399k (from £3,626k to £4,025k) with a £772k increase in donations offset by a £373k decrease in legacies received. Legacy income is accounted for in the same way as in 23/24 in line with Charities SORP. The nature of donations and, particularly, legacy income means that this income can be difficult to forecast accurately and can vary greatly from year to year.

Retail continued the trend of post-Covid recovery with an increase of £222k (5%) from £4,036k to £4,258k, again reflecting strong donations, strong brand awareness and increased recognition of Hospice shops as both a value and quality retailer.

Fundraising and lottery income also increased by £124k (10%) from £1,212k to £1,336k reflecting both the strength of the local support for the work of our hospice and the outstanding work of our fundraising teams.

Income from charitable activities increased by £468k, due to a £214k capital grant received from the DHSC via Hospice UK, with the remaining increase as a result of an annual uplift to the main contract with Joined Up Care Derbyshire.

Investment income fell by £54k (from £158k to £104k) as a result of lower returns on cash assets.

Total expenditure increased by £1,363k (9%) from £14,983k to £16,347k driven mainly by an increase of £1,056k in cost of charitable activities primarily due to inflationary pressures on salaries, consumables, and energy costs. The increase in retail and other trading costs of 7% (£325k) was broadly in line with the overall increase in income for this area although within retail itself, increasing pressures were felt in terms of overall margins, reflecting the broader economic climate.

Total funds have decreased by £758k because of the deficit described above, which was only slightly mitigated by a £6k increase in investment valuations.

Investment Policy

The hospice has a portfolio of long-term investments, deposit accounts and an interest-bearing current account, to ensure appropriate liquidity of funds. Investments were £1,030k at 31 March 2025, up 0.6% from 31 March 2024 (£1,024k). With regard to the ethical investment element of the Policy, the Trustees do not wish to adopt an exclusionary policy when considering prospective investments, or potential donation receipts. However, individual investment proposals, and donations, may be rejected if they are perceived to be in conflict with the purpose of the Charity.

Reserves Policy

Reserves are held to give the hospice a financial buffer against shocks to income and expenditure. They are necessary for protecting services in the event of a short-term disruption to normal income streams and they ensure the hospice has funds available to cater for capital works.

The hospice implemented a risk-based reserves policy in 19/20. This has supported subsequent years' strategic decision making and is now subject to review by the "Our Future" Committee (previously this has been subject to regular review in the Finance and Strategy Committee).

Whilst total funds have decreased by 7.3% (£758k) from £10,396k to £9,638k, in line with the deficit for the year, free reserves have only decreased by 365k (11%) from £3,417k to £3,052k. This difference in movement is driven by a £91k reclassification of historical spend and £150k release of designated funds for the refurbishment of the Day Hospice.

The risk-based target for free reserves on 31 March 2025 was £2,340k (23/24 – £2,110k) meaning that the hospice was at 130% of target (23/24 – 162%). It is the intention to review the make-up and calculation of the free reserves target during the coming year. Free reserves are net of restricted funds and designated funds. The purpose of such funds is narrated further in Note 23 of the accounts.

Financial Review continued

Senior Management Remuneration

Pay awards for the workforce are recommended to the Board by the Chief Executive with supporting evidence and rationale from the Leadership Team. No recommendations are made by the Chief Executive or Leadership Team for setting their own pay or remuneration, other than where an explicit recommendation or offer is made by them to forfeit any award. Instead, the Board of Trustees take responsibility for making any such decisions for key senior management personnel based on organisational performance, affordability and taking account of sector benchmarks. The HR team undertake regular pay benchmarking exercises for the workforce in general, using the independent benchmarking tool, Brightmine. This includes review of salaries for Chief Executive and Leadership Team.

Principal Risks and Uncertainties

The Board of Trustees has established processes to assess business and corporate risk. This involves identifying the types of risk the charity faces, prioritising them in terms of potential impact and the likelihood of occurrence, and identifying means of mitigating the risks. This assessment is monitored and updated on a regular basis.

The risk register is monitored by the Leadership Team which meets quarterly to ensure effective operational management of risk. Operational risks are, in turn, reported to the four Committees to ensure effective oversight and escalation. Any corporate risks are reported to the Board to ensure that Trustees are fully appraised of any strategic risks and the actions being taken to mitigate them.

A wide range of policies and procedures have been introduced to minimise risk and ensure compliance with legislation and CQC standards. Specific policies relating to risk include management guidelines, standing financial instructions, health and safety, information governance, clinical issues and employment.

Going Concern and Cashflow

The Trustees have considered the impact of the global economic situation, UK inflation, levels of NHS funding and likely developments in fundraising activities on the company's income and operating cost base. In the light of the recent announcements relating to service cuts the Board are confident that they have in place plans to address the annual deficit and ensure that the hospice is financially sustainable. The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2027 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary. The Board do however recognise that uncertainty exists around the global economy, and impacts on NHS funding for Specialist Palliative end of Life Care and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

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Statement of Trustees' Responsibilities

The trustees (who are also directors of Ashgate Hospicecare for the purposes of company law) are responsible for preparing the Trustees' Annual 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 trustees 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 trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2019 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees 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.

In so far as the trustees are aware:

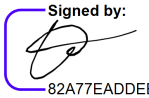
- there is no relevant audit information of which the charitable company's auditor is unaware; and
- the trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Auditors

The auditor, Azets Audit Services Limited, is deemed to be reappointed under section 487(2) of the Companies Act 2006.

By Order of the Board

Signed by:

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15 December 2025

Chris Hallam
Chair of Trustees
Chesterfield

Independent Auditor's Report to the Members of Ashgate Hospicecare

Opinion

We have audited the financial statements of Ashgate Hospicecare (the "parent charity") and its subsidiary (the "group") for the year ended 31 March 2025, which comprise the Consolidated Statement of Financial Activities, the Group and Charity Balance Sheets, the Consolidated Statement of Cash Flows and the related Notes to the Financial Statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and parent charity's affairs as at 31 March 2025 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the group and parent charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

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

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

We have nothing to report in this regard.

Independent Auditor's Report to the Members of Ashgate Hospicecare continued

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report (incorporating the strategic report and the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report (incorporating the strategic report and the directors' report) has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and parent charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

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

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the Trustees 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 they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Our responsibilities for the audit of the financial statements

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

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

Extent to which the audit was considered capable of identifying irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above and on the Financial Reporting Council's website, to detect material misstatements in respect of irregularities, including fraud.

We obtain and update our understanding of the entity, its activities, its control environment, and likely future developments, including in relation to the legal and regulatory framework applicable and how the entity is complying with that framework. Based on this understanding, we identify and assess the risks of material misstatement of the financial statements,

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Independent Auditor's Report to the Members of Ashgate Hospicecare continued

whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. This includes consideration of the risk of acts by the entity that were contrary to applicable laws and regulations, including fraud.

In response to the risk of irregularities and non-compliance with laws and regulations, including fraud, we designed procedures which included:

Enquiry of management and those charged with governance around actual and potential litigation and claims as well as actual, suspected and alleged fraud;

- Reviewing minutes of meetings of those charged with governance;
- Assessing the extent of compliance with the laws and regulations considered to have a direct material effect on the financial statements or the operations of the group through enquiry and inspection;
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations;
- Performing audit work over the risk of management bias and override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for indicators of potential bias;
- Performing audit work over the timing and recognition of income and in particular whether it has been recorded in the correct accounting period.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Use of our report

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

Signed by:
Jessica Lawrence
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15 December 2025

Jessica Lawrence (Audit Partner)
For and on behalf of Azets Audit Services Limited
Chartered Accountants
Senior Statutory Auditor

12 King Street,
Leeds, LS1 2HL

Consolidated Statement of Financial Activities

Incorporating a Consolidated Income and Expenditure Account

For the year ended 31 March 2025

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. A fully detailed Consolidated Statement of Financial Activities for the year ended 31 March 2024 is shown in note 28. The Statement of Financial Activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

		Unrestricted Funds	Designated Funds	Restricted Funds	**2025 Total**	2024 Total
Income:		£	£	£	**£**	£
Donation and legacies						
Donations	(2)	2,779,943	-	244,714	**3,024,657**	2,252,979
Legacies	(3)	1,000,192	-	-	**1,000,192**	1,372,733
		3,780,135	-	244,714	**4,024,849**	3,625,712
Income from other trading activities:						
Shops	(4)	4,257,933	-	-	**4,257,933**	4,036,281
Fundraising	(5)	1,335,373	-	851	**1,336,224**	1,211,967
Other	(6)	209,233	-	-	**209,233**	185,749
		5,802,539	-	851	**5,803,390**	5,433,997
Investment income	(7)	79,102	-	24,520	**103,622**	157,668
Income from charitable activities	(8)	5,437,661	-	213,510	**5,651,171**	5,183,423
Total income		15,099,437	-	483,595	**15,583,032**	14,400,800
Expenditure:						
Costs of raising voluntary income	(9)	782,065	-	-	**782,065**	799,666
Fundraising and other trading costs	(9)	5,284,565	-	-	**5,284,565**	4,959,712
Costs of charitable activities	(9)	10,068,638	-	211,385	**10,280,023**	9,223,901
Total expenditure		16,135,268	-	211,385	**16,346,653**	14,983,279
Net movement in funds before investment gains		(1,035,831)	-	272,210	**(763,621)**	(582,479)
Unrealised gains on investments	(14b)	6,052	-	-	**6,052**	57,975
Corporation tax	(22)	-	-	-	**-**	(428)
Net (expenditure) / income		(1,029,779)	-	272,210	**(757,569)**	(524,932)
Funds transfer	(23)	443,043	-	(443,043)	**-**	-
Designated funds transfer	(23)	150,000	(150,000)	-	**-**	-
Net movement in funds		(436,736)	(150,000)	(170,833)	**(757,569)**	(524,932)
Reconciliation of funds						
Total funds brought forward		9,359,132	250,000	786,740	**10,395,872**	10,920,804
Total funds carried forward	(23)	8,922,396	100,000	615,907	**9,638,303**	10,395,872

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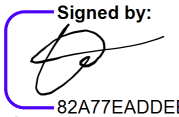
Balance sheets

At 31 March 2025

		2025 Group	2024 Group	2025 Charity	2024 Charity
Fixed assets		£	£	£	£
Tangible assets	(13)	**5,244,006**	4,929,075	**5,121,708**	4,737,244
Investments	(14 a&b)	**1,029,788**	1,023,736	**1,029,792**	1,023,740
		6,273,794	5,952,811	**6,151,500**	5,760,984
Current assets					
Stock of finished goods		**112,944**	83,905	**74,196**	33,527
Debtors	(15)	**1,505,145**	1,872,080	**1,590,722**	2,909,338
Cash at bank and in hand		**3,073,861**	3,817,333	**2,788,082**	2,693,813
		4,691,950	5,773,318	**4,453,000**	5,636,678
Creditors: Amounts falling due within one year	(16)	**(972,441)**	(975,257)	**(721,114)**	(746,337)
Net current assets		**3,719,509**	4,798,061	**3,731,886**	4,890,341
Total assets less current liabilities		**9,993,303**	10,750,872	**9,883,386**	10,651,325
Creditors: Amounts falling due after more than a year	(17)	**(355,000)**	(355,000)	**(355,000)**	(355,000)
Net assets		**9,638,303**	10,395,872	**9,528,386**	10,296,325
Unrestricted charity funds					
Unrestricted general funds		**8,922,396**	9,359,132	**8,812,479**	9,259,586
Unrestricted designated funds		**100,000**	250,000	**100,000**	250,000
Restricted funds		**615,907**	786,740	**615,907**	786,739
Total funds	(23 & 24)	**9,638,303**	10,395,872	**9,528,386**	10,296,325

The financial statements were approved by the Board of Directors and are signed on its behalf by:-

Signed by:



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15 December 2025

Chris Hallam, Chair of Trustees

Company Registration No. 02263980

The notes on pages 67 to 84 form part of these financial statements.

Statement of Cash Flows

For the year ended 31 March 2025

		2025 £	2024 £
Cash generated by operating activities	(26)	**(89,449)**	84,812
		(89,449)	84,812
Cash flows from investing activities			
Interest received		**103,622**	157,668
Purchase of tangible fixed assets		**(757,645)**	(399,660)
Cash used in investing activities		**(654,023)**	(241,992)
Cash flows from financing activities			
Repayment of finance leases		**-**	-
Cash used in financing activities		**-**	-
(Decrease) in cash and cash equivalents in the year		**(743,472)**	(157,180)
Cash and cash equivalents at the beginning of the year		**3,817,333**	3,974,513
Cash and cash equivalents at the end of the year		**3,073,861**	3,817,333

Notes to the financial statements

For the year ended 31 March 2025

1. Accounting policies

a. Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Accounting Practice.

Ashgate Hospicecare 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.

The financial statements are presented in sterling which is the functional currency of the charity and group and rounded to the nearest £1.

b. Company status

The charity is a company limited by guarantee and has no share capital. The charity is registered in England and Wales, with company number 02263980 and charity number 700636. The members of the charity are the Trustees named on page 58. 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.

c. Basis of consolidation

The consolidated financial statements include the results of Ashgate Hospicecare and its wholly owned subsidiary Ashgate Hospicecare Shops Limited on a line by line basis.

A separate Statement of Financial Activities for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

The deficit for the year for the charity was £767,941 (2024 deficit £623,241).

d. Going concern

The Trustees have considered the impact of the global economic situation, UK inflation, levels of NHS funding and likely developments in fundraising activities on the company's income and operating cost base. In the light of the recent announcements relating to service cuts the Board are confident that they have in place plans to address the annual deficit and ensure that the hospice is financially sustainable. The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2027 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary. The Board do however recognise that uncertainty exists around the global economy, and impacts on NHS funding for Specialist Palliative end of Life Care and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

e. Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees 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 Trustees 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.

f. Critical accounting estimates and areas of judgment

In the application of the group's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors considered to be relevant.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities are outlined below:

Depreciation of tangible assets

Depreciation policies have been set according to management's experience of the useful lives of the assets in each category, something which is reviewed annually.

The charity incurs expenditure on creating tangible fixed assets for use in the charity with costs being incurred over a number of months. The Trustees believe it is possible to segregate these costs into identifiable projects, and as such no depreciation is charged on that project until it is brought into use.

Legacies

Legacies are recognised as income when probate has been granted, the charity has established its entitlement to the funds and where sufficient information is available to allow it to measure its entitlement with reasonable accuracy.

g. Income

All income is recognised when the charity and group have entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Donated services are recognised when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and the economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised. Please refer to the Trustees' report for more information about their contribution.

Donations and gifts towards the running cost of the hospice are treated as income when received. Gifts in kind and donated goods are valued where the item is specifically identified and some reliable form of valuation is available. Goods donated for sale are not accounted for until the point of sale. On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Government and other grants are included in the SOFA in the year in which they are receivable and allocated to the necessary funds accordingly, and would be deferred if relating to services in a future period.

Lottery income is accounted for in respect of those draws that have taken place in the year. Income received from draws after the balance sheet date is deferred to the relevant accounting period.

Trading income is recognised at point of sale for both donated and purchased goods.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

h. Expenditure

Expenditure is recognised on an accruals basis inclusive of any irrecoverable VAT. Costs of generating funds comprise the costs associated with attracting voluntary income. Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them, which have been apportioned based on headcount and activity.

Allocation of support costs

Support costs are those functions that assist the work of the charity and group but do not directly undertake charitable activities. Support costs include executive costs, HR and IT costs, other support functions, depreciation and governance costs which support the services providing care to patients and families. These costs have been allocated between the costs of raising funds and expenditure on charitable activities on the basis set out in notes 9 and 10.

i. Tangible fixed assets and depreciation

All assets costing more than £1,000 are capitalised, except for computer equipment where all items with a value of £100 or more are capitalised.

All fixed assets are included at cost, net of depreciation and any provision for impairment. Depreciation is calculated to write down the cost of fixed assets by equal annual instalments over the following periods:-

Freehold buildings	2% straight line per annum
Fixtures and fittings	25% straight line per annum
Motor vehicles	25% straight line per annum
Buildings extension	2% straight line per annum
IT hardware	33% straight line per annum
Plant	10% straight line per annum

Freehold land is not depreciated

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

j. Fixed asset investments

Investments are a form of basic financial instruments and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing market price, except for shares in the trading subsidiary which are carried at cost. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

All gains and losses are taken to the Statement of Financial Activities as they arise.

k. Stock

Stocks of retail goods are included at the lower of cost and net realisable value. Donated items of stock for resale or distribution are not included in the financial statements until they are sold or distributed because the Trustees consider it impracticable to be able to assess the amount of donated stocks as there are no systems in place which record these items until they are sold and undertaking a stock take would incur undue cost for the charity which would far outweigh the benefits. Additionally, due to the agent arrangements present for the purposes of retail gift-aid, some donated items of stock held at the year end are not technically an asset of the charity and therefore no value can be assigned to them.

l. 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.

m. 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.

n. Creditors and provisions

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

o. Leases

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred.

Leases are classified as finance leases whenever the terms of the lease transfer substantially all the risks and rewards of ownership to the lessees. All other leases are classified as operating leases.

Assets held under finance leases are recognised as assets at the lower of the assets fair value at the date of inception and the present value of the minimum lease payments. The related liability is included in the balance sheet as a finance lease obligation. Lease payments are treated as consisting of capital and interest elements. The interest is charged to the statement of financial activities so as to produce a constant periodic rate of interest on the remaining balance of the liability.

p. Pensions

The pension costs charged in the financial statements represent the contributions payable by the charity during the year in accordance with FRS 102. Employees who joined the hospice before February 2020 and who were already active members of the NHS Pension Scheme are permitted to continue contributing to the Scheme. Rates are set by the NHS Pensions Agency. The scheme is a multi-employer scheme not designed to identify the assets and liabilities attributable to the Charity, so in accordance with FRS102 the scheme is accounted for as a defined contribution scheme.

q. Employee benefits

The costs of short-term employee benefits are recognised as a liability and an expense, unless those costs are required to be recognised as part of the cost of stock or fixed assets.

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the group is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

r. Taxation

The Hospice is a registered charity and as such is a charity within the meaning of schedule 6 of the Finance Act 2010. Accordingly, the Hospice is potentially entitled to tax exemption under part 11 of the Corporation Tax Act 2010 or section 256 of the Taxation of Chargeable Gains Act 1992 in respect of income and gains arising. Given this, no tax charge arises on the charity.

The trading subsidiary is liable to corporation tax on its chargeable profits. Current tax, including UK Corporation and foreign tax, is provided at amounts expected to be paid (or recovered) using the tax rates and laws that have been enacted or substantially enacted at the balance sheet date.

s. Related parties

Ashgate Hospicecare have taken the Related Parties Disclosure exemption under Section 33.1 to not disclose transactions with Ashgate Hospicecare Shops Limited as this is a wholly owned subsidiary.

2. Donations

	Unrestricted £	Restricted £	2025 Total £	Unrestricted £	Restricted £	2024 Total £
General donations	**1,017,979**	**39,573**	**1,057,552**	799,865	46,080	845,945
In memory	**317,174**	**3,131**	**320,305**	299,630	7,316	306,946
Gift aid income from individuals	**245,632**	**1,131**	**246,763**	190,294	885	191,179
Community	**566,274**	**53,237**	**619,511**	494,702	11,114	505,816
Gifts in kind (see below)	**416,725**	**-**	**416,725**	189,713	-	189,713
Trusts and grants	**216,159**	**147,642**	**363,801**	196,600	16,780	213,380
	2,779,943	**244,714**	**3,024,657**	2,170,804	82,175	2,252,979

Gifts in kind	Unrestricted £	Restricted £	2025 Total £	Unrestricted £	Restricted £	2024 Total £
Donated food and drink	**11,390**	**-**	**11,390**	9,634	-	9,634
Capital items	**227,100**	**-**	**227,100**	34,840	-	34,840
Other items	**178,235**	**-**	**178,235**	145,239	-	145,239
	416,725	**-**	**416,725**	189,713	-	189,713

3. Legacies

	Unrestricted £	Restricted £	2025 Total £	Unrestricted £	Restricted £	2024 Total £
General donations	**1,000,192**	**-**	**1,000,192**	1,116,816	255,917	1,372,733

4. Shops

	2025 Unrestricted £	2024 Unrestricted £
Trading activities	**3,079,650**	2,972,304
Donation of sale proceeds for goods sold as agent	**939,220**	849,466
Gift aid on donations of sale proceeds to charity	**237,177**	214,511
Other income	**1,886**	-
	4,257,933	4,036,281

5. Fundraising

	Unrestricted	Restricted	2025 Total	Unrestricted	Restricted	2024 Total
	£	£	£	£	£	£
Lottery	735,832	-	735,832	681,802	-	681,802
Events	599,541	851	600,392	530,165	-	530,165
Total	1,335,373	851	1,336,224	1,211,967	-	1,211,967

6. Other income

	2025 Unrestricted	2024 Unrestricted
	£	£
Reflective Practice	120,429	97,140
Catering	82,680	63,213
Training and Education	5,496	12,124
Other	628	13,272
Total	209,233	185,749

7. Investment income

	Unrestricted	Restricted	2025 Total	Unrestricted	Restricted	2024 Total
	£	£	£	£	£	£
Gross interest receivable	79,102	24,520	103,622	143,111	14,557	157,668

8. Income from charitable activities

	Unrestricted	Restricted	2025 Total	Unrestricted	Restricted	2024 Total
	£	£		£	£	
NHS Derby and Derbyshire Integrated Care Board	5,350,218	-	5,350,218	5,085,665	-	5,085,665
DHSC Capital Grant	-	213,510	213,510	-	-	-
University of Sheffield – Student training	46,440	-	46,440	63,640	-	63,640
Chesterfield Royal Hospital – Medical secretarial support	21,015	-	21,015	16,590	-	16,590
Other	19,988	-	19,988	17,528	-	17,528
Total	5,437,661	213,510	5,651,171	5,183,423	-	5,183,423

9.(a) Analysis of group expenditure current year

	Direct staff costs	Other direct costs	Support costs – see Note 10.(a)	Total costs
	£	£	£	£
Donations	432,456	212,183	69,803	**714,442**
Legacies	24,666	10,632	32,325	**67,623**
Costs of raising voluntary income	457,122	222,815	102,128	**782,065**
Lottery	80,727	307,092	67,535	**455,354**
Events	190,705	243,950	82,948	**517,603**
Community	174,260	53,954	56,341	**284,555**
Shops	2,295,356	1,301,974	429,723	**4,027,053**
Fundraising and other trading costs	2,741,048	1,906,970	636,547	**5,284,565**
Patient care – hospice	3,534,837	558,409	2,025,478	**6,118,724**
Patient care – community	1,818,482	72,871	406,245	**2,297,598**
Therapies and rehabilitation	1,504,359	103,264	256,078	**1,863,701**
Cost of charitable activities	6,857,678	734,544	2,687,801	**10,280,023**
Total	10,055,848	2,864,329	3,426,476	**16,346,653**

9.(b) Analysis of group expenditure prior year

	Direct staff costs	Other direct costs	Support costs – see Note 10.(b)	Total costs
	£	£	£	£
Donations	418,474	252,900	59,163	**730,537**
Legacies	23,890	17,951	27,288	**69,129**
Costs of raising voluntary income	442,364	270,851	86,451	**799,666**
Lottery	77,866	325,837	57,079	**460,782**
Events	183,946	238,711	70,083	**492,740**
Community	168,019	51,947	47,804	**267,770**
Shops	2,122,592	1,250,373	365,455	**3,738,420**
Fundraising and other trading costs	2,552,423	1,866,868	540,421	**4,959,712**
Patient care – hospice	3,087,320	534,460	1,742,985	**5,364,765**
Patient care – community	1,789,807	65,224	344,247	**2,199,278**
Therapies and rehabilitation	1,359,525	82,673	217,660	**1,659,858**
Cost of charitable activities	6,236,652	682,357	2,304,892	**9,223,901**
Total	9,231,439	2,820,076	2,931,764	**14,983,279**

Notes to the financial statements

For the year ended 31 March 2025

See Note 9.(a) and 9.(b)

All costs for raising voluntary income and for fundraising and other trading costs, in both years, related to unrestricted funds.

Charitable expenditure includes £211,385 (2024 - £24,140) of restricted expenditure.

Patient care within the hospice includes the activities of the Inpatient Unit, Outpatient and Day Services teams.

Patient care within the community includes the activities of the Palliative Care Nurse Specialists, Palliative Care Community Nurses, Support Workers and End of Life Care Facilitators.

All the above activities are under the medical leadership of a team of Consultants.

Therapy and rehabilitation includes the activities of teams within Supportive Care Services, Lymphoedema, Occupational Therapy and Physiotherapy.

The patient facing functions above are all directly supported by a Clinical Administration Team, Quality Improvement Team, Catering, Housekeeping and other Estates functions. The costs of these functions are included within the direct costs above.

All patient facing functions, direct support teams and fundraising functions are then supported by the wider management structure of the organisation including Leadership Team, People and Culture, Finance and Procurement, IT and Governance. The costs of these functions and costs of depreciation are all included in Support Costs.

Support costs include £202,983 (2024 - £159,153) of governance costs incurred in connection with the compliance with constitutional and statutory requirements of the charity.

10.(a) Analysis of support costs current year

	Executive costs	HR and IT costs	Other support function costs	Depreciation	Total costs
	£	£	£	£	£
Donations	20,478	27,390	18,738	3,197	**69,803**
Legacies	9,780	13,081	8,948	516	**32,325**
Costs of raising voluntary income	30,258	40,471	27,686	3,713	**102,128**
Lottery	20,249	27,083	18,527	1,676	**67,535**
Events	24,932	33,347	22,813	1,856	**82,948**
Community	16,392	21,924	14,999	3,026	**56,341**
Shops	110,196	147,391	100,831	71,305	**429,723**
Fundraising and other trading costs	171,769	229,745	157,170	77,863	**636,547**
Patient care – hospice	523,432	700,107	478,943	322,996	**2,025,478**
Patient care – community	119,379	159,673	109,234	17,959	**406,245**
Therapies and rehabilitation	73,464	98,261	67,220	17,133	**256,078**
Cost of charitable activities	716,275	958,041	655,397	358,088	**2,687,801**
Total	918,302	1,228,257	840,253	439,664	**3,426,476**

10.(b) Analysis of support costs prior year

	Executive costs	HR and IT costs	Other support function costs	Depreciation	Total costs
	£	£	£	£	£
Donations	14,124	24,853	17,128	3,058	**59,163**
Legacies	6,746	11,869	8,180	493	**27,288**
Costs of raising voluntary income	20,870	36,722	25,308	3,551	**86,451**
Lottery	13,966	24,574	16,936	1,603	**57,079**
Events	17,197	30,258	20,853	1,775	**70,083**
Community	11,306	19,894	13,710	2,894	**47,804**
Shops	76,007	133,739	92,166	63,543	**365,455**
Fundraising and other trading costs	118,476	208,465	143,665	69,815	**540,421**
Patient care – hospice	361,032	635,259	437,790	308,904	**1,742,985**
Patient care – community	82,340	144,884	99,847	17,176	**344,247**
Therapies and rehabilitation	50,671	89,159	61,444	16,386	**217,660**
Cost of charitable activities	494,043	869,302	599,081	342,466	**2,304,892**
Total	633,389	1,114,489	768,054	415,832	**2,931,764**

11. Net movement in funds is stated after charging:

	2025 Group £	2024 Group £
Auditors' remuneration – audit	**19,710**	18,250
Auditors' remuneration – tax	**1,025**	945
Auditors' remuneration – other	**6,540**	5,160
Depreciation – owned assets	**439,664**	415,832
Depreciation – assets held on hire purchase	**-**	-
Payments made under operating leases	**371,687**	364,771

12. Wages and staff costs

	2025 Group £	2024 Group £
Gross salaries	**10,427,164**	9,457,600
Social security costs	**951,927**	838,027
Pension costs	**657,387**	596,681
Total	**12,036,478**	10,892,308

Average number of employees and full time equivalents (including temporary and casual workers) for the group and analysis of employees in the year were:

	2025 No.	2025 FTE	2024 No.	2024 FTE
Clinical	**177**	**136**	174	132
Retail	**136**	**83**	126	78
Finance and IT	**10**	**9**	8	7
People and Culture and Leadership Team	**29**	**25**	25	20
Estate	**31**	**20**	28	21
Fundraising/Marketing	**38**	**32**	36	31
Total	**421**	**305**	397	289

Employees earning over £60,000 are summarised below (excluding pension costs):

	2025 No.	2024 No.
£60,001 – £70,000	**1**	2
£70,001 – £80,000	**4**	2
£80,001 – £90,000	**3**	2
£90,001 – £100,000	**-**	-
£100,001 – £110,000	**1**	-

Notes to the financial statements

For the year ended 31 March 2025

See Note 12.

- Pension contributions relating to the staff earning over £60,000 totalled £53,906 (2024: £44,452).
- The total remuneration (including pension contributions and employers' national insurance) of the key management personnel is £798,310 (2024: £476,812). The key management personnel of the group and the parent charity comprise the Board of Trustees, who are not remunerated, and the Leadership Team, whose names are listed on page 58. The increase in management personnel costs this year was due to a re-organisation to an inclusive leadership structure, aligning existing roles and responsibilities into a single team without recruiting additional headcount.
- Pay for our clinical staff tracks closely with the Agenda for Change within the NHS, whilst pay for our non-clinical roles are in line with other charities. Remuneration for Leadership Team is set by the Board of trustees.
- Included within staff costs are redundancy and termination payments for three individuals totalling £24,293 (2024: £99,685, three people).

13. Tangible fixed assets

The group	Freehold Land and Buildings Original	Extension and Development	Fixtures and Fittings	Plant and IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2024	355,000	4,903,727	1,322,731	1,607,700	230,754	8,419,912
Additions	-	213,839	230,776	312,530	500	757,645
Disposals	-	-	-	(3,272)	(18,995)	(22,267)
At 31 March 2025	**355,000**	**5,117,566**	**1,553,507**	**1,916,958**	**212,259**	**9,155,290**
Depreciation						
At 1 April 2024	170,400	1,257,033	1,046,412	880,095	136,897	3,490,837
Charge for the year	7,100	98,074	109,816	195,549	29,125	439,664
Disposals	-	-	-	(222)	(18,995)	(19,217)
At 31 March 2025	**177,500**	**1,355,107**	**1,156,228**	**1,075,422**	**147,027**	**3,911,284**
Net Book Value						
At 1 April 2024	184,600	3,646,694	276,319	727,605	93,857	4,929,075
At 31 March 2025	**177,500**	**3,762,459**	**397,279**	**841,536**	**65,232**	**5,244,006**

The charity	Freehold Land and Buildings Original	Extension and Development	Fixtures and Fittings	Plant and IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2024	355,000	4,903,727	711,520	1,527,953	80,350	7,578,550
Additions	-	213,839	230,776	310,758	500	755,873
Disposals	-	-	-	(3,050)	(18,995)	(22,045)
At 31 March 2025	**355,000**	**5,117,566**	**942,296**	**1,835,661**	**61,855**	**8,312,378**
Depreciation						
At 1 April 2024	170,400	1,257,033	510,506	823,017	80,350	2,841,306
Charge for the year	7,100	98,074	76,501	186,632	52	368,359
Disposals	-	-	-	-	(18,995)	(18,995)
At 31 March 2025	**177,500**	**1,355,107**	**587,007**	**1,009,649**	**61,407**	**3,190,670**
Net Book Value						
At 1 April 2024	184,600	3,646,694	201,014	704,936	-	4,737,244
At 31 March 2025	**177,500**	**3,762,459**	**355,289**	**826,012**	**448**	**5,121,708**

See Note 13.

The value of fixed assets held under finance leases is £nil (2024: £nil) in both the group and the charity.

14. (a) Investments – charity

Shares in group undertakings and participating interests:	£
Cost at 1 April 2024 and 31 March 2025	4
Net book value at 1 April 2024 and 31 March 2025	4

Holding of more than 20%

The charity holds more than 20% of the share capital of the following company:

Company	Company number	County of registration or incorporation	Shares held class %
Ashgate Hospicecare Shops Limited	02577401	England & Wales	Ordinary 100%

The aggregate amount of capital and reserves and the results of the subsidiary for the financial year are as follows:

	Principal Activity	Capital and reserves £	Profit for the year £
Ashgate Hospicecare Shops Limited	Charity shop	109,923	50,048

14. (b) Fixed asset investments

See Note 14.(b)

	Group and Charity	
	2025	2024
Listed investments	**£**	£
Fair value at 1 April 2024	**1,023,736**	965,761
Investment gains	**6,052**	57,975
Fair value at 31 March 2025	**1,029,788**	1,023,736

The historical cost of the investment is £900,000 (2024: £900,000).

15. Debtors

See Note 15.

	Group		Charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Trade debtors	**114,513**	143,233	**99,271**	129,337
Other debtors	**56,877**	66,424	**9,652**	21,022
Value added tax	**52,758**	56,709	**48,319**	45,041
Prepayments and accrued income	**1,280,997**	1,605,714	**1,156,551**	1,494,610
Amounts owed by group undertakings	**-**	-	**276,929**	1,219,328
	1,505,145	1,872,080	**1,590,722**	2,909,338

The Charity's intercompany debtor balance includes an intercompany loan of £543,093 (2024: £543,093) which is due after more than one year. The loan has been provided on a 5 year term, is repayable by 8 December 2026 and has an interest rate of 5% per annum.

16. Creditors

	Group		Charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Amounts falling due within one year				
Trade creditors	**350,819**	263,301	**284,679**	206,528
Tax and social security	**267,530**	306,991	**239,449**	275,718
Accruals and deferred income	**354,092**	404,965	**196,986**	264,091
	972,441	975,257	**721,114**	746,337

Deferred income includes lottery money received in advance for future draws. At 31 March 2025 this totalled £98,609 (2024: £103,010).

17. Creditors: amounts falling due after more than one year

	Group		Charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Other creditors	**355,000**	355,000	**355,000**	355,000

18. Operating lease commitments

At 31 March 2025 the charity had future minimum lease payments under non cancellable operating leases as follows:

	Group		Charity	
	2025	2024	**2025**	2024
	£	£	**£**	£
Within one year	**306,048**	313,066	**14,465**	15,230
Within two to five years	**190,909**	281,902	**2,006**	7,690
In more than five years	**-**	-	**-**	-
	496,957	594,968	**16,471**	22,920

Notes to the financial statements

For the year ended 31 March 2025

19. Pension costs

The pension costs relate to the amounts contributed by the Group and paid over to the Health Service pension scheme or to eligible employees' pension schemes. The pension costs amounted to £657,387 (2024: £596,681). The amount owed to the pension providers at the year-end was £45,709 (2024: £85,763). All schemes are treated as defined contribution and payments are charged to the SOFA in the year they are payable.

20. Capital commitments

There were no capital commitments at 31 March 2025 (2024:£nil).

21. Related party transactions and trustee remuneration

No Trustee received or waived any remuneration during either year. During the year the charity paid expenses of £254 (2024: £368) to one trustee (2024: one).

22. Taxation

As a charity, Ashgate Hospicecare is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or s256 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objectives. No tax charges have arisen in the Charity. The tax charge arises from the trading results of the subsidiary.

	Group 2025 £	Group 2024 £
Corporation Tax current year	-	428

23. (a) Statement of funds current year

	Balance at 1 April 2024	Income	Expenditure	Transfers in/out	Designated	(Losses)/ Gains	Corporation Tax	Balance at 31 March 2025
Unrestricted Funds	£	£	£	£	£	£	£	£
General Funds	9,359,132	15,099,437	(16,135,268)	443,043	150,000	6,052	-	**8,922,396**
Designated Funds	250,000	-	-	-	(150,000)	-	-	**100,000**
	9,609,132	15,099,437	(16,135,268)	443,043	-	6,052	-	**9,022,396**
Restricted Funds								
Earmarked Donations	379,273	245,565	(37,300)	(165,904)	-	-	-	**421,634**
Children's Services	407,467	24,520	(174,085)	(63,629)	-	-	-	**194,273**
DHSC Capital Grant	-	213,510	-	(213,510)	-	-	-	**-**
	786,740	483,595	(211,385)	(443,043)	-	-	-	**615,907**
Total of Funds	10,395,872	15,583,032	(16,346,653)	-	-	6,052	-	**9,638,303**

23. (b) Statement of funds prior year

	Balance at 1 April 2023	Income	Expenditure	Transfers in/out	Designated	(Losses)/ Gains	Corporation Tax	Balance at 31 March 2024
Unrestricted Funds	£	£	£	£	£	£	£	£
General Funds	9,670,127	14,048,151	(14,959,139)	191,446	351,000	57,975	(428)	**9,359,132**
Designated Funds	601,000	-	-	-	(351,000)	-	-	**250,000**
	10,271,127	14,048,151	(14,959,139)	191,446	-	57,975	(428)	**9,609,132**
Restricted Funds								
Earmarked Donations	189,747	338,092	(24,140)	(124,426)	-	-	-	**379,273**
Children's Services	459,930	14,557	-	(67,020)	-	-	-	**407,467**
	649,677	352,649	(24,140)	(191,446)	-	-	-	**786,740**
Total of Funds	10,920,804	14,400,800	(14,983,279)	-	-	57,975	(428)	**10,395,872**

Notes to the financial statements

For the year ended 31 March 2025

See Note 23.(a) and 23.(b)

Transfer of Funds

The transfer of £443,043 relates to expenditure on restricted projects which has been disclosed as unrestricted expenditure on the face of the SOFA. This predominantly relates to the purchasing of capital expenditure allocated to restricted funds and unrestricted following completion of the projects.

Designation of Funds

The Trustees have designated £100,000 (2024: £100,000) to support the pilot of new income generation initiatives and £nil (2024: £150,000) for refurbishment of the Day Hospice which started in September 2024. The previously designated £150k was not spent (and subsequentially undesignated) due to sufficient external funding and gifts in kind. During the year, the hospice utilised designated funds of £nil (2024: £501,000) against the current year's deficit.

Restricted Funds

These are funds restricted by the donors for items of expenditure as follows:

Earmarked Donations

These are donations contributed by the general public to help fund specific clinical activities. At the end of the year £421,634 remained unspent and this will be expended in 2025/2026 onwards.

Children's Services

This donation is restricted to develop and extend child bereavement support within Derbyshire and the High Peak.

24.(a) Analysis of net assets between funds current year

	Unrestricted General Funds	Unrestricted Designated Funds	Restricted Funds	Total Funds
	£	£	£	£
Fixed assets	6,271,294	-	2,500	**6,273,794**
Current assets	3,978,543	100,000	613,407	**4,691,950**
Current liabilities	(972,441)	-	-	**(972,441)**
Liabilities due after one year	(355,000)	-	-	**(355,000)**
	8,922,396	100,000	615,907	**9,638,303**

24.(b) Analysis of net assets between funds prior year

	Unrestricted General Funds	Unrestricted Designated Funds	Restricted Funds	Total Funds
	£	£	£	£
Fixed assets	5,950,311	-	2,500	**5,952,811**
Current assets	4,739,078	250,000	784,240	**5,773,318**
Current liabilities	(975,257)	-	-	**(975,257)**
Liabilities due after one year	(355,000)	-	-	**(355,000)**
	9,359,132	250,000	786,740	**10,395,872**

25. Ashgate Hospicecare Shops Limited: Profit and loss account for the year ended 31 March 2025

	2025	2024
	£	£
Turnover	**3,079,650**	2,972,304
Other income	**633,952**	557,843
Total income	**3,713,602**	3,530,147
Cost of sales	**(2,745,905)**	(2,559,423)
Gross Profit	**967,697**	970,724
Administrative expenses	**(922,729)**	(877,085)
Other interest payable	**(27,153)**	(27,227)
Other interest receivable	**32,233**	32,324
Tax on profit	**-**	(428)
Retained profit for the year	**50,048**	98,308
Number of shops and coffee shops	**19**	19

26. Reconciliation of net movement in funds to net cash flow from operating activities

	2025	2024
	£	£
Net movements in funds	**(757,569)**	(524,932)
Depreciation charges	**439,664**	415,832
(Decrease) in creditors	**(2,816)**	(6,120)
Decrease in debtors	**366,935**	419,953
(Increase) in stocks	**(29,039)**	(4,278)
Loss on disposal	**3,050**	-
(Gain) on investments	**(6,052)**	(57,975)
Interest received	**(103,622)**	(157,668)
	(89,449)	84,812

There were no changes in net debt other than the cashflows above.

27. Contingent assets – legacy income

As at the reporting date, the charity has entitlement to 5 futher legacies (23/24 - nil), but these have not been included within accrued income since, although the income is probable, the amounts have not yet been confirmed.

28. Consolidated statement of financial activities – prior year

	Unrestricted Funds	Designated Funds	Restricted Funds	2024 Total
Income:	£	£	£	£
Donation and legacies				
Donations	2,170,804	-	82,175	**2,252,979**
Legacies	1,116,816	-	255,917	**1,372,733**
	3,287,620	-	338,092	**3,625,712**
Income from other trading activities:				
Shops	4,036,281	-	-	**4,036,281**
Fundraising	1,211,967	-	-	**1,211,967**
Other	185,749	-	-	**185,749**
	5,433,997	-	-	**5,433,997**
Investment income	143,111	-	14,557	**157,668**
Income from charitable activities	5,183,423	-	-	**5,183,423**
Total income	14,048,151	-	352,649	**14,400,800**
Expenditure:				
Costs of raising voluntary income	799,666	-	-	**799,666**
Fundraising and other trading costs	4,959,712	-	-	**4,959,712**
Costs of charitable activities	9,199,761	-	24,140	**9,223,901**
Total expenditure	14,959,139	-	24,140	**14,983,279**
Net movement in funds before investment gain	(910,988)	-	328,509	**(582,479)**
Unrealised gains on investments	57,975	-	-	**57,975**
Corporation tax	(428)	-	-	**(428)**
Net income	(853,441)	-	328,509	**(524,932)**
Funds transfer	191,446	-	(191,446)	**-**
Designated funds transfer	351,000	(351,000)	-	**-**
Net movement in funds	(310,995)	(351,000)	137,063	**(524,932)**
Reconciliation of funds				
Total funds brought forward	9,670,127	601,000	649,677	**10,920,804**
Total funds carried forward	9,359,132	250,000	786,740	**10,395,872**

For more information

If you would like to know more about how you can help us to care for people living with a life-limiting or incurable illness, please contact us:

Call us on **01246 567 250**

Or email us at **Fundraising@ashgatehospice.org.uk**

Looking for support?

Call us on **01246 568 801**

Or email us at **clinicalenquiries@ashgatehospice.org.uk**

Or visit **www.ashgatehospice.org.uk**

If you require this document in an alternative format, please contact the Marketing and Communications team at **marcomms@ashgatehospice.org.uk**

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Jeśli chcieliby Państwo otrzymać te informacje w innym języku lub formacie, prosimy o kontakt z działem marketingu pod adresem marcomms@ashgatehospice.org.uk

اگر آپ یہ معلومات کسی دوسری زبان یا فارمیٹ میں حاصل کرنا چاہتے ہیں تو براہ کرم marcomms@ashgatehospice.org.uk پر مارکیٹنگ سے رابطہ کریں۔

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Ashgate Hospice,
Ashgate Road, Old Brampton,
Chesterfield, Derbyshire S42 7JD
01246 568 801
www.ashgatehospice.org.uk

Registered Charity No. 700636

Compassionate care for everyone

Registered with FUNDRAISING REGULATOR

disability confident EMPLOYER

MINDFUL EMPLOYER

Inspected and rated Outstanding CareQuality Commission

Ashgate Hospice

ASHGATE HOSPICECARE

England & Wales - Charity number 700636

Accounts

Our journey to compassionate care for all



Compassionate care for everyone

Ashgate Hospice Annual Report
April 2023 – March 2024

www.ashgatehospice.org.uk
Registered Charity No. 700636

Ashgate Hospice

Heartfelt thanks from Ashgate Hospice

As we look back on the past year, we are deeply grateful for the incredible support and dedication shown by our community. Your generosity and commitment have been instrumental in ensuring that Ashgate continues to provide vital care and support to individuals and those important to them living with life-limiting or incurable illnesses across North Derbyshire.

To our patients and those important to them, we extend our heartfelt thanks for entrusting us with the privilege of caring for you during this vulnerable time. Your trust is invaluable to us, and we feel privileged to support those who matter most to you.

To our donors, whose contributions provide the financial foundation for our work, thank you for believing in our purpose and making a meaningful impact on the lives of those we serve.

To our volunteers and staff, who selflessly give their time and energy, thank you for your unwavering dedication and compassion. You make it possible for us to provide the care that our community needs and to bring comfort to our patients and the people who are important to them.

To our corporate partners, charitable trusts, and supporters, thank you for your ongoing collaboration and belief in our cause. Your partnership strengthens our ability to deliver high-quality care and support to our community.

To the families and patients who allow us to share their stories, thank you for your courage and trust. Your openness helps raise awareness and understanding of the importance of palliative and end of life care.

At Ashgate, we are inspired every day by the kindness and generosity of our supporters.

Together, we are making a real difference in the lives of those who need us most.

Ashgate Hospice Annual Report
April 2023 – March 2024

Contents

Welcome from our Chief Executive **4**

Hello from our new Chair of the Board of Trustees, Chris **5**

Supporting our community **6**

Strategic report **7**

Who we are 7

Why we do what we do 8

Our care and support 9

What we believe **11**

Our strategic approach **12**

Our impact **13**

Our people **19**

Our voice **30**

The people behind our mission **37**

Looking ahead **47**

Trustees' report **49**

How we're governed 49

Meet our Board of Trustees 49

Public benefit and fundraising standards 50

Financial review 51

Financial statements **53**

Reference and administrative information 53

Financial review 54

Principal risks and uncertainties 55

Statement of trustees' responsibilities 56

Independent auditors report 57

Our financial statements 60

Welcome from our Chief Executive, Barbara-Anne



I am pleased to share this year's annual report and the opportunity it offers to look back on a year of both challenge and significant achievement. You will read in the following pages about some of the ways we continue to adapt our services to meet the changing needs of the community we serve. Our staff and volunteers have continued to work with creativity and dedication to ensure we can provide our vital care across North Derbyshire.

Whether caring for someone in their own home or on our Inpatient Unit, serving customers in our shops, working with our system partners or collecting donation tins, everyone has played an integral part in delivering our high quality holistic care.

And this year we had the privilege of caring for over 2,400 people and their families. Amongst other highlights, we launched our pioneering Virtual Ward team who cared for 175 patients in their first twelve months. Our Single Point of Access team was established this year as part of our continuous improvement focus, to ensure that we are providing the right care at the right time for everyone who needs us. And we have enhanced our Children and Young People service to reflect a growing need for more support through the complexities of grief.

Our End of Life Care Facilitators have developed and reshaped their offer of bespoke and open training and support to care homes across North Derbyshire and our Learning and Development and Quality Improvement teams have been actively involved with Joined Up Care Derbyshire service improvement initiatives. Our vision is for everyone to have a good death; we know we cannot achieve that alone but we can and do play an active leadership role in the Derbyshire healthcare system.

That said, we know there is more to be done: more to improve and adapt our services to the changing needs of our communities and more to address the inequalities of marginalised people accessing our services. I am delighted that we were able to achieve Rainbow Accreditation with Derbyshire LGBT+. Our inclusion journey continues – we are committed to being a welcoming and safe space for all and we have more to do.

We also have more to do to secure our future with a long-term sustainable funding model. We have seen considerable press and media interest in recent years in the precarious funding situation faced by charitable hospices in England. I am proud of Ashgate's role in fighting alongside Hospice UK and other hospices for fair and sustainable funding for the necessary care that we provide. We have a moral obligation to share our story and the stories of the people who need our care and to highlight the appalling impact of inequitable funding on the lives and deaths of so many people who have a right to good palliative care – but still do not get what they need.

In closing, I want to pay tribute again to our volunteers and staff. I see how you live our values every day to make Ashgate the best it can be for everyone who turns to the hospice at their most precious and precarious times. Thank you – it is a joy and a privilege to work with you.



Barbara-Anne Walker
Chief Executive

Hello from our new Chair of the Board of Trustees, Chris



I am truly honoured to join Ashgate Hospice as the new Chair of Trustees. Ashgate is an iconic institution in North Derbyshire, and I have always admired the incredible work done by the hospice movement. Ashgate holds a special place in our community's hearts, and I am thrilled to contribute to its purpose.

My personal values of kindness, fairness, and togetherness align closely with Ashgate's values of compassion, teamwork, and being respectful, open, and inclusive. I have deep roots in this area, having been nurtured by the communities of North Sheffield and North Derbyshire. My role at Ashgate is a wonderful chance to give back to the community that has been a significant part of my life.

Although my background is not in healthcare, I have spent my career helping leaders improve their leadership skills. A personal experience that deeply influenced me was the time I spent with a school friend in his local hospice. The care and support he received made a profound difference to him and his family, inspiring me to get involved in hospice care.

Looking ahead, I am excited about the future of Ashgate. The superb leadership team is developing ambitious plans to ensure we continue to grow and spread the Ashgate magic far and wide. Our priorities will focus on expanding our reach, improving our services, and innovating in how we deliver care to a broader community.

Effective leadership is crucial in a hospice setting. I believe that great leadership is grounded in visibility, collaboration, and the ability to take course corrections. Leaders must have clear, visible intent that everyone can understand. Collaboration with team members at all levels is essential, as great solutions come from working together. Finally, leaders must be humble and willing to adjust based on feedback.

As Chair of Trustees, my role is to ensure we utilise the incredible talent on our board to serve our purpose. By living our values every day, we can foster a culture of excellence, compassion, and innovation. Ashgate already knows how to be a beacon of support and care for patients and their families, and I will champion our cause whenever I can.

One of the biggest challenges we face is the lack of funding for end of life care. We must raise our voice nationally to address this issue. Despite these challenges, I am confident in our ability to continue providing exceptional care.

To the entire Ashgate community – staff, volunteers, patients, and supporters – it is a huge privilege to help lead this iconic organisation. I am in awe of everything you do to make Ashgate the special place it is today. I look forward to meeting many of you as I get to know the hospice better over the coming months and years. Thank you for your dedication and support.



Chris Hallam
Chair of the Board of Trustees

Supporting our community

At Ashgate, we aim to be there for people at any stage of their illness to ensure they are well supported and cared for in the place of their choosing. Wherever you are, there is an Ashgate nursing team working in your area, supporting people in your community.



821 volunteers gave their time freely

£306,946 raised in memory of someone special

38,518 followers on our social media pages

£1,372,733 left to Ashgate as gifts in wills

One in six of our patients is cared for thanks to gifts in wills

989 Christmas trees were collected during our Treecycle campaign

£115,500 was won by our supporters in the Ashgate lottery

2,462	patients and those important to them supported across North Derbyshire
317	received specialist inpatient care
266	accessed Day Services support
1,855	cared for in their own homes
173	cared for by our Virtual Ward team
651	supported by our Supportive Care Service team

Strategic report

Here, you'll learn more about who we are, what our care and support looks like, and why we do what we do.



Ashgate Hospice was founded in 1988

Whether you're living with a life-limiting or incurable illness, caring for someone who is, or grieving the death of a loved one, we're here to help.

We are here for the people of North Derbyshire. We work together with energy, care and compassion so that people can have a good death in a place of their choosing and know that the people who are important to them are supported too.

We provide palliative and end of life care free of charge to people aged 18 and over. We care for people living with a life-limiting or incurable illness, including cancer, neurological diseases, and end-stage heart, kidney and lung diseases.

We aim to ensure that our patients are well informed, supported and have their symptoms managed. While our purpose is to provide end of life care, our work doesn't only begin at the very end of someone's life. We can help improve quality of life soon after a terminal diagnosis. We also support people's loved ones to ensure they get the practical, emotional and bereavement support they need.

We are proud that the Care Quality Commission continues to rate our care as 'Outstanding'.

When it comes to funding, much of the care and services we deliver are funded by the generosity of our supporters. In fact, more than 60% of what we do is paid for through fundraising and less than 40% comes from local NHS budgets.

Why we do what we do

Glennis and Mick's story



Mick Richmond said he was "amazed" at the care and compassion his wife of 55 years Glennis Richmond received on our Inpatient Unit at the end of her life.

Glennis, from Chesterfield, died in December 2022, aged 75, months after being diagnosed with cancer.

Mick said: "We didn't know really what to expect – whether it'd be doom and gloom or sad, but everyone was smiling and happy.

"I was amazed that all the staff and volunteers said hello as I walked down the corridors. The room was like a hotel room with a different bed.

"Glennis was happy."

"The nurses and healthcare assistants were just brilliant. They knew straight away how to get Glennis' pain under control, and soon after she was able to sit up and talk.

"They did everything for us and were just so caring – we couldn't have asked for more. The hospice allows you to go peacefully.

"It sounds strange, but I have such happy memories of her in the hospice, because I knew she was safe, with the care she needed. Honestly, we couldn't have asked for anything better."

Support when and where it's needed

When someone living in North Derbyshire is diagnosed with a life-limiting or incurable illness and has complex needs, they can access our services through a referral. This normally comes from their GP, hospital team or community nurse.

At that point, we provide specialist care and support for our patients in their own homes or at our Inpatient Unit in Old Brampton, or sometimes both. For example, patients can come to the hospice for a few days to control their symptoms, before returning home, if able to do so. We also provide practical, emotional and bereavement support for the people important to our patients.

The type of care and level of intervention we provide depends on the degree to which a patient's disease has advanced. We also consider other factors, such as their support network, home environment and symptom management.

Our aim is to provide the right care at the right time.



Our care and support

At Ashgate, we provide a wide range of services to support our patients and those important to them, addressing both their physical and emotional needs.

Care at home – many of our patients wish to spend their final days at home, and we do everything we can to make this happen. Our dedicated team of Palliative Care Specialist Nurses and Support Workers, along with doctors and therapists, work together to provide all the care needed in the comfort of your home.

We consider the whole person, addressing physical, emotional, social, and spiritual needs. Every team member is experienced in caring for those with life-limiting or incurable illnesses.

We assist with managing symptoms, coordinate with GPs and other healthcare professionals, and offer support for both patients and those important to them. We also help with financial advice and future planning.

Our team is comprised of medical and nursing staff, social workers, occupational therapists, bereavement support workers, physiotherapists, volunteers, and administrators. We are committed to ensuring that you receive compassionate and expert care where you prefer to be – at home.

Inpatient Unit – our Inpatient Unit at Old Brampton in Chesterfield provides specialist, round-the-clock care for patients who are struggling with complex or difficult-to-manage symptoms. Our team of doctors, nurses, therapists, and healthcare assistants work together to deliver the necessary inpatient care for our patients and those important to them.

We also offer emotional support, complementary therapies (massage, aromatherapy, reflexology, acupuncture, Reiki), physiotherapy for mobility, and comprehensive lymphoedema care.

Our occupational therapists provide practical help and advice for a smooth transition through different care services.

Led by experienced consultants, our unit ensures the highest standard of specialist care for every patient.

Day Services – our Day Services team provides advice, education, activities and support to a patient and the people important to them at an earlier stage of their journey. At drop-in sessions patients have access to a range of services, including physiotherapy, complimentary therapy and expert medical advice.

Physiotherapy – our physiotherapists assist patients with a variety of needs including breathlessness, fatigue, discomfort, weakness, mobility and pain, by providing a realistic and appropriate treatment regime to help improve quality of life.

Lymphoedema specialist support – our specialist lymphoedema nurses, together with our medical team, offer dedicated care to patients with lymphoedema. They carry out thorough check-ups and create personalised treatment plans. These plans might include skincare, massage, exercise, and compression. They aim to manage symptoms and improve each patient's quality of life.

Counselling and therapies – our counselling team at Ashgate is based in the Harry Fisher building. They're here for patients needing palliative care, as well as the people important to them. They create a caring space where patients can talk openly, get support, and work through their worries with understanding and compassion.

Outpatient care – we continue to provide vital services, including lymphoedema treatment, counselling, medical consultations, physiotherapy, psychology, support from specialist nurses, and bereavement services. These services are delivered with warmth and professionalism, ensuring individuals receive the necessary support.

Social work – our social work team is based both at the hospice and in the community, working alongside other professionals to understand the needs of patients and those important to them. They arrange practical help and make sure everyone knows about the support available, including for children and young people dealing with loss.

Spiritual care – our spiritual care team is here for everyone, including patients, those important to them, staff, and volunteers.

Our care and support

They're specially trained to provide compassionate support, helping people find their strength and comfort during difficult times.

Occupational therapy – our occupational therapists help patients regain independence and improve their quality of life when illness limits their daily activities. They work closely with our care team, carers, and community agencies, ensuring decisions always reflect the patient's preferences. They offer services at home, on our Inpatient Unit, and Day Services at Old Brampton, and provide guidance to nursing and residential homes when needed.

Complementary therapy – our complementary therapists specialise in palliative care. They form part of the Supportive Care Service team at Ashgate Hospice and are based in the main hospice building. This service is available to inpatients, Day Services attendees and to participants in the recently bereaved groups. The complementary therapy treatments that we provide can be used alongside conventional medicine or on their own.

Virtual Ward – our Virtual Ward offers patients the care they need in the comfort of their own homes. Instead of staying in hospital or the hospice, patients receive our support while remaining under our care. We use user-friendly technology for remote monitoring and conduct face-to-face visits as needed, ensuring safe and convenient care delivery.

Ashgate Hospice Quality Improvement

Read more about our care at Ashgate in our Quality Account: **www.ashgatehospice.org.uk/reports**



A fond farewell to Dr. Sarah Parnacott

After dedicating 21 years of her life to caring for patients and their families, Dr. Sarah Parnacott made the bittersweet decision to retire from her role as our Medical Director in December.

Her compassion and expertise have touched countless lives over the past two decades, and she leaves behind a legacy that will be remembered by everyone at the hospice.

Ahead of her departure, Sarah said: "Working at Ashgate Hospice has been an absolute privilege. No two days are the same and no two patients experience the same challenges.

"I enjoy feeling like I make a difference to the quality of a person's life, especially during those final chapters when every moment is so special.

"Often people will thank me for the help that the hospice offered them and those important to them in their time of need; it is so uplifting to feel that something positive has come out of the most awful of times.

"I feel incredibly proud that Ashgate is held in such high esteem by so many people in our community and it is so amazing to hear the stories of how the hospice can make a difference."

What we believe

We're dedicated to ensuring everyone in North Derbyshire has access to excellent palliative and end of life care when they need it, where they need it.



Our vision

Our vision is for everyone with a life-limiting or incurable condition to be able to live well and experience a good death. We want them, and the people who are important to them, to have the right information and support, and to feel cared for and understood.

Our purpose

We offer specialist palliative and end of life care and bereavement support. We also campaign for better care and educate others about these crucial services. Our aim to is to grow as a centre of excellence, working with the wider healthcare system with energy, openness, compassion and hope.

Our values

We are compassionate. We work as a team. We are respectful, open and inclusive.



Our strategic approach

For 2023–24 we continued to work towards our Three Ambitions. These ambitions set out the future we dream of – not just what we do each day, but the world we hope to help create.

These ambitions focus on three key areas: our care, our people, and our voice. They guide everything we do and inspire us to do our very best for our patients and the people who are important to them.

Our care

We will care for more people than ever before, and we will do it exceptionally well.

- We will increase access to our services.
- We will reach people earlier.
- We will continue to improve the quality of our services.

Our people

We will be a positive and inclusive environment which recruits, develops and nurtures the best people.

- We will continue to develop our clinical expertise.
- We will ensure we have a skilled and supported workforce, enabled by technology.
- We will foster a positive and inclusive work environment.

Our voice

We will use our voice to make things better for everyone at the end of their life.

- We will campaign for sustainable hospice funding.
- We will fight for fair end of life care for everyone, locally and nationally.
- We will encourage open conversations about death and dying and help people understand hospice care.



As we plan for 2024–25, we're excited to introduce a new ambition focused on our future. This fourth ambition highlights our commitment to ensuring that Ashgate remains a vital resource for generations to come. Here's how we plan to achieve this:

Our future

We will make sure that Ashgate is here for future generations who need our care.

- We will continue to manage hospice costs and grow our fundraising and retail net income.
- We will pilot new business projects to diversify our income streams.
- We will work to protect the environment and make our hospice as eco-friendly as possible.

Our impact

Our vision is for everyone with a life-limiting or incurable condition to be able to live well and experience a good death. We want them, and the people who are important to them, to have the right information and support, and to feel cared for and understood.



We've been providing expert care for 36 years

Our care

We understand that the end of life is a journey we all share. It's a time when care, support, and understanding mean everything. That's why our vision is simple: for people with a life-limiting or incurable illness to be able to live well and to have a good death.

Whether it's managing pain, offering emotional support, or simply being there to listen, our teams are committed to making a difference for those living with a life-limiting or incurable illness in North Derbyshire.

We supported
2,462
patients and those important to them across North Derbyshire in 2023/24

Our care highlights from the year

2,462	patients and those important to them supported across North Derbyshire
317	received specialist inpatient care
266	accessed Day Services support
1,855	were cared for in their own homes
173	were cared for by our Virtual Ward team
651	were supported by our Supportive Care Service team
663	were supported by our occupational therapists
660	were supported by our physiotherapists
323	received complementary therapy care
565	received care from our Lymphoedema team

Our impact

Improving accessibility to our care

In August 2023, we successfully launched our Single Point of Access service, a big step in making it easier for patients to get the care they need quickly.

What is the Single Point of Access service?

Single Point of Access is a dedicated service that streamlines access to Ashgate's care and support. It serves as the central contact point for referrals, ensuring patients receive timely assessments and support. The Single Point of Access team coordinates initial consultations, provides information about services, and facilitates seamless transitions into ongoing care, enhancing the patient experience through efficient and supportive pathways.

Since its launch, this service has become essential for patients, ensuring they hear from us within the same day or the next day after being referred. This has really helped patients understand what support is available, including our advice line.

There has been a significant increase in patient contact since the first pilot. Almost all contacted referrals received a contact within 48 hours of the referral being registered.

Looking ahead, we're excited to expand our Single Point of Access to cover more of our services. We're making sure we can continue to offer quick and clear support to everyone who needs it.

Transforming care at home

In April 2023, we introduced our Virtual Ward, a groundbreaking service aimed at delivering compassionate care directly to patients in their own homes. Starting from a successful trial in January 2023, this service is all about respecting patients' wishes to stay at home, avoiding unnecessary hospital visits, and providing flexible, responsive support.

Led by a skilled team including specialist nurses, palliative care support workers, and backed by medics, therapists, social workers, and coordinators, the Virtual Ward has already supported over 225 patients. Remarkably, only seven of these patients needed hospital care, showing how effective home-based support can be.

Beyond direct patient care, the Virtual Ward has led in-home treatments, helped with hospital discharges, and educated other healthcare providers on better symptom management.

Looking ahead, we hope to expand to a seven-day service, ensuring we're there whenever patients need us.



Amanda Hall and Sophie Dudley, Palliative Care Specialist Nurses on our Virtual Ward.





How our Virtual Ward has been supporting families

Carole Lowry was one of the first patients to use our Virtual Ward before she died in 2023, at the age of 79.

Her husband, Peter Lowry, praised the kindness and dedication of nurses Amanda Hall and Sophie Dudley, who lead the service, along with other staff who supported their family during one of the most difficult times they faced.

Peter said: "The hospice's Virtual Ward meant my wife Carole died in the home she loved with her husband by her side.

"I know that when Carole died she was peaceful, pain-free and in the place that she wanted to be.

"That was because of the hospice's Virtual Ward and its visionary approach to home-based hospice care.

"We felt that the hospice always had time for us. The support, which sometimes was just praise for the way we were handling it – whether it was a hug, a phone call or a visit made all the difference.

"I can't thank Ashgate enough for its kindness and dedication."

Our impact

Improving best practice in palliative and end of life care

End of Life Care Facilitators

Our End of Life Care Facilitators work closely with nursing homes and care homes across North Derbyshire to improve end of life care for their residents.

Over the past 12 months, our End of Life Care Facilitators have led regular training sessions on important topics such as using syringe drivers, verifying expected adult deaths, and communication skills. These sessions are easily accessible through platforms like Eventbrite. Additionally, we offer customised training to care homes, covering specific needs like mouth care, caring for dying patients, and advance care planning.



Erica Robins and Shelagh Freeman, End of Care Facilitators

Project ECHO

Our work with Project ECHO has been especially impactful. This project, initially piloted with North Derbyshire nursing homes, has covered diverse topics such as working with funeral directors and supporting colleagues through death and dying. We are now rebranding this initiative as the "Ashgate Hospice End of Life Care Network for Care Homes" and expanding its reach.

What is Project ECHO?

Project ECHO (Extension for Community Healthcare Outcomes) is a model that uses video conferencing to connect healthcare professionals with experts. This initiative aims to boost the knowledge and skills of healthcare providers, especially in underserved areas, through regular virtual sessions where specialists share their expertise and best practices.

Joined Up Care Derbyshire (JUCD)

We have also been part of the Joined Up Care Derbyshire (JUCD) End of Life programme, which focuses on improving end of life care across Derbyshire. This initiative has educated 724 participants from various settings, including hospices and nursing homes.

Joined Up Care Derbyshire

ReSPECT

We have developed ReSPECT competencies, now used across the county, and offer training on conducting ReSPECT conversations and filling out forms. ReSPECT involves creating a personalised plan for emergency care and treatment based on a patient's preferences and clinical needs.

Derbyshire End of Life Quality Award

Our involvement in the Derbyshire End of Life Quality Award (DELQA) highlights our dedication to improving standards in nursing homes. We regularly visit these homes to provide education and support, ensuring that staff are well-trained and equipped to deliver excellent end of life care. Feedback from our sessions, like this comment from a verification of death training participant, shows the positive impact of our efforts: "Very well executed, I feel my knowledge and skills have improved around this area and my experiences and feedback were well received. Thank you to such kind, caring and knowledgeable trainers."

Our impact

Supporting children and young people

This year, our Children and Young People's Service has worked to better support those coping with bereavement. We've shifted from one-on-one therapy to group support, ensuring quicker access to help for young people referred to us. Now, one-on-one counselling is tailored specifically for those dealing with more complex grief.

Children and young people no longer have to wait; they can join support groups immediately. We've welcomed two full-time family support workers and launched monthly family and teenage support groups. Additionally, we've begun providing pre-bereavement support on our Inpatient Unit and extended our reach to homes and schools in the community.

Our individual support is now more focused on achieving specific goals within a set timeframe. We've trained staff at local primary schools to better support grieving children and transformed an office onsite at Old Brampton into a welcoming family therapy room.

Every child and young person referred to us receives personalised support, whether through books, group sessions, phone consultations, or one-on-one meetings. We also extend our support to the entire family, often connecting adult family members with our Counselling Service for additional assistance.





Introduction and contents

- The dos and don'ts of supporting children and young people in grief 3-4
- Age-appropriate responses to grief and loss 5-8
- Age-appropriate activity list 9
- Understanding stress responses in children and young people 10
- Supporting neurodivergent children and young people through grief 11

We understand that helping children and young people cope with grief can be overwhelming. But don't worry, trust yourself and what you know about the children. Remember, you have more than one chance to help them out. Don't worry about saying the perfect thing, you're part of a process.

This booklet is here to provide helpful information for adults who might come across children or young people dealing with bereavement or the serious illness of a family member.

If you need extra support, we're here for you. You can ask us for:

- Training sessions at your school for teachers and staff on how to help students through grief.
- School assemblies where we can talk about grief and how to support each other.
- Group activities for children, young people, and adults to share their experiences and support each other.

If you have concerns about a child in your care who has experienced or is experiencing bereavement, or wish to arrange training, please contact us.

- **Clair Russell, Children's and Young People's Service Manager**
  07975 959 578 clair.russell@ashgatehospice.org.uk
- **Sally Bird, Family Support Worker**
  07842 021 604 sally.bird@ashgatehospice.org.uk

The dos and don'ts of supporting children and young people in grief

Dos

- Remember to give people a safe space and time to process emotions experienced.
- Let them know it's okay to talk about the person that has died.
- Model good thinking and feeling with the child.
- Listen, acknowledge, validate, and normalise their feelings before trying to start a conversation.
- Remain mindful of your own experiences of grief when talking to a child or young person.
- Remember to look after yourself when supporting children and young people through this process.
- Remember that grieving is a natural process that cannot be hurried. Give the child or young person space during the day to process difficult feelings.
- Remember that grief is an individual process, unique to each person.
- Be honest, using clear and simple language around death, for example, 'death', 'dead' and 'dying' rather than 'lost' or 'passed away', which could be confusing.
- Try to involve family members when directly supporting the child.
- Communicate with the family around specific needs, choices and religious beliefs with regards to death, funerals and after-life.

Registered Charity No. 700636

Supporting children and young people through bereavement

Compassionate care for everyone

Ashgate Hospice

www.ashgatehospice.org.uk

Soulmates of 52 years die side by side



We ensured that a loving married couple of 52 years could spend their final days side by side.

Lynne and Chris Johnson received end of life care together in the same room on our Inpatient Unit in Old Brampton.

The couple, who lived in Bolsover, held hands until the very end. Lynne died on 13 February, aged 69, after being diagnosed with a glioblastoma brain tumour less than two months earlier. Chris died at the hospice on 21 February, aged 76, after being diagnosed with bowel and secondary liver cancer in October.

Their daughter, Julie Whittaker, said the hospice granted their final wish of being together until the very end.

"Dad was there for Mum's last breath," said Julie, from Glapwell. "He was holding her hand, and he took so much comfort in that."

"The ultimate goal was ensuring they were together until the end, and it wouldn't have been possible without Ashgate.

"They did everything together. And other than when they were at work they were never apart; they were proper soulmates.

"Even to this day, it doesn't feel real. It's not been long since they passed away – how have they just gone?

"It was such a whirlwind, everything happened so quickly. I'm just so grateful that Ashgate was able to keep them together."

(main photo: @ekrpictures)

Our people

At Ashgate, our staff and volunteers are at the heart of everything we do. Their compassion and expertise are essential as we support people living with life-limiting or incurable illnesses in North Derbyshire. We are fortunate to have such talented teams across the hospice, whose passion for helping others is truly inspiring.



We have
377 staff
who are supported
by a team of
861 volunteers

We are committed to creating an inclusive environment where everyone can be themselves, grow professionally, and take care of their wellbeing. Through ongoing training and development opportunities, we strive to make Ashgate a sought-after place to work in North Derbyshire. Whether they are part of our staff, volunteer team, or supporting us in other ways, we want everyone's experience with Ashgate to be positive and fulfilling.

Saying thank you to our staff and volunteers

In June 2023, we hosted a BIG Thank You party to show our gratitude and celebrate our dedicated staff and volunteers. This event was especially important as we emerged from the pandemic, helping to reconnect and strengthen our team bonds.

At the party, we presented Values in Action and long service awards. The Values in Action Awards recognised those who best exemplify Ashgate's values of compassion, teamwork, respect, inclusivity, and openness, as nominated by their peers. We also honoured staff and volunteers with long service awards, acknowledging their dedication and commitment to Ashgate.



(photos: Ian Boler Photography)

Our people

Developing our teams

By investing in our teams, we ensure that everyone at Ashgate has the chance to grow, develop, and contribute meaningfully to our North Derbyshire community.

We rolled out the 'What it Means to be a Manager at Ashgate' workshop for all our managers and leaders. This workshop helps build strong leadership by exploring the roles and responsibilities of a line manager. It also focuses on understanding teams better to build trust and bring our values to life.

We introduced Roadmap, our new Learning Management System, with easy-to-follow guides and materials. As an active member of the Charity Learning Consortium, we have already helped improve system reports and collaborated with other hospices to share learning.

This year, we saw record levels of engagement in learning and development. There was a 10% increase in staff feeling they have the learning opportunities they need, as shown in the People Survey. By the end of the year, 96% of core skills training was up to date.

We celebrated our apprentices at a special event attended by our leadership team and apprentices from across the hospice. The event promoted continuous learning through apprenticeships and celebrated the achievements of these learners, including five employees who completed their qualifications and ten who are currently on a programme.







Learning on the job with apprentice Holly Lacey

From volunteer to retail worker and then clinical apprentice in just two years – Holly Lacey is always up for the challenge of striving to be the best she can be.

Holly joined our Community Clinical Admin team as an Apprentice Business Support Assistant in February – having gained experience in our Matlock shop as a volunteer and staff member.

She said: "I applied for the apprenticeship in clinical admin because I wanted a challenge. I wanted to push myself to try something completely different to what I'd done before.

"So I thought what better way to challenge myself than through an apprenticeship. Luckily, I ended up loving it!

"A challenge is what I wanted, and a challenge is what I got! Since starting my apprenticeship my overall understanding of business administration has hugely increased.

"Working at Ashgate is very fulfilling and varied. No two days are ever the same! I think no matter if you are in admin, a nurse, retail or a volunteer, everybody has a vital role in making the hospice the amazing place it is today, and your hard work does not go unnoticed."

Our people

Embracing a new way of working

We have reshaped the use of our Old Brampton site to facilitate more in-person work while maintaining the benefits of flexible working arrangements. To enhance collaboration and connection, we created and equipped five new meeting rooms.

We also introduced a new full-day induction workshop, attended by 81 new starters, aimed at fostering better connections with the hospice and each other. The feedback was overwhelmingly positive, with 100% of attendees recommending the workshop. One participant shared, "I felt confident during this workshop to get involved in the activities and speak to other new starters. All of the content throughout the workshop felt very relevant and useful and wasn't information overload."

Listening to our people

In April, we launched our People Survey to gather feedback on what it's really like to work and volunteer at Ashgate. Everyone's views are hugely important, so we were delighted that 240 members of staff (70%) and 253 volunteers (45%) took part. This excellent response rate helps us understand what we're doing well and where we can improve. In future, shorter, more regular surveys on specific topics will provide rapid feedback to steer ongoing improvements.

Following the survey, results show that an incredible 87% of all our staff and volunteers would recommend Ashgate as a place to work or volunteer.

Other key results following the survey include:

- 96% of our staff and volunteers would recommend Ashgate to their friends and family as a place to receive care.
- Our values are at the forefront of our work, with 81% of staff and 84% of volunteers seeing Ashgate's values demonstrated daily.
- 86% of volunteers feel appreciated and recognised for their contributions.
- The number of staff who feel fairly rewarded for their work has increased by 9% since the 2021 survey, with 65% of staff members now feeling this way.

The results were shared with staff and volunteers through in-person and virtual information sessions, team meetings, and internal newsletters. Since then, we've been working to improve the hospice in areas identified in the survey, ensuring we continue to provide the best possible environment for our staff, volunteers, and those we care for. This includes setting up a Volunteers' Forum to engage our volunteers, reshaping the retail wellbeing offer with new manager training opportunities and rolling out updated technology, including laptops to our shops.

87%
of staff and volunteers would recommend Ashgate as a place to work or volunteer.

96%
of staff and volunteers would be happy with the standard of care provided by Ashgate.

82%
of staff and volunteers are comfortable with their work life balance.

Our people

Our commitment to equality, diversity, and inclusion (EDI)

At Ashgate, we believe everyone who engages with us should feel seen, heard, and respected, especially those from under-served and under-represented communities. This commitment extends to our patients, supporters, staff, and volunteers.

Our approach to EDI is woven into our value of compassion. True compassion means embracing inclusivity and recognising the unique needs of every individual. We strive to promote equality, value diversity, and work inclusively across all aspects of the hospice.

To drive organisation-wide change, we established an EDI Oversight Group. Reporting directly to the Board of Trustees, this group ensures we are accountable and proactive in our efforts. Initiatives include adding pronouns to our email signatures and launching an Equality, Diversity, and Inclusivity Hub on our intranet.

Supporting this work is our EDI Advisory Group, now in its third year and with 30 members. This group meets quarterly to explore issues such as racism, disability, and equality impact assessments. Members act as EDI champions within their areas, fostering a culture of inclusivity across the hospice.

We have also built strong connections with local communities representing marginalised groups. We've engaged with the African Caribbean Community Association, the Asian Association of Chesterfield and North Derbyshire, the MacIntyre charity for people with learning disabilities, and Derbyshire LGBT+. These partnerships help us better understand and address the needs of these communities.

By focusing on EDI, we are making meaningful changes in our policies, practices, and culture. Information sessions for staff and volunteers on identity, pronouns, and LGBT+ awareness are just a few examples of our ongoing commitment.

Supporting our workforce through the menopause

We recognise the importance of supporting our staff and volunteers through menopause. With 79% of our workforce being female, many are likely to experience menopause and its associated symptoms.

Menopause and peri-menopause affect individuals differently. While some may have mild or no symptoms, around a quarter experience debilitating effects that can impact their ability to perform at work. This can sometimes lead to valued and experienced staff leaving their roles.

Historically, stigma and taboo have made menopause a sensitive issue, especially in the workplace. Many have suffered in silence, unable to access the support they need. At Ashgate, we are committed to changing this. We want to ensure that everyone experiencing adverse menopause symptoms can continue to bring their vital skills, experience, and commitment to their work.

In the past year, we have taken significant steps to support our team through menopause. We developed a menopause support policy, provided awareness sessions for managers, and set up a menopause support group. These initiatives are aimed at creating a supportive environment where everyone feels valued and empowered to perform at their best.

Compassionate care for everyone

Our people

Our journey to Rainbow Accreditation

At Ashgate, we've been excited to work towards Rainbow Accreditation with Derbyshire LGBT+ (D+). This accreditation is a key step in our journey to support inclusivity for all. Collaborating closely with D+, we're making meaningful changes to ensure everyone feels safe and valued.

Our work includes LGBT+ awareness sessions for staff and volunteers, promoting the use of personal pronouns through our "Pronouns at Ashgate" video, and actively participating in local Pride events. We proudly display rainbow logos and share information about LGBT+ inclusion on our website. We've also improved our data collection to support our aim of more closely reflecting the diverse community we serve.

Our staff have taken part in specialised training to ensure sensitive and skilled support for trans and gender diverse individuals. While earning accreditation is a milestone, we recognise it's just the beginning. D+ has encouraged us to continue improving our LGBT+ inclusion work.

Compassionate care for everyone

We're committed to creating an environment where everyone receives compassionate care, free from discrimination. With D+'s support, we were delighted to hear at the end of 2023/24 that we had achieved the Rainbow Accreditation.

Proud to have achieved

Derbyshire LGBT+
Rainbow Partnership Accreditation





Heather Maurice-Smith reflects on trans and gender-diverse end of life care training

A recent Hospice UK report highlighted a gap in end of life care for transgender and gender-diverse individuals, who often face barriers to respectful care.

In response, several of our staff members participated in the "Being Ready" training by the Gender Identity Research and Education Society (GIRES).

Heather Maurice-Smith, a Palliative Care Support Worker on the Virtual Ward team, shares how this training profoundly impacted her understanding and commitment to providing inclusive care.

"When people are given a palliative diagnosis, the feelings they go through are intense and vary widely from moment to moment. As a support worker, my role is to be there for them and all their people. It is a job I care passionately about, and I want to always be the best that I can be.

"The course is aimed at all professionals involved, from palliative diagnosis to bereavement care and the funeral.

"Ashgate's core values include compassion, respect and inclusion. A portion of our patients and loved ones will be trans or gender diverse. How can we uphold our values without being inclusive to our trans and gender diverse population? In short, we can't.

"The GIRES training included many discussions concerning language and the words we use. All questions were answered, concerns were listened to, many of the attendees had concerns about "getting it wrong" or 'offending someone'. As someone who often feels I am 'getting it wrong' and 'offending' people, it was wonderful to hear that many other professionals felt the same way.

"By the end of the day, I was buzzing with all the new information and ideas. Looking out for our gender diverse and trans people in our communities is not just for young people. There were stories about older people 70+ years transitioning. Something as simple as having our pronouns in our emails demonstrates we are thinking about this portion of our population. Representation matters."

Compassionate care for everyone

Our people

Celebrating women at Ashgate

For International Women's Day, we paid tribute to the incredible role women have had and continue to have in shaping Ashgate.

To mark the occasion, we caught up with some of the amazing women at our hospice. They shared how they inspired inclusion in their roles and lives, and who the women that inspired them were.



Cat Maddy
Head of Marketing and Communications

"I'm really proud to be part of a team where women take the lead, making up a staggering 79% of our workforce. Witnessing women excel across diverse roles and positions within our organisation is truly inspiring.

"Whether they're leading teams, shaping our strategies, or bringing fresh ideas to the table, women are driving our success, and we're always cheering each other on.

"What's equally important to me is being in a workplace where women aren't just there, they're valued and supported every step of the way.

"At Ashgate, we've got some fantastic family-friendly policies that give everyone the flexibility they need to juggle work and life."



Oz Heaton
Manager of our Rowsley shop

"I am proud to manage the charity shop and embrace inclusivity within our team. Elinor, who has autism, has been a dedicated volunteer with us for three years now. She takes joy in sorting, pricing, and organising books, media, and children's items. Working alongside her is a pleasure as she brings a unique perspective and enthusiasm to the team.

"We also value the work of our wonderful volunteer Diane, who is deaf. Her sense of humour brightens our days, and she helping us learn basic sign language to facilitate communication. Diane excels at pricing goods, arranging displays, and assisting customers at the till.

"I recognise that individuals with disabilities have the same desires as those without disabilities – to be part of a community, to be engaged, to contribute meaningfully, and to be challenged. Volunteering at our shop fulfils these needs for Elinor and Diane, and it brings me immense pride to see them thrive in our inclusive environment at Ashgate."

Laura Wilson
Ward Sister

"I have recently been working with our Equality, Diversity and Inclusion Lead, Liz Allam and MacIntyre, which aims to support and empower people living with disabilities.

"We want to be able to do everything we can here at the hospice to improve things for patients, their loved ones, staff, volunteers and supporters, not only on the Inpatient Unit but at the hospice as a whole.

"Our aim is to make our services as accessible as they can be for people who visit us. We are also looking at ways in which we communicate to one another and how we can make this more inclusive."



Our people

Gender pay gap

In 2023/24 Ashgate had a negative gender pay gap. The pay gap exists because of an imbalance in the proportion of men and women across all levels of the organisation and is mainly in favour of women due to the number of women in higher paid roles.

Our mean gender pay gap is just -4.91%, and the median is -5.54%. This means that, on average, women earn £1.05 for every £1 men earn. When looking at the median, women earn £1.06 for every £1 men earn.

We are committed to understanding and improving the experiences of both men and women at Ashgate. While our sector is mostly female, which has many benefits, it also has challenges like lower pay and status for health work.

We ensure that women have equal opportunities for promotion and leadership roles. We also provide flexible working options for everyone to help balance part-time and full-time work. Our annual pay audits make sure that equal work is equally valued.

Our Equality, Diversity, and Inclusion Advisory group helps us improve policies and practices. We aim to create a safe and supportive working environment with family-friendly policies and flexible working options.

We know there is always room for improvement in pay fairness. By valuing all our staff and promoting fairness and flexibility, we can provide the best care to our patients, those important to them, and our supporters.

Mean gender pay gap

-4.91%



£1.00 **£1.05**

Median gender pay gap

-5.54%



£1.00 **£1.06**

Our people

Last year, we welcomed
318 new volunteers
to the Ashgate team. Their dedication and passion have made an incredible impact.

Volunteers are at the heart of Ashgate

Our volunteers are at the heart of everything we do. They show incredible kindness and dedication, playing a vital role in providing care and support to those who need it most. Over the past year, our volunteer numbers have grown significantly, with 861 people generously giving their time and skills to help others.

Our volunteers are driven by a strong desire to support the hospice and contribute to our vision of compassionate end of life care. Many have personal connections to Ashgate, inspired by their loved ones who received our care.

Our volunteers take on a variety of roles, from supporting patients in our Inpatient Unit to maintaining our gardens and organising fundraising events. Each role is crucial in ensuring that we operate smoothly and continue to provide outstanding care.

This year, we have seen a significant improvement in volunteer training, with compliance increasing from 63% to 83%. By recognising and using their diverse skills and knowledge from different backgrounds, our volunteers continue to meet our high standards of care.

Together, we honour our volunteers for their invaluable contributions. Their selflessness and dedication are essential at Ashgate, ensuring we provide comfort and care to those who need it most.



Our longest-serving volunteers

Dorothy Tilley, Brenda Bagshaw and Kathleen White have been giving up their time to support Ashgate since it was founded in 1988. Together, they have more than 100 years' service between them.

Dorothy, a Community and Events volunteer, Kathleen, an Inpatient Unit volunteer and Brenda, a Retail Assistant said they all "feel privileged" to have been able to play an integral role in shaping the hospice over the years.

"I feel privileged to have been part of the hospice for such a long time," said Dorothy, who started volunteering on the Inpatient Unit after being part of the original group who raised the funding to open the hospice in 1988.

"Ashgate has developed and became part of the area. The community put in not only their money, but the time and interest to keep it going. It's been a huge part of my life ever since it began.

"I consider the hospice to be my second family and still feel quite emotional visiting the Inpatient Unit because it was my second home for a very long time."

Brenda was instrumental in the launch of our first shop and still helps there to this day.

She started volunteering because she wanted to give something back after we cared for her husband, Harry, at the end of his life.

"My husband was here in 1990 and was only here for 36 hours and the care was just faultless," said Brenda. "The biggest thing that happened to me was that somebody took over mine and his stress.

"The word went out that the hospice wanted volunteers and initially I wanted to go into the office, but you weren't allowed to volunteer for a year after a bereavement.

"But I saw an advert in the local paper for people to make donations of old clothes – we ended up having clothes piled up in the attic of my old house before the shop opened!

Kathleen, whose mother received care from our community team, said: "I started because I had two friends who were terminally ill who had young children. I just felt that there was a better way they could have been looked after.

"Now I can't imagine a Thursday evening without going to the hospice; it's a big part of my life and keeps me in touch with reality."



Our people

Advancing technology for enhanced care and security

Our technological investments continue to make Ashgate a great place to work and receive care. These advancements highlight our dedication to using technology to improve patient care, operational efficiency, and data security.

To enhance patient care and efficiency, we have introduced several important IT initiatives this year. We integrated SystmOne with 'Derbyshire Shared Care Records' to ensure seamless information sharing at the patient level, promoting more coordinated and effective care. Additionally, we rolled out the 'Brigid' mobile app for our nursing staff, allowing them to access real-time patient information quickly and easily, especially in community settings. We also transitioned to the Horizon Client platform, streamlining remote access for our clinical teams and ensuring faster responses.

We've improved strategic insights and reporting by using Power BI Dashboards. This gives our managers real-time analytics and decision-making tools. At the same time, we're updating our SharePoint environment to create a more user-friendly interface, making it easier for our staff to collaborate and work efficiently.

This year, we migrated our on-site servers to the cloud, which offers greater scalability and reliability. Alongside this, we implemented a cloud-based 3CX phone system, which has replaced our older, less flexible phone system. The 3CX system allows for better call management and integration with other communication tools, making it easier for our workforce to stay connected and responsive.

Security remains a top priority. We conduct regular vulnerability scans and use strong encryption to protect our data. With the support of our IT provider, Central Technology, we perform thorough audits and penetration tests, reinforcing our cybersecurity measures and achieving a high assurance rating from 360 Assurance.

To ensure our staff are well-equipped to handle security threats, our Learning and Organisational Development team provides comprehensive internet and email security training through our in-house learning management system, Roadmap. This proactive approach has significantly reduced security risks and created a safe and supportive IT environment for everyone at Ashgate.



Our voice

Over the past year, we've continued raising awareness about the issues people face at the end of their lives, including the need for better funding for Ashgate and other hospices from local health budgets. By engaging with our community, we help them understand how they can access our services and support our work.

Sharing information about death, dying, and bereavement, as well as the vital work we do, is crucial for our fundraising and campaigns. Through our website, social media, and the press, we strive to reach more people, fostering a North Derbyshire community that knows how to support those at the end of their lives and those living with loss.

Rolling out the brand

A consistent brand helps us build strong local and regional recognition, which in turn supports sustainable funding, recruitment, retention, and boosts support for our events and shops. This year, we've made significant strides in rolling out our new brand across the Old Brampton site and our new shop openings. The updated signage at Old Brampton now proudly showcases our new look.

Additionally, we have rebranded our informational leaflets to align with our new look, ensuring all our materials present a cohesive and engaging image of Ashgate.





The Life & Death Podcast

Reflecting on life and death

In May, we proudly launched series four of The Life and Death podcast. Hosted by our Senior Physiotherapist, Stephen Rumford, this six-part series offers an honest exploration of life, death, bereavement, and everything in between. In this series, Stephen sat down with special guests to delve into their experiences with death, dying, and bereavement, aiming to deepen our understanding of what life and death means to them.

Our guests included:



Ruth Swailes

When Ruth's husband was diagnosed with pancreatic cancer, she began documenting their journey through social media and a personal blog. Nearly one year since Pete's death, Ruth reflects on the past year, how her blog has helped others, and how she has found hope in the face of adversity.



Annie Nicholson

In 2011, London-based artist Annie Nicholson experienced unimaginable tragedy when three members of her family were killed in an accident. Annie shares how this incident changed her life and how she uses her art to navigate the complexities of grief. Through her alter-ego, Fandangoe Kid, Annie encourages open and honest conversations about trauma through dancing and music.



Tim Sullivan

A film director, screenwriter, and novelist, Tim Sullivan has had a successful career in British television and cinema. Tim discusses the sudden death of his father on what should have been one of the happiest days of his life, and how this event has shaped his journey.



Klaus Bo

A self-taught freelance photographer based in Copenhagen, Klaus Bo has documented social and cultural stories worldwide. In 2010, he began The Dead and Alive Project, capturing death rituals across the globe, offering rare insights into diverse cultural practices.



Hayley Campbell

Journalist, writer, and broadcaster Hayley Campbell's book, All the Living and the Dead, explores the lives of professionals who work with death. Inspired by her childhood fascination, Hayley meets embalmers, a former death row executioner, mass fatality investigators, and a bereavement midwife, aiming to change how we think about death.

Our voice



Amber Jeffrey
Podcaster Amber Jeffrey created The Grief Gang podcast following her mother's unexpected death. At just 19 years old, Amber sought to find people who could empathise with her grief. Her podcast has become a valuable resource for those experiencing bereavement.

The popularity of The Life and Death Podcast continues to grow, helping us create a supportive community in North Derbyshire. The podcast promotes conversations about death and dying, and demystifies hospice care.

Since the first episode aired on 8th October 2020, the podcast has amassed **16,200** listens.

Here's what our listeners said:

"I just wanted to say thank you for this podcast. I have only recently come across it and have found it really helpful to listen to the experiences of what people have gone through.

"And the presenter is so genuine and asks questions that are helpful to listeners, who may be in a similar position, or anticipating the loss of a loved one.

"So thanks again for talking about this subject which many of us seem to find so hard."

"A gorgeous, serious, insightful, engaging and engaged podcast. One of the most listenable and likeable hosts I've heard, one that's open, genuine and interested. If you are interested in life in its most final sense...LISTEN!!!"

"Such a valuable, insightful and thought-provoking series. As a society, it feels like we talk about taxes a lot, but not their inescapable counterpart, death, and I feel that needs to change."

Listen to the podcast here: Scan me





Celebrating our role in the NHS at 10 Downing Street

On 5 July, our specialist palliative care nurse, Sophie Dudley, was honoured with a special invitation to 10 Downing Street to celebrate 75 years of the NHS.

Sophie had the chance to meet with key figures, including the Prime Minister, the Health Secretary, the Chief Nursing Officer, and the Secretary of State for Environment, Food and Rural Affairs. She joined NHS colleagues from across the country to mark this significant milestone.

Reflecting on her visit, Sophie shared: "The Chief Nursing Officer, Ruth May, was incredibly welcoming and showed great interest in the hospice and our work on the Virtual Ward.

"Overall, it was a wonderful day of networking and discussing palliative care and our hospice, while enjoying the unique experience of being at 10 Downing Street. It was a surreal experience, and I am extremely grateful for the opportunity."

Our voice

Encouraging open conversations about death, dying, and bereavement

We know that open and honest conversations about death and bereavement are essential. This year, we have worked tirelessly to encourage these discussions, particularly through our involvement in hosting two Death Cafés.

The aim of a Death Café is "to increase awareness of death with a view to helping people make the most of their (finite) lives." It's a space for open, agenda-free discussions about death, not a grief support or counselling session.

For our promotional materials, we drew inspiration from Mexico's Day of the Dead, a vibrant celebration of life and death. Our materials featured colourful skulls and skeletons, designed in our brand colours and softened with hearts and butterflies. This bold, provocative imagery aims to reduce the stigma associated with death and encourage open dialogue.

At the events, topics ranged from the afterlife and the existence of ghosts to strategies for supporting one another during times of loss. Feedback from those in attendance was overwhelmingly positive, with participants appreciating the chance to have open and honest conversations. Comments included:

"The opportunity to have open and honest conversations with different people."

"A very enjoyable experience."

"A lovely environment and enjoyable afternoon."

"Everyone was so friendly, and I had a real laugh."

Through initiatives like the Death Café, we continue to promote the crucial work of Ashgate, raising awareness about our services and helping to create a community that is better equipped to support those facing the end of life and those living with loss.



Tea, cake and open conversations about death and dying

Raising awareness and dispelling myths

We are dedicated to spreading the word about who we are, what we do, and how we support those living with life-limiting or incurable illnesses. This past year, we have made significant strides in raising awareness and engaging the community to ensure everyone knows about the compassionate care we offer.

During Dying Matters Awareness Week in May 2023, we shared various blogs on death, dying, and bereavement. One standout piece was our 'Myth Busting' blog, created with support from colleagues across the hospice. This blog aimed to correct common misconceptions about hospice care. For example, many people think a hospice is simply a place to die. Jane Jones, our Head of Onsite Clinical Services, shared, "Caring for patients at the end of life is only a small part of what we do. Our work begins much earlier, helping to improve the quality of life from the time of diagnosis. Many patients come to our Inpatient Unit for symptom control and go home afterward."

Another common myth is that hospices are sad and depressing places. Karen Walker, our Ward Manager, often hears visitors express surprise at the warm and welcoming atmosphere at Ashgate. "Visitors often expect the hospice to be gloomy but are pleasantly surprised by the comfort we provide. Our beautifully decorated bedrooms, private garden access, and homemade meals all contribute to a comforting environment," she explains.



Karen Walker, Ward Manager



Jane Jones, Head of Onsite Clinical Services

Hospice myths busted!

by the people who provide our care

myth A hospice is a place you go to die

Busted! Caring for patients at the end of life only accounts for a small part of the work we do. We can help improve people's quality of life soon after they are told they have a life-limiting diagnosis, or at any stage of their condition. In fact, about half of our patients that come to our Inpatient Unit go home after receiving expert pain relief or symptom control.

myth Only people who have been diagnosed with cancer can receive care at hospices

Busted! We care for a lot of patients with cancer at the hospice, but around two in five of the patients we support are living with other illnesses including motor neurone disease, end-stage heart, kidney and lung diseases, Parkinson's and much more.

myth Hospices are sad and depressing places

Busted! From the moment people come through our doors, any opinion that our hospice is sad and gloomy is changed! We go above and beyond to ensure our hospice is a home away from home for our patients and their families who are visiting.

myth To receive care I will have to physically visit the hospice building

Busted! Our care goes way beyond the walls of our main hospice site in Chesterfield. In fact, most of our patients receive care in their own homes.

myth Only elderly folk are cared for at hospices

Busted! A third of the people we care for are younger than 65. Here at Ashgate Hospice we care for anyone above the age of 18.

myths facts

Our voice

We shared stories like Pam Hand's 28-year journey as a housekeeper and Jamie Hewitt's transition from professional footballer to van driver, showcasing the impact of their contributions.

Hospice Care Week, under the theme #WeAreHospiceCare, was another opportunity to highlight our team's dedication.

Delivering care for North Derbyshire

From scoring for the Spireites in an FA Cup semi-final to helping fund vital care for North Derbyshire – Jamie Hewitt has done his fair share of good for the people of Chesterfield.

The former defender made over 500 appearances in blue over his 17-year career before retiring in 2002 and staying on as the club's Sports Physiotherapist.

Well over a decade later, Jamie was ready for a career change and was intrigued at the prospect of joining us as a van driver for our furniture store in Hasland.

Six-and-a-half years later, he enjoys travelling across Derbyshire collecting and delivering furniture for our supporters.



Jamie said: "I saw the hospice opportunity come up and I'm only around the corner; Ashgate has been in Chesterfield for years and it was a good cause so I went for it.

"Years later and I love it at the hospice. It's nice to meet people who support the hospice which 99 per cent of our callouts are – you get to see the generosity of people and it's really fulfilling."

'Housekeeping involves way more than just cleaning'

Whilst flicking through the local paper back in 1995, Pam Hand spotted an advert for a role as a housekeeper at Ashgate.

Pam admits she knew little about the hospice at the time but was intrigued after hearing about the work we were doing to support people in North Derbyshire.

Her subsequent application for the job was successful and now – 28 years on – Pam leads a team of nine close-knit housekeepers, all of whom are integral to the services we provide for patients.

From guiding her team through the intense challenges of the pandemic to meeting and speaking with hundreds of patients and those important to them – Pam feels being part of the hospice is a "privilege".



Pam: "Prior to starting my role at the hospice I didn't really know it existed, but I did my research and soon found out what marvellous work everyone did.

"I wanted to get involved and help the hospice support the people of North Derbyshire, so I applied and here I am 28 years later!

"Obviously the cleaning aspect of our job is vitally important but being a housekeeper at Ashgate is way more than just that.

"The team plays a valuable role in providing the hospice's care; ensuring our patients and families are comfortable during their stay at the hospice and being there to speak with people during difficult moments."

Our voice

An online community of support

At Ashgate, we understand the crucial role that online support plays for those we care for and their families. Whether someone is living with a life-limiting or incurable illness or grieving a loss, our online communities provide a vital space for connection and mutual support. These platforms also help us raise awareness of our services, extend our support, and encourage open and honest conversations about death, dying, and bereavement.

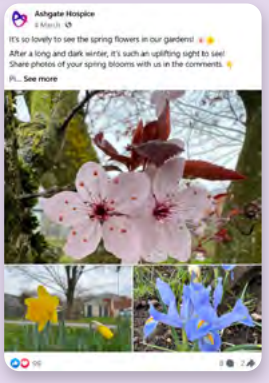
Our website is often the first step in someone getting in touch with Ashgate. It's the place our patients and those important to them go to find vital information to make informed choices about their care. Our website is also home to multiple resources, including videos, leaflets and articles. This includes support on talking to children about death and dying, audio recordings for guided meditations and the benefits of acupuncture.

10,551
users on average to our website

In 2023–24, our social media activity reached over 900,000 accounts on the platforms where we are present. By sharing our content and engaging with posts from others, we have fostered a supportive online environment. This engagement not only reinforces our messages across various media but also helps us reach new audiences and generate additional support for Ashgate.











The people behind our mission

Our ability to deliver high-quality, compassionate care depends on the support of our community. Despite the cost-of-living crisis, our supporters and local businesses have stood by us, showing incredible dedication and generosity.

We are not an NHS hospice.
That means we must raise over
£9 million
each year to continue to provide our crucial palliative and end of life care.

They have dug deeper than we ever could have imagined to raise money for Ashgate.

Whether through skydiving, attending events, or donating in memory of someone they love, their efforts have been remarkable. We are deeply grateful for their time, commitment, and donations, which make a huge difference in the lives of those we care for and the people important to them. Thank you for helping us continue our mission.

A record-breaking year for our retail team

Our network of 17 shops and two coffee shops plays a crucial role in funding the compassionate care and support we provide to people living with a life-limiting or incurable illness. Without this support, we simply couldn't do what we do.

This year has been record-breaking for our retail team. During the 2023–2024 financial year, we generated an impressive £4,036,281 through our retail activities, a 11% increase from the previous year. This boost was driven by strong high-street sales, particularly in furniture and clothing sales.

Our success is a testament to the hard work and dedication of our staff and volunteers in our shops and coffee shops. Across our entire network, we sold 1,075,053 items, ranging from second-hand clothing and homeware to furniture and toys.

Not only have we seen an increase in footfall on the high street, but our online sales have also soared. This year marked a record-breaking performance for our eBay, Amazon, and auction activities, raising £162,628.

We are deeply grateful for the incredible efforts of our retail teams and the continued support from our community. Buying from us directly supports people in North Derbyshire who are living with a life-limiting or incurable illness.

£4,036,281
was raised by our network of shops

1,075,053
items were sold

£162,628
was raised by our online sales

Every penny really does make a difference.
In fact, last year we received **7,550 donations of £10 or less.** Together, this raised
£47,163

The people behind our mission

Making our shops more accessible

Making our shop spaces accessible and welcoming is very important to us. Our retail team recently installed a new custom-built counter at our Alfreton shop specifically for our volunteers who use wheelchairs.

Emma Holloway, who has volunteered at the shop since 2014, said she can now fit her wheelchair under the shop counter.

Emma said: "Now I can get my chair under the counter and reach the till with ease, and I've also got space to wrap items for customers when they come in and support us.

"Being able to turn my chair around behind the counter has made it so much easier for me to support my colleagues and get in and out of the space. It's made a massive difference to my volunteering experience."

She added: "I love volunteering at the Ashgate Hospice shop in Alfreton; it's like one big family and everyone is very supportive of one another.

"I especially enjoy interacting with customers who come in and buy items and the people who come and generously drop off their donations.

"I'd urge anyone thinking about coming in and volunteering at one of the hospice's shops to just go for it – it's such a rewarding experience."



Left: Emma using the new custom-built counter
Above: the old inaccessible counter

Growing our shop network

Ashgate's shops offer more than just preloved clothes, shoes, and books. They are welcoming spaces where people can learn about our hospice services, discover local support, and connect with others who understand their needs.

In October, we proudly opened our 17th shop in the Parkside Shopping Centre, Killamarsh. The new shop has created four jobs and brought in new volunteers to our team. Every sale and donation at the shop directly funds care for individuals with palliative or end of life conditions in Killamarsh and beyond.

Our expanding shop network continues to support the vital work we do, ensuring that Ashgate can provide compassionate hospice care to those who need it most.

4,434
new Gift Aid donors signed up

505,201
transactions were made across our shops

The people behind our mission

A record-breaking Sparkle Night Walk

Our annual Sparkle Night Walk was a resounding success, raising a record-breaking £317,671. Over 2,700 participants, decked out in pink and flashing bunny ears, took on the 10km walk sponsored by Technique Learning Solutions. Starting from Chesterfield Football Club on Saturday 1 July, this event surpassed our previous fundraising record by over £50,000, marking an incredible achievement for everyone involved.

The generosity of our sponsors and corporate supporters saved us £29,000 in running costs on the night, allowing more funds to be directed towards vital care. The route took the walkers from the stadium down the A61 bypass, which was closed to traffic, past the Crooked Spire, and through the streets of Chesterfield before returning to the football ground.



(photos in circles: Megan Crossland, Tom Hodgson, Nick Rhodes, Tom Hodgson)



Malcolm pictured far left
(photo: www.tomhodgson.co.uk)

Malcolm's story

Amongst those taking part in the Sparkle Night Walk was Malcolm Green, 80, who walked in memory of his daughter Vicky Morton after she died at the hospice in January 2024, aged just 50.

Vicky, from Dronfield, had been diagnosed with breast cancer five years before and received "first-class" care at home and on our Inpatient Unit.

Malcolm, who was joined by his son-in-law Russ and grandsons, Ben and Toby among other family and friends, said: "Events [like the Sparkle Night Walk] just show how much the hospice means to so many people.

"I must admit the treatment and support Vicky received was absolutely first-class. She only went into the hospice for the last week of her life, but she received care at home for the last three to four months, which helped her with pain relief and other things. It was just so wonderful.

"I'm a member of a walking club so friends have been saying the walk will be a breeze for me, but at 80 years of age I'm not so sure! There's about another 12 of us – this is the largest number of participants there's ever been which is remarkable."

The people behind our mission

Celebrating community spirit

Over the past year, we've been incredibly touched by the strong support of our community in North Derbyshire. Their dedication to our cause has been truly inspiring, as they've generously given their time and effort to raise essential funds for our hospice care and services. Here are just some of the ways:

Go Pink for Ashgate: This annual campaign, held from 9–15 October 2023, doubled its initial fundraising amount, raising £15,621. Forty-seven organisations and individuals, including eleven schools, participated, showcasing growing community involvement and support.

Christmas hampers: Generously donated by Spar and beautifully wrapped by our staff and volunteers, Christmas hampers contributed £3,309 through raffles organised by local organisations, spreading festive cheer while supporting our hospice.

School initiatives: St. Mary's Catholic High School and Brookfield School stood out with their remarkable fundraising efforts, raising £12,506 and £13,732 respectively. Their initiatives, including sponsored walks, highlight the powerful impact of youth engagement in our community.

Community events: Our Community Fundraising team actively participated in 38 summer events from May to August, including the Buxton Spring Fair, Eckington Car Show, and Druid Rocks Festival, fostering community engagement and raising awareness.

New Whittington Social Club: Through diverse events such as raffles and Shed Fest, the New Whittington Social Club raised an impressive £26,596, demonstrating the power of community spirit in memory of Margaret Umney.

Collection tins: Rebranding efforts of over 750 collection tins in shops and pubs across North Derbyshire resulted in an incredible £42,000 raised this year, surpassing previous records. Continued support from businesses, including new placements in the Buxton area, underscores their ongoing commitment to our cause.

Community champion groups: Operating in Buxton, Dronfield, and Matlock, these groups played a pivotal role in placing collection tins and organising community events such as fashion shows and quizzes. Their efforts, alongside the dedication of six regular volunteers, form the backbone of our community fundraising efforts.



First-ever Superhero Night Walk

Our very first Superhero Night Walk took place on Saturday 14 October at Chesterfield's Queen's Park. It was a sold-out event, filled with over 1,100 attendees, including 464 children.

Everyone joined in with excitement, walking one or three-mile routes from 6.30pm onwards. Each child received a free superhero cape and a glow-in-the-dark mask, making the evening even more special for families.

The event was sponsored by Technique Learning Solutions, Motan Colortronic, and PDM, and together we raised an incredible £57,298. Volunteers made sure everyone stayed safe and had a fantastic time throughout the event.



(photo: Nick Rhodes)

The people behind our mission

Council Chairman raises a remarkable £55,000

In the past year, Councillor Martin Thacker MBE, Chairman of North East Derbyshire District Council, has once again demonstrated his remarkable commitment by raising an impressive £55,000. This contribution brings his total support for the hospice to over £130,000 across his terms as council chairman.

Choosing Ashgate as his charity of the year, Councillor Thacker and his consort, Jean Spencer, orchestrated a diverse range of events, from an energetic Elvis night to community gatherings at Brampton Brewery, totalling more than 15 successful fundraisers.

Our Chief Executive, Barbara-Anne Walker, said: "Once again, we are absolutely astounded at the support we have received from Councillor Thacker and his volunteer team.

"They have all gone above and beyond in their fundraising efforts by arranging fun and exciting events all year round for everyone to attend and enjoy.

"We rely on the hard work and generosity of the people of North Derbyshire to help us raise



the funds needed to provide our care each year.

"This kind of donation will mean we can be there for so many patients and their families across our region."

Reflecting on their fundraising journey, Councillor Thacker, said: "Jean and I have met many inspirational people during our time in office, which has been evident during our fundraising for Ashgate Hospice.

"We are incredibly grateful to those who have come along to our events or helped in any other way, whether it's wing walking, extreme walks or running for sponsorship.

"Fundraising in the current economic climate has been challenging. However, we have not been deterred from highlighting the work of the hospice and raising money for this very worthy charity.

"We are proud to have raised an amount of £55,000 and know the hospice will put the money to good use to make a difference for patients and their families."

Generous gifts in kind

Not all the support we receive is monetary; many companies and organisations choose to support us by donating their goods or services. This support significantly enhances our ability to provide compassionate care and support to patients and the people important to them. Over this period, **we received £189,713 worth of gifts in kind.** Here are some of the amazing contributions:

- **MPC Systems** donated £6,850 worth of racking and shelving for our new Fundraising Centre at Storforth Lane Trading Estate and at the Alfreton shop.
- **Walker Woods Ltd** carried out a reinstatement valuation, which should have cost £2,500, but they kindly did the report for just £1.
- **Nestle, Buxton Water** donated 5,000 bottles of water for our fundraising events.
- **MSK Ingredients** donated a Pacojet, a specialist machine for our catering team, saving the hospice over £4,500 and significantly improving our patients' experience.
- **GTM Traffic Management** supported the road closures for the Sparkle Night Walk, a gift worth over £9,000.
- **Arnold Clark** continued their kindness by donating a car for hospice use, helping us travel throughout North Derbyshire for fundraising events and appeals.
- **PDM Printers** donated over £2,535 in free print and agreed to provide printed materials for numerous fundraising events and appeals throughout 2024.
- **Jacksons the Bakers** donated bread and cakes for everyday services and special events, totalling £5,549.
- **CLoSE UK** gave quantity surveyor time worth £10,000 towards the new entrance and courtyard accessibility project.

These generous gifts have made a big difference in helping us provide our crucial care and support. We sincerely thank all our supporters for their continued kindness and generosity.

The people behind our mission

Making a difference together

We are incredibly fortunate to receive unwavering support from our corporate partners. Their contributions, whether through financial donations, event sponsorships, or in-kind gifts, play a vital role in ensuring we can continue to provide compassionate care and support across North Derbyshire. Here are some highlights of the tremendous corporate support we received this year and the difference it has made:

- **Golf Day:** Our long-standing Golf Day event raised a record amount of £24,327 in 2023. Despite heavy rain postponing the initial competition, it successfully happened a month later. With 47 Four Ball teams participating and BHP continuing as our main sponsor, we also received £3,200 in corporate sponsorship from 10 companies sponsoring a hole on the course.
- **Kingfield Electronics:** This generous company doubled their regular monthly donation from £1,500 to £3,000, resulting in a total of £13,500 in regular monthly gifts.
- **Business Club:** Our newly formed Business Club saw 16 businesses, including Markovitz, PDM, and Penny Hydraulics, join and collectively raise £7,000.
- **Sparkle Night Walk:** In 2023, £40,000 was raised through corporate sponsorships for the event, covering various aspects such as entertainment, t-shirts, and medals.
- **Star sponsorship:** During the festive season, 34 local businesses sponsored stars displayed on the front of the hospice building, raising £10,500.
- **Tractor Fest:** 34 local businesses sponsored pedal tractors at our Tractor Fest, contributing £5,050.
- **Vine Hotels:** Vine Hotels sponsored our Annual Ball, raising £64,884—£30,000 more than last year. They generously provided free event food and room hire, and contributed overnight stays, vouchers, and hampers for the auctions and raffle, saving the hospice £13,164.
- **Challenge Derbyshire:** Challenge Derbyshire has raised over £74,000 for Ashgate, bringing their total since the initiative began to £892,657.

Thanks to these generous contributions, we can continue providing compassionate care and support to individuals and the people important to them across North Derbyshire. This support not only raises vital funds but also helps to foster a sense of community and togetherness.

A special thank you

We are deeply grateful to all our event sponsors including Graysons Solicitors, Technique Learning Solutions, Motan Colortronic, Aura Flights, Magpie Beauty, Harold Lilleker and Sons, Jake Eville Tree Care, MVIS, Fabworx and PK Group who have collectively contributed over £64,000.



(photos: Ellie Rhodes, Megan Crossland, Nick Rhodes, Simon Wilkinson)

The people behind our mission

Our Trusts and Grants fundraising efforts yielded a total of **£213,380** in 2023–24

Trusts and Grants

The generosity of trusts and foundations plays a pivotal role in our ability to provide vital care for individuals facing life-limiting or incurable illnesses and those important to them.

In the financial year 2023–24, our Trusts and Grants fundraising efforts yielded a total of £213,380. This support enabled us to enhance our services and facilities, making a meaningful impact on the lives of those we care for.

A significant contribution of £150,000 from **The Julia and Hans Rausing Trust** was instrumental in covering the hospice's operational expenses. This funding, pledged for an additional two years, totals £450,000, ensuring stability and continuity in our care provision.

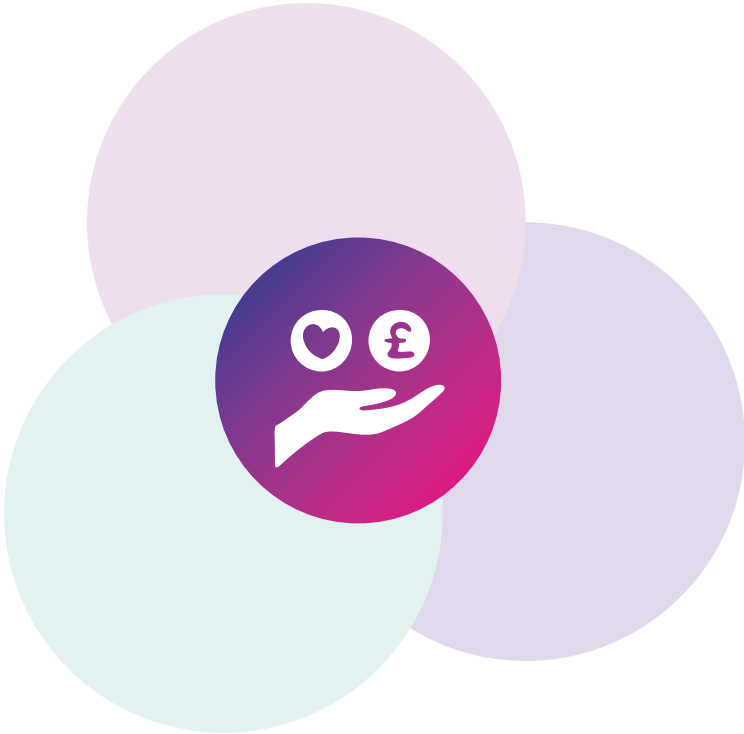
The Albert Hunt Trust provided £15,000 towards our operational costs, further bolstering our ability to deliver compassionate care.

Thanks to the **Yorkshire Building Society Charitable Foundation**, we were able to acquire six new wheelchairs, valued at £1,824, enhancing mobility and comfort for our patients within the hospice.

Support from the **Hospital Saturday Fund**, **Westfield Health Charitable Trust**, and the **Derbyshire County Council Leadership Scheme**, amounting to £9,500, facilitated the purchase of new rise recliner chairs for our Inpatient Unit, improving comfort and quality of life for our residents.

A grant of £500 from **The Zachary Merton and George Woofindin Convalescent Trust** funded a 'LifeGlider' for our Physiotherapy team. This equipment has been instrumental in enhancing independence and quality of life for individuals with neurological conditions under our care.

The Access Group Foundation provided £4,956 for noise-cancelling headsets for our community teams, supporting effective communication and coordination of care for patients and those important to them.



The people behind our mission

A heartfelt tribute to loved ones

Our third Spring Appeal, launched in May 2023, brought an extraordinary and touching display to the historic Chatsworth Estate. Thousands of hand-crafted stainless steel butterflies were dedicated in memory of loved ones, creating a beautiful and poignant memorial.

The event was a tremendous success, with over 2,825 butterflies dedicated, raising £87,804. Generous sponsorship from Graysons Solicitors played a key role in the success of this appeal.

The Butterfly Appeal received significant media coverage, including a live broadcast from Chatsworth by ITV Calendar. This coverage helped the appeal gain widespread attention, leading us to order more butterflies to meet the high demand.

The Butterfly Appeal not only raised funds but also provided a meaningful way for supporters to remember their loved ones. Each butterfly, dedicated for a suggested £25 donation, was beautifully designed and hand-crafted by local sculptor James Sutton.

Butterflies appear when loved ones are near...



Ashgate Hospice's Butterfly Appeal

Sponsored by GRAYSONS SOLICITORS

(photos: Tom Hodgson)

Tracie's story

Tracie's daughter, Kimberley, was just 20 years old when she died in our care. By sharing her experience, she helped lead the Butterfly Appeal, encouraging others to support the hospice by making a donation in return for a butterfly.

Tracie said: "I am so proud to call Kim my daughter. She was a very positive person and always said she would beat the cancer – each and every time she did, until the brain tumour.

"Kim loved butterflies and they mean the world to us for lots of reasons. I'll never forget on the night after Kim's funeral, we saw a tatty, bedraggled, white butterfly and all started crying.

"It was the most beautiful sign that Kim was with me but I was sad. My friend changed that when she said: "If I'd come all that way in the wind and pouring rain, at that time of night, I'd look scruffy too!

"When the hospice told me they were holding a Butterfly Appeal it was just meant to be."



The people behind our mission

Shining a light on love and remembrance

Our Light Up a Life campaign is one of our most moving and touching appeals. Not only does it raise essential funds, but it also brings people together to remember their loved ones during the Christmas season, which can be particularly difficult for many.

This year, Light Up a Life saw over 570 people sign up for our lantern procession and ceremony. Unfortunately, due to snow, the event had to be cancelled. Despite this setback, we were pleased to invite over 200 supporters into our beautifully lit gardens at the hospice over the following week. They dedicated lanterns and were able to grieve for their loved ones in their own time, with the support of our compassionate staff and volunteers. The appeal raised £35,935, with generous sponsorship from Harold Lilleker and Sons Funeral Directors.

New this year was a digital interactive webpage where supporters could donate for a star in a virtual night sky. This feature allowed visitors to explore the digital sky, make dedications, and share the experience with friends and family. In total, 918 stars were dedicated throughout the campaign in memory of someone special.



Lantern event photo (top): Nick Rhodes

Lyn's story

Lyn Horan and her family from Bradwell backed our Light Up a Life campaign by dedicating a star in memory of her son, Matty Horan, who sadly died at just 43 years old.

Matty, a devoted husband to Laura and loving father to Connor and Rosie, had received the heartbreaking news shortly before Christmas 2021 that he had been diagnosed with appendiceal cancer.

He was later cared for at home and on our Inpatient Unit during his final days.

Lyn said: "We were devastated when he became unwell, but he was so strong and brave right up to the day he died.

"It was the hardest time of our lives, but we had the hospice there to support us. I don't know how we would have coped at home."



The people behind our mission

Supporting our future with legacy gifts

We are incredibly grateful to the many people who choose to leave a gift in their will to Ashgate. This vital source of income helps care for one in six of our patients. In 2023–24, we received an impressive £1,372,733 from generous gifts left by donors.

We will continue promoting legacy giving to ensure all our supporters know how they can make a lasting impact by leaving a gift in their will. In February 2024, we sent letters to our warmest supporters, highlighting the difference their legacy gifts can make. Over 50 supporters responded, letting us know they had either already included a gift in their will or wanted more information about doing so.

£1,372,733
left to Ashgate as gifts in wills



One in six of our patients is cared for thanks to gifts in wills.

We received tremendous support from local solicitors: BRM Solicitors, Graysons Solicitors, Elliot Mather, and Best Solicitors. They held free will months and weeks, waiving their will-making fees and instead asking for donations to Ashgate. This initiative not only raised immediate funds but also helped secure future legacy gifts. We look forward to continuing our work with these solicitors and welcoming new partners in the future.

We offer free online will-making services through Octopus Legacies (previously Guardian Angel). Supporters can create their wills at any time, at no cost. Since launching in January 2023, 13 people have completed their wills via the site, with nine opting to leave a gift to the hospice. These gifts are estimated to bring in over £248,000 in future legacy income.

A vital source of support

The Ashgate Lottery raised £681,802 in the year 2023–24, providing essential regular income for the hospice. With over 8,000 active players contributing to a total of 13,058 numbers at £1 per week, the lottery remains a cornerstone of our fundraising efforts.

This past year saw the lottery grow by 1,240 new numbers, generating an additional £64,480 for the hospice.

Besides the regular weekly contributions, our lottery also features two bumper draws each year, further boosting our fundraising efforts.



Looking ahead

Reflecting on the past year helps us to plan for the next. As we look to the future, our vision for Ashgate remains steadfast. We're committed to enhancing our services, expanding our reach, and continuing to provide exceptional care for our community. Here are just a few highlights of what we will be focusing on for the coming 12 months.

Improving access and coordination of care

We are committed to enhancing our Single Point of Access (SPA) system to ensure timely and consistent responses to all referrals. We will hire a Clinical Assessor and a Care Coordinator to support our SPA team, extending the SPA system across the hospice. The SPA team will coordinate care through a referral process, working closely with healthcare professionals. Available Monday to Friday, 9am–5pm, our team will provide prompt and efficient support. This expansion will streamline the referral process and improve the overall patient experience by meeting care needs quickly and effectively.

Enhancing community care with rapid response

Based on our work with virtual wards over the past year, we recognise the need for a rapid response service to support patients in their homes with symptom management and end of life care. This service will help prevent hospital admissions and support timely discharges home. Evidence shows this is a crucial need in our North Derbyshire community. We are committed to implementing this service to better support our patients and the healthcare system.

Investing in our future

We'll enhance our Old Brampton facilities by refurbishing the main reception, outpatient clinics, and Day Services. This project aims to improve patient comfort and overall experience while promoting early access to hospice care. By modernising these spaces, we seek to expand our services, including Tai Chi and complementary therapies, to enhance wellbeing and support within our community. This refurbishment will double our capacity, ensuring greater accessibility and comfort for those who need our care.

Securing tomorrow's support

We're actively planning innovative strategies to raise funds and ensure Ashgate's long-term sustainability. This includes exploring new business ideas that align with our commitment to providing compassionate care. This may include initiatives such as introducing new in-memory sculptures, expanding our network of charity shops and launching new regular giving programmes Throughout 2024, we will research and develop new fundraising methods, enhancing our current initiatives for greater effectiveness. Additionally, we are exploring opportunities to launch new products or services that can generate funds while supporting our core hospice services.

Compassionate care for everyone

Looking ahead

Building a diverse team

We are dedicated to creating a workplace where everyone feels valued and included. Over the next 12 months, we will improve our recruitment practices to attract a wider range of candidates. We will also improve workplace accessibility, ensuring our facilities are welcoming and accommodating for all. Additionally, we are committed to increasing our understanding of our existing workforce, gathering data and encouraging openness to make sure we reflect the community we want to serve. By fostering an inclusive and supportive environment, we aim to enhance the overall experience for our staff, volunteers, and those we care for.

Empowering our team through technology

To ensure our team is well-equipped to meet the demands of modern hospice care, we will focus on enhancing digital skills and literacy among our workforce. As new technologies emerge, we will provide training and resources to ensure our staff and volunteers can utilise these tools effectively. By embracing digital innovation, we aim to improve our service delivery, streamline operations, and ultimately provide better care for our patients and the people who are important to them.

Advocating for fairer funding

In the coming year, our primary focus will be on advocating for fairer funding for hospices to ensure Ashgate Hospice's sustainability for future generations. We will engage directly with local MPs, share our story with the media both locally and nationally, and increase public support by raising awareness of the crucial role we play in the community. By increasing understanding of who we are and what we do, we aim to highlight why adequately funding Ashgate, and hospices across the country, is essential. Our care is indispensable, and we cannot risk it disappearing due to underfunding.



Campaigning for fairer funding



In our ongoing efforts to ensure everyone receives the care they deserve, Ashgate Hospice, alongside fellow hospices and with the support of Hospice UK, is advocating for fairer funding from the government. Currently, only 31% of our funding comes from the contract with JUCD, with the rest reliant on the incredible generosity of people like you.

Photo: Our Director Of Care, Claire Shaw, spoke passionately on BBC Breakfast about the care the hospice provides to families.

Our care is indispensable, and we cannot risk it disappearing due to underfunding.

Trustees' report

How we're governed

Meet our Board of Trustees

Our Trustees are volunteers who bring their professional skills and life experiences to guide our strategic direction. They are not involved in the daily operations of Ashgate; instead, they delegate this responsibility to the Chief Executive and the Leadership team. Their main role is to ensure that the hospice is governed effectively and meets high standards of quality, safety, and regulatory requirements.

Trustees receive a full induction and take part in important training, just like our staff and volunteers. They also take part in shadowing days, where they shadow both clinical and non-clinical teams. This helps them understand our services better, meet staff and volunteers, and ensure we maintain high performance and quality.

For more information, please visit our website.

Scan me



How we're governed

Our Ashgate Governance Framework outlines a strong structure for governance and assurance throughout the hospice. It ensures a clear connection from the frontline staff to the Board. Three main committees report directly to the Board, with members from both Trustees and senior leaders:

- **Healthcare Quality Committee:** Focuses on clinical quality and safety, evidence-based care, and patient experience.
- **People, Engagement and Performance Committee:** Concentrates on our staff and volunteers, information governance, IT and digital development, and community engagement.
- **Finance and Strategy Committee:** Manages income generation, reserves and investments, procurement, and estate management.

This structure allows our Board meetings and development days to focus on long-term strategy, charity performance, risk management, and sustainability. The Board and committees meet every quarter to ensure we stay on track with our mission and goals.

Public benefit

Our Trustees uphold the Charity Commission's guidance on public benefit when reviewing and planning Ashgate's objectives and activities. They carefully consider how our planned activities contribute to these objectives. The Trustees are confident that this report accurately reflects our commitment to public benefit by detailing our purpose, objectives, strategic plans, services, service developments, and future plans for enhancing service delivery.

Upholding fundraising standards

Ashgate prioritises supporter care by regularly training our staff and volunteers. We are registered with the Fundraising Regulator and adhere to principles of legality, transparency, honesty, and respect in all our fundraising efforts. We actively monitor third-party fundraisers by seeking supporter feedback, providing training, and promptly addressing any concerns raised. Notably, Ashgate received no complaints in the past year.

Our comprehensive approach includes robust policies and standards to safeguard vulnerable individuals and the public from inappropriate conduct. We provide training to all involved in fundraising and maintain clear processes to oversee and manage every interaction. Throughout the year, we found no instances where staff, volunteers, professional fundraisers, or commercial partners failed to comply with our established policies and standards.



Registered with FUNDRAISING REGULATOR

Financial review

When it comes to delivering crucial palliative and end of life care, we make every penny count.

Cautious Optimism

2023/24 has been a cautiously optimistic year in terms of our funding. In March 23 we received the new five-year Joined Up Care Derbyshire (JUCD) contract, which included a £1.5 million increase demonstrating confidence in the future of Ashgate and the need for our services.

The Hospice Board approved a £0.5 million deficit budget for 23/24 reflecting both the JUCD contract together with inflationary pressures on our costs and on our donors.

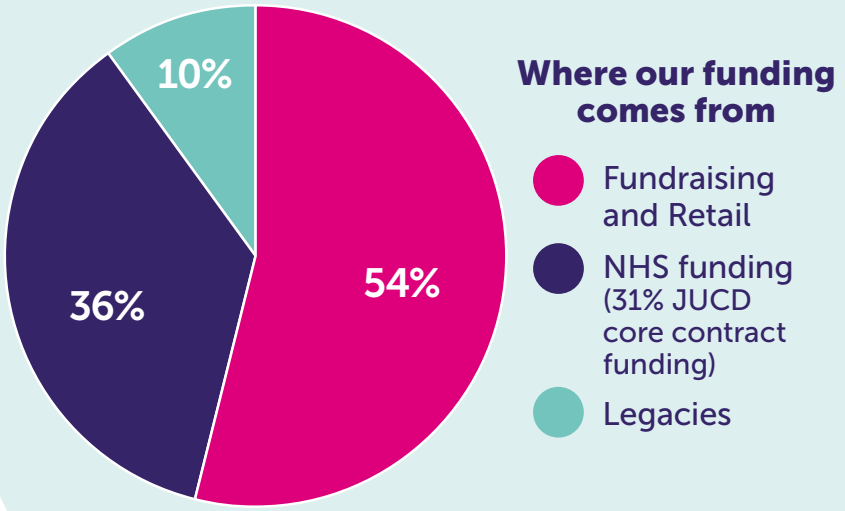
For 24/25, JUCD contract funding will cover just 31% of our costs. This, along with ongoing cost pressures, has contributed to the approved deficit budget of £0.8 million for the year.

We are conducting a strategic review of our functions in conjunction with new fundraising initiatives to mitigate rising costs and support the hospice to recover from its deficit.

23/24 in more detail

The £0.5 million deficit result matched the £0.5 million deficit budget expectation for the year.

Income was £0.5 million above expectations, but this was negated by a £0.5 million increase in costs. Donation income was £0.2 million above budget reflecting continued strong support for Ashgate. Retail income also exceeded the budget by £0.3 million, driven by generous donations, heightened brand awareness, and growing recognition of hospice shops as both value and quality retailers.



Financial review

The restricted donation for children's bereavement services in 22/23 of £0.5 million was accounted for in full in the year of receipt but continues to be used to cover the costs of providing this service in the current and future years.

The hospice continued to successfully engage in the Virtual Ward after the successful pilot in 22/23. For the full year of 23/24, new staff and costs were taken on but secured £0.6 million of funding within the year.

Costs were £0.5 million above budget, driven by inflationary pressures on salaries, consumables, and energy expenses. This increase also reflects enhanced recruitment and retention efforts after a challenging staffing period.

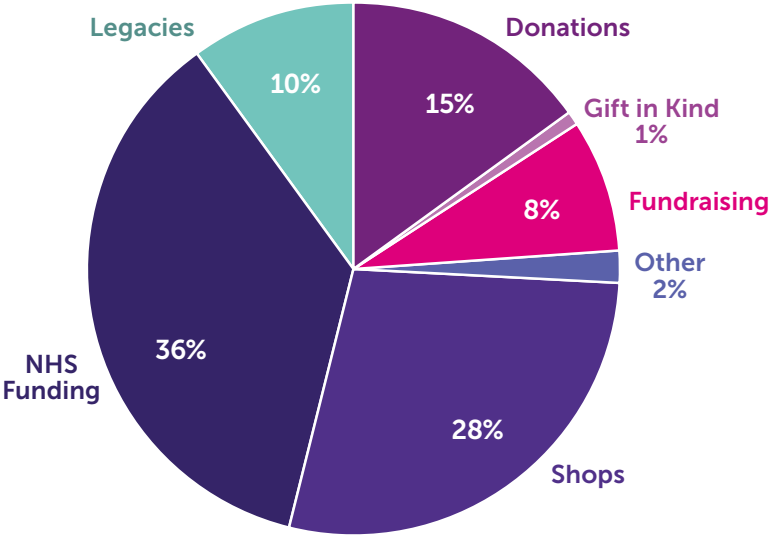
Here for the future

Costs continue to rise beyond our income levels. Our NHS support accounts for only 36% (of which 31% is JUCD core contract funding) of our funding, and our dedicated supporters are experiencing the same cost of living challenges that we face at the hospice. This makes it more challenging to provide the same or improved quantity and quality of care that we aspire to.

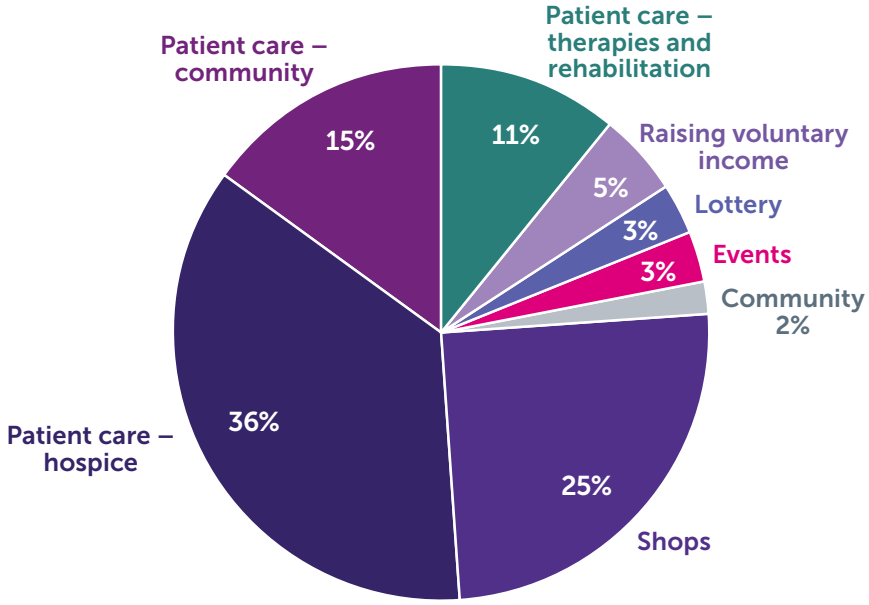
We will continue to monitor our costs and seek efficiencies within our purchasing system. We will assess our suppliers and explore how we can benefit from more gifts in kind opportunities.

We will keep expanding our fundraising and retail income while exploring new business initiatives to diversify and increase our revenue.

We are establishing an effective environmental strategy. We will track our carbon footprint by assessing our carbon emissions, energy consumption, and water usage, while also working to minimize our waste.



How we raised our money



How we spent our money

Reference and Administrative Information

Charity Name: Ashgate Hospicecare
Charity Registration Number: 700636

Company Registration Number: 02263980

Registered Office and Operational address:
Ashgate Road, Old Brampton, Chesterfield, S42 7JD

This Trustees' Report also meets the requirements of a Directors' Report for Companies Act purposes.

Directors and Trustees

Penny Brooks, Chair (resigned 31/01/2024)
Malcolm Pope, Chair from 31/01/2024 (resigned 22/10/2024)
Christopher Hallam, Chair (appointed 21/05/2024)
Lynn Andrews (resigned 29/10/2024)
Mark Bailey (appointed 21/05/2024)
Steven Brennan-Collis (appointed 14/12/2023)
Ruth Cooper
Kirsty McMillan
Nigel Myhill
Claire Pilsworth (resigned 08/05/2024)
Tim Robinson
Dermot Toberty (resigned 22/01/2024)
Victoria Webb
Kirstie Wilson

Auditors

Azets Audit Services Limited,
Triune Court,
Monks Cross Drive,
York, YO32 9GZ

Leadership Team

Claire Blakey
Matt Corbishley
Heidi Golden
Bob Hawley
Rebekah Neelin
Jamie Mayers
Claire Shaw
Laura Stevens
Barbara-Anne Walker
Jack Wood

Company Secretary

Heidi Golden

Bankers

Barclays, 1 St. Paul's Place,
121 Norfolk Street,
Sheffield, S1 2JW

Governing Document

Ashgate Hospicecare is a charitable company limited by guarantee, incorporated on 2 June 1988 and registered as a charity in England and Wales on 14 September 1988.

The charity's objects are specifically restricted to the relief of sickness and the preservation of health among people residing permanently, or temporarily, in North Derbyshire.

The company was established under a Memorandum of Association and is governed under its Articles of Association which were revised and amended in 2016, to ensure that appropriate consideration was given to tenures and succession planning for the Chair and Trustees.

Related Parties

Ashgate Hospicecare Shops Limited is a subsidiary of Ashgate Hospicecare. During 2023/24, it operated seventeen shops and two coffee shops, the profits of which are spent wholly supporting the work of Ashgate Hospicecare.

Ashgate Hospicecare is a partner and shareholder in Hospice Quality Partnership (HQP). HQP was set up to support independent hospices with procurement, benchmarking and collaboration regarding the improvement of value and reduction of cost, as well as the potential to generate new income through dividends in the future. The hospice sees significant benefits in being a Partner/Shareholder with HQP and is supportive of the company's aims.

Financial Review

The consolidated net deficit before investment movements and tax for 23/24 is £582k compared to a net surplus of £1,639k in 22/23.

Overall income has remained relatively stable at £14,401k, compared to £14,438k in 22/23, although there are notable variations within that total.

Last year (22/23) experienced a significant increase in legacy income of £2,125k compared to 21/22. This rise was partly due to higher legacy receipts in 22/23, but primarily stemmed from legacy SORP accounting, which mandates the adjustment of post-year-end legacies where entitlement and a high likelihood were present at year-end. Lower levels of legacy receipts combined with application of the same SORP treatment for 23/24 legacy income has resulted in a £1,316k decrease compared to 22/23.

Donations fell by £359k, however 22/23 income was elevated by a one-off donation of £472k within restricted donations to fund bereavement services for children. This will cover the incremental costs of such services for many years ahead but had to be recognised in full in the year of receipt.

Retail income rose by £404k on the back of strong donations, strong brand awareness and increased recognition of Hospice shops as both a value and quality retailer.

Events income increased by £193k, driven by ongoing strong local support for regular events like the Sparkle Walk, as well as new initiatives such as the Superhero Walk.

Income from charitable activities increased by £906k, largely due to the new five year contracted revenue from Joined Up Care Derbyshire agreed in 2023 and increased support in relation to the full year funding of the Virtual Wards.

Investment income rose by £144k as a result of a new strategy for short-term treasury management.

Cost increases of 17% (£2,184k) are due to inflationary pressures on salaries, consumables, and energy costs. This increase in cost base also reflects improved recruitment and retention following a difficult period for staffing.

Total funds have decreased by £525k because of the deficit, partially mitigated by a £58k increase in investment valuations.

Investment Policy

The hospice has a portfolio of long-term investments, deposit accounts and an interest-bearing current account, to ensure appropriate liquidity of funds. Investments were £1,024k at 31 March 2024, up 6% from 31 March 2023. With regard to the ethical investment element of the Policy, the Trustees do not wish to adopt an exclusionary policy when considering prospective investments, or potential donation receipts. However, individual investment proposals, and donations, may be rejected if they are perceived to be in conflict with the purpose of the Charity.

Reserves Policy

Reserves are held to give the hospice a financial buffer against shocks to income and expenditure. They are necessary for protecting services in the event of a short-term disruption to normal income streams and they ensure the hospice has funds available to cater for capital works.

The Hospice implemented a risk-based reserves policy in 19/20. This has supported subsequent years' strategic decision making and has been subject to regular review in the Finance and Strategy Committee.

Whilst total funds have decreased by 5% (£525k) from £10,921k to £10,396k, in line with the deficit for the year, free reserves have increased by 6% (£199k) from £3,218k to £3,417k mainly due to an increase of £137k in the offset for restricted funds and designation of £150k for the refurbishment of the Day Hospice compared to £501k against the budgeted deficit in the prior year.

The risk-based target for free reserves on 31st March 2024 was £2,110k (22/23 – £2,144k) meaning that the hospice was at 162% of target (22/23 – 150%). Whilst there is an expected increase in expenditure in 24/25, the free reserves target has maintained parity due to the certainty of the increased funding from JUCD. Free reserves are net of restricted funds and designated funds. The purpose of such funds is narrated further in Note 23 of the accounts.

Financial Review continued

Senior Management Remuneration

Pay awards for the workforce are recommended to the Board by the Chief Executive with supporting evidence and rationale from the Leadership Team. No recommendations are made by the Chief Executive or Leadership Team for setting their own pay or remuneration, other than where an explicit recommendation or offer is made by them to forfeit any award. Instead, the Board of Trustees takes responsibility for making any such decisions for key senior management personnel based on organisational performance, affordability and taking account of sector benchmarks. The HR team undertakes regular pay benchmarking exercises for the workforce in general, using the independent benchmarking tool, Brightmine. This includes review of salaries for the Chief Executive and Leadership Team.

Principal Risks and Uncertainties

The Board of Trustees has established processes to assess business and corporate risk. This involves identifying the types of risk the charity faces, prioritising them in terms of potential impact and the likelihood of occurrence, and identifying means of mitigating the risks. This assessment is monitored and updated on a regular basis.

The corporate risk register and the operational risk registers are monitored by the Risk Review Group which meets quarterly to ensure effective operational management of risk. Operational risk registers are, in turn, reported to the three Board Committees to ensure effective oversight and escalation. The corporate risk register is reported to the Board to ensure that Trustees are fully appraised of any strategic risks and the actions being taken to mitigate them.

A wide range of policies and procedures have been introduced to minimise risk and ensure compliance with legislation and CQC standards. Specific policies relating to risk include management guidelines, standing financial instructions, health and safety, information governance, clinical issues and employment.

Going Concern and Cashflow

The Trustees have considered the impact of the global economic situation, UK inflation, international tensions and the legacy of COVID-19 on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board is confident that it has in place plans to deal with any financial losses that may arise. The Board has prepared forecasts of income and expenditure and cash flow for the period to 31 March 2026 and subjected these forecasts to sensitivity analysis which shows that it has sufficient reserves to be able to continue for the foreseeable future. It will continue to monitor the impact on income and take appropriate action as necessary.

The Board does however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board has concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continues to adopt the going concern basis of preparation for these financial statements.

Statement of Trustees' Responsibilities

The trustees (who are also directors of Ashgate Hospicecare for the purposes of company law) are responsible for preparing the Trustees' Annual 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 trustees 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 trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2019 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees 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.

In so far as the trustees are aware:

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

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Auditors

The auditor, Azets Audit Services Limited, is deemed to be reappointed under section 487(2) of the Companies Act 2006.

By Order of the Board



19/11/2024

Chris Hallam
Chair of Trustees
Chesterfield

Independent Auditor's Report to the Members of Ashgate Hospicecare

Opinion

We have audited the financial statements of Ashgate Hospicecare (the "parent charity") and its subsidiary (the "group") for the year ended 31 March 2024, which comprise the Consolidated Statement of Financial Activities, the Group and Charity Balance Sheets, the Consolidated Statement of Cash Flows and the related Notes to the Financial Statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

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

Basis for opinion

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

Conclusions relating to going concern

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the group and parent charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

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

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

We have nothing to report in this regard.

Independent Auditor's Report to the Members of Ashgate Hospicecare continued

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report (incorporating the strategic report and the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report (incorporating the strategic report and the directors' report) has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and parent charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

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

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the Trustees 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 they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Our responsibilities for the audit of the financial statements

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

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

Extent to which the audit was considered capable of identifying irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above and on the Financial Reporting Council's website, to detect material misstatements in respect of irregularities, including fraud.

We obtain and update our understanding of the entity, its activities, its control environment, and likely future developments, including in relation to the legal and regulatory framework applicable and how the entity is complying with that framework. Based on this understanding, we identify and assess the risks of material misstatement of the financial statements,

Independent Auditor's Report to the Members of Ashgate Hospicecare continued

whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. This includes consideration of the risk of acts by the entity that were contrary to applicable laws and regulations, including fraud.

In response to the risk of irregularities and non-compliance with laws and regulations, including fraud, we designed procedures which included:

Enquiry of management and those charged with governance around actual and potential litigation and claims as well as actual, suspected and alleged fraud;

- Reviewing minutes of meetings of those charged with governance;
- Assessing the extent of compliance with the laws and regulations considered to have a direct material effect on the financial statements or the operations of the group through enquiry and inspection;
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations;
- Performing audit work over the risk of management bias and override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for indicators of potential bias;
- Performing audit work over the timing and recognition of income and in particular whether it has been recorded in the correct accounting period.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Use of our report

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

Alan Sidebottom

19/11/2024

Alan Sidebottom (Senior Statutory Auditor)
For and on behalf of Azets Audit Services Limited
Chartered Accountants
Statutory Auditor

.....
Triune Court
Monks Cross Drive
York
YO32 9GZ

Consolidated Statement of Financial Activities

Incorporating a Consolidated Income and Expenditure Account

For the year ended 31 March 2024

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. A fully detailed Consolidated Statement of Financial Activities for the year ended 31 March 2023 is shown in note 28. The Statement of Financial Activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

		Unrestricted Funds	Designated Funds	Restricted Funds	**2024 Total**	2023 Total
Income:		£	£	£	**£**	£
Donation and legacies						
Donations	(2)	2,170,804	-	82,175	**2,252,979**	2,611,854
Legacies	(3)	1,116,816	-	255,917	**1,372,733**	2,688,561
		3,287,620	-	338,092	**3,625,712**	5,300,415
Income from other trading activities:						
Shops	(4)	4,036,281	-	-	**4,036,281**	3,632,167
Fundraising	(5)	1,211,967	-	-	**1,211,967**	1,047,672
Other	(6)	185,749	-	-	**185,749**	166,844
		5,433,997	-	-	**5,433,997**	4,846,683
Investment income	(7)	143,111	-	14,557	**157,668**	13,237
Income from charitable activities	(8)	5,183,423	-	-	**5,183,423**	4,277,317
Total income		14,048,151	-	352,649	**14,400,800**	14,437,652
Expenditure:						
Costs of raising voluntary income	(9)	799,666	-	-	**799,666**	661,298
Fundraising and other trading costs	(9)	4,959,712	-	-	**4,959,712**	4,160,117
Costs of charitable activities	(9)	9,199,761	-	24,140	**9,223,901**	7,977,731
Total expenditure		14,959,139	-	24,140	**14,983,279**	12,799,146
Net movement in funds before investment gains		(910,988)	-	328,509	**(582,479)**	1,638,506
Unrealised gains / (losses) on investments	(14b)	57,975	-	-	**57,975**	(61,019)
Corporation tax	(22)	(428)	-	-	**(428)**	(28,000)
Net (expenditure) / income		(853,441)	-	328,509	**(524,932)**	1,549,487
Funds transfer	(23)	191,446	-	(191,446)	**-**	-
Designated funds transfer		351,000	(351,000)	-	**-**	-
Net movement in funds		(310,995)	(351,000)	137,063	**(524,932)**	1,549,487
Reconciliation of funds						
Total funds brought forward		9,670,127	601,000	649,677	**10,920,804**	9,371,317
Total funds carried forward	(23)	9,359,132	250,000	786,740	**10,395,872**	10,920,804

Balance sheets

At 31 March 2024

		2024 Group	2023 Group	2024 Charity	2023 Charity
Fixed assets		£	£	£	£
Tangible assets	(13)	**4,929,075**	4,945,247	**4,737,244**	4,812,554
Investments	(14 a&b)	**1,023,736**	965,761	**1,023,740**	965,765
		5,952,811	5,911,008	**5,760,984**	5,778,319
Current assets					
Stock of finished goods		**83,905**	79,627	**33,527**	39,631
Debtors	(15)	**1,872,080**	2,292,033	**2,909,338**	3,049,497
Cash at bank and in hand		**3,817,333**	3,974,513	**2,693,813**	3,090,366
		5,773,318	6,346,173	**5,636,678**	6,179,494
Creditors: Amounts falling due within one year	(16)	**(975,257)**	(981,377)	**(746,337)**	(683,246)
Net current assets		**4,798,061**	5,364,796	**4,890,341**	5,496,248
Total assets less current liabilities		**10,750,872**	11,275,804	**10,651,325**	11,274,567
Creditors: Amounts falling due after more than a year	(17)	**(355,000)**	(355,000)	**(355,000)**	(355,000)
Net assets		**10,395,872**	10,920,804	**10,296,325**	10,919,567
Unrestricted charity funds					
Unrestricted general funds		**9,359,132**	9,670,127	**9,259,586**	9,668,890
Unrestricted designated funds		**250,000**	601,000	**250,000**	601,000
Restricted funds		**786,740**	649,677	**786,739**	649,677
Total funds	(23 & 24)	**10,395,872**	10,920,804	**10,296,325**	10,919,567

The financial statements were approved by the Board of Directors and are signed on its behalf by:-

19/11/2024

Chris Hallam, Chair of Trustees

Company Registration No. 02263980

The notes on pages 62 to 79 form part of these financial statements.

Statement of Cash Flows

For the year ended 31 March 2024

		2024 £	2023 £
Cash generated by operating activities	(26)	**84,812**	2,025,254
		84,812	2,025,254
Cash flows from investing activities			
Interest received		**157,668**	13,237
Purchase of tangible fixed assets		**(399,660)**	(466,242)
Cash used in investing activities		**(241,992)**	(453,005)
Cash flows from financing activities			
Repayment of finance leases		**-**	(6,597)
Cash used in financing activities		**-**	(6,597)
(Decrease) / Increase in cash and cash equivalents in the year		**(157,180)**	1,565,652
Cash and cash equivalents at the beginning of the year		**3,974,513**	2,408,861
Cash and cash equivalents at the end of the year		**3,817,333**	3,974,513

Notes to the financial statements

For the year ended 31 March 2024

1. Accounting policies

a. Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Accounting Practice.

Ashgate Hospicecare 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.

The financial statements are presented in sterling which is the functional currency of the charity and group and rounded to the nearest £1.

b. Company status

The charity is a company limited by guarantee and has no share capital. The charity is registered in England and Wales, with company number 02263980 and charity number 700636. The members of the charity are the Trustees named on page 53. 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.

c. Basis of consolidation

The consolidated financial statements include the results of Ashgate Hospicecare and its wholly owned subsidiary Ashgate Hospicecare Shops Limited on a line by line basis.

A separate Statement of Financial Activities for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

The deficit for the year for the charity was £623,241 (2023 surplus £1,167,803).

d. Going concern

The Trustees have considered the impact of the global economic situation, UK inflation, international tensions and the legacy of COVID-19 on the group and charity's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2026 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the group and charity remain a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

e. Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees 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 Trustees 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.

f. Critical accounting estimates and areas of judgment

In the application of the group's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors considered to be relevant.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities are outlined below:

Depreciation of tangible assets

Depreciation policies have been set according to management's experience of the useful lives of the assets in each category, something which is reviewed annually.

The charity incurs expenditure on creating tangible fixed assets for use in the charity with costs being incurred over a number of months. The Trustees believe it is possible to segregate these costs into identifiable projects, and as such no depreciation is charged on that project until it is brought into use.

Legacies

Legacies are recognised as income when probate has been granted, the charity has established its entitlement to the funds and where sufficient information is available to allow it to measure its entitlement with reasonable accuracy.

g. Income

All income is recognised when the charity and group have entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Donated services are recognised when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and the economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised. Please refer to the Trustees' report for more information about their contribution.

Donations and gifts towards the running cost of the hospice are treated as income when received. Gifts in kind and donated goods are valued where the item is specifically identified and some reliable form of valuation is available. Goods donated for sale are not accounted for until the point of sale. On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Government and other grants are included in the SOFA in the year in which they are receivable and allocated to the necessary funds accordingly, and would be deferred if relating to services in a future period.

Lottery income is accounted for in respect of those draws that have taken place in the year. Income received from draws after the balance sheet date is deferred to the relevant accounting period.

Trading income is recognised at point of sale for both donated and purchased goods.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

h. Expenditure

Expenditure is recognised on an accruals basis inclusive of any irrecoverable VAT. Costs of generating funds comprise the costs associated with attracting voluntary income. Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them, which have been apportioned based on headcount and activity.

Allocation of support costs

Support costs are those functions that assist the work of the charity and group but do not directly undertake charitable activities. Support costs include executive costs, HR and IT costs, other support functions, depreciation and governance costs which support the services providing care to patients and families. These costs have been allocated between the costs of raising funds and expenditure on charitable activities on the basis set out in notes 9 and 10.

i. Tangible fixed assets and depreciation

All assets costing more than £1,000 are capitalised, except for computer equipment where all items with a value of £100 or more are capitalised.

All fixed assets are included at cost, net of depreciation and any provision for impairment. Depreciation is calculated to write down the cost of fixed assets by equal annual instalments over the following periods:-

Freehold buildings	2% straight line per annum
Fixtures and fittings	25% straight line per annum
Motor vehicles	25% straight line per annum
Buildings extension	2% straight line per annum
IT hardware	33% straight line per annum
Plant	10% straight line per annum

Freehold land is not depreciated

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

j. Fixed asset investments

Investments are a form of basic financial instruments and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing market price, except for shares in the trading subsidiary which are carried at cost. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

All gains and losses are taken to the Statement of Financial Activities as they arise.

k. Stock

Stocks of retail goods are included at the lower of cost and net realisable value. Donated items of stock for resale or distribution are not included in the financial statements until they are sold or distributed because the Trustees consider it impracticable to be able to assess the amount of donated stocks as there are no systems in place which record these items until they are sold and undertaking a stock take would incur undue cost for the charity which would far outweigh the benefits. Additionally, due to the agent arrangements present for the purposes of retail gift-aid, some donated items of stock held at the year end are not technically an asset of the charity and therefore no value can be assigned to them.

l. 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.

m. 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.

n. Creditors and provisions

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

o. Leases

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred.

Leases are classified as finance leases whenever the terms of the lease transfer substantially all the risks and rewards of ownership to the lessees. All other leases are classified as operating leases.

Assets held under finance leases are recognised as assets at the lower of the assets fair value at the date of inception and the present value of the minimum lease payments. The related liability is included in the balance sheet as a finance lease obligation. Lease payments are treated as consisting of capital and interest elements. The interest is charged to the statement of financial activities so as to produce a constant periodic rate of interest on the remaining balance of the liability.

p. Pensions

The pension costs charged in the financial statements represent the contributions payable by the charity during the year in accordance with FRS 102. Employees who joined the hospice before February 2020 and who were already active members of the NHS Pension Scheme are permitted to continue contributing to the Scheme. Rates are set by the NHS Pensions Agency. The scheme is a multi-employer scheme not designed to identify the assets and liabilities attributable to the Charity, so in accordance with FRS102 the scheme is accounted for as a defined contribution scheme.

q. Employee benefits

The costs of short-term employee benefits are recognised as a liability and an expense, unless those costs are required to be recognised as part of the cost of stock or fixed assets.

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the group is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

r. Taxation

The Hospice is a registered charity and as such is a charity within the meaning of schedule 6 of the Finance Act 2010. Accordingly, the Hospice is potentially entitled to tax exemption under part 11 of the Corporation Tax Act 2010 or section 256 of the Taxation of Chargeable Gains Act 1992 in respect of income and gains arising. Given this, no tax charge arises on the charity.

The trading subsidiary is liable to corporation tax on its chargeable profits. Current tax, including UK Corporation and foreign tax, is provided at amounts expected to be paid (or recovered) using the tax rates and laws that have been enacted or substantially enacted at the balance sheet date.

2. Donations

	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
General donations	**799,865**	**46,080**	**845,945**	773,880	5,064	778,944
In memory	**299,630**	**7,316**	**306,946**	305,570	1,100	306,670
Gift aid income from individuals	**190,294**	**885**	**191,179**	138,708	-	138,708
Community	**494,702**	**11,114**	**505,816**	476,970	9,309	486,279
Gifts in kind (see below)	**189,713**	**-**	**189,713**	131,791	29,038	160,829
Trusts and grants	**196,600**	**16,780**	**213,380**	69,215	671,209	740,424
	2,170,804	**82,175**	**2,252,979**	1,896,134	715,720	2,611,854

Gifts in kind	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
Donated food and drink	**9,634**	**-**	**9,634**	13,333	-	13,333
Capital items	**34,840**	**-**	**34,840**	-	29,038	29,038
Other items	**145,239**	**-**	**145,239**	118,458	-	118,458
	189,713	**-**	**189,713**	131,791	29,038	160,829

3. Legacies

	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
General donations	**1,116,816**	**255,917**	**1,372,733**	2,688,561	-	2,688,561

4. Shops

	2024 Unrestricted £	2023 Unrestricted £
Trading activities	**2,972,304**	2,830,972
Donation of sale proceeds for goods sold as agent	**849,466**	637,243
Gift aid on donations of sale proceeds to charity	**214,511**	160,919
COVID-19 Retail Grant	**-**	3,033
	4,036,281	3,632,167

5. Fundraising

	2024 Unrestricted £	2023 Unrestricted £
Lottery	**681,802**	710,425
Events	**530,165**	337,247
Total	**1,211,967**	1,047,672

6. Other income

	2024 Unrestricted £	2023 Unrestricted £
Training and education	**12,124**	4,188
Catering and vending machine	**63,213**	42,012
Other	**110,412**	120,644
Total	**185,749**	166,844

7. Investment income

	Unrestricted £	Restricted £	2024 Total £	Unrestricted £	Restricted £	2023 Total £
Gross interest receivable	**143,111**	**14,557**	**157,668**	13,237	-	13,237

8. Income from charitable activities

	2024 Unrestricted £	2023 Unrestricted £
NHS Derby and Derbyshire Integrated Care Board	**5,085,665**	4,192,831
University of Sheffield – Student training	**63,640**	54,180
Chesterfield Royal Hospital – Medical secretarial support	**16,590**	16,591
Other	**17,528**	13,715
Total	**5,183,423**	4,277,317

9.(a) Analysis of group expenditure current year

	Direct staff costs	Other direct costs	Support costs	Total costs
	£	£	£	£
Donations	418,474	252,900	59,163	**730,537**
Legacies	23,890	17,951	27,288	**69,129**
Costs of raising voluntary income	442,364	270,851	86,451	**799,666**
Lottery	77,866	325,837	57,079	**460,782**
Events	183,946	238,711	70,083	**492,740**
Community	168,019	51,947	47,804	**267,770**
Shops	2,122,592	1,250,373	365,455	**3,738,420**
Fundraising and other trading costs	2,552,423	1,866,868	540,421	**4,959,712**
Patient care – hospice	3,087,320	534,460	1,742,985	**5,364,765**
Patient care – community	1,789,807	65,224	344,247	**2,199,278**
Therapies and rehabilitation	1,359,525	82,673	217,660	**1,659,858**
Cost of charitable activities	6,236,652	682,357	2,304,892	**9,223,901**
Total	9,231,439	2,820,076	2,931,764	**14,983,279**

9.(b) Analysis of group expenditure prior year

	Direct staff costs	Other direct costs	Support costs	Total costs
	£	£	£	£
Donations	377,092	180,951	49,863	**607,906**
Legacies	21,559	8,929	22,904	**53,392**
Costs of raising voluntary income	398,651	189,880	72,767	**661,298**
Lottery	69,894	225,700	47,968	**343,562**
Events	164,895	146,272	58,877	**370,044**
Community	150,521	46,353	40,332	**237,206**
Shops	1,741,023	1,165,335	302,947	**3,209,305**
Fundraising and other trading costs	2,126,333	1,583,660	450,124	**4,160,117**
Patient care – hospice	2,876,133	498,650	1,515,736	**4,890,519**
Patient care – community	1,261,011	49,718	265,684	**1,576,413**
Therapies and rehabilitation	1,247,668	79,163	183,968	**1,510,799**
Cost of charitable activities	5,384,812	627,531	1,965,388	**7,977,731**
Total	7,909,796	2,401,071	2,488,279	**12,799,146**

Notes to the financial statements

For the year ended 31 March 2024

All costs for raising voluntary income and for fundraising and other trading costs, in both years, related to unrestricted funds.

Charitable expenditure includes £24,140 (22/23–£29,977) of restricted expenditure.

Patient care within the hospice includes the activities of the Inpatient Unit, Outpatient and Day Services teams.

Patient care within the community includes the activities of the Palliative Care Nurse Specialists, Palliative Care Community Nurses, Support Workers and End of Life Care Facilitators.

Therapy and rehabilitation includes the activities of teams within Supportive Care Services, Lymphoedema, Occupational Therapy and Physiotherapy.

The patient facing functions above are all directly supported by a Clinical Administration Team, Quality Improvement Team, Catering, Housekeeping and other Estates functions. The costs of these functions are included within the direct costs above.

All patient facing functions, direct support teams and fundraising functions are then supported by the wider management structure of the organisation including HR, Learning and Development, Executive Team, Finance, Procurement, IT and Governance. The costs of these functions and costs of depreciation are all included in Support Costs.

Support costs include £159,153 (22/23–£165,365) of governance costs incurred in connection with the compliance with constitutional and statutory requirements of the charity.

10.(a) Analysis of support costs current year

	Executive costs	HR and IT costs	Other support function costs	Depreciation	Total costs
	£	£	£	£	£
Donations	14,124	24,853	17,128	3,058	**59,163**
Legacies	6,746	11,869	8,180	493	**27,288**
Costs of raising voluntary income	20,870	36,722	25,308	3,551	**86,451**
Lottery	13,966	24,574	16,936	1,603	**57,079**
Events	17,197	30,258	20,853	1,775	**70,083**
Community	11,306	19,894	13,710	2,894	**47,804**
Shops	76,007	133,739	92,166	63,543	**365,455**
Fundraising and other trading costs	118,476	208,465	143,665	69,815	**540,421**
Patient care – hospice	361,032	635,259	437,790	308,904	**1,742,985**
Patient care – community	82,340	144,884	99,847	17,176	**344,247**
Therapies and rehabilitation	50,671	89,159	61,444	16,386	**217,660**
Cost of charitable activities	494,043	869,302	599,081	342,466	**2,304,892**
Total	633,389	1,114,489	768,054	415,832	**2,931,764**

10.(b) Analysis of support costs prior year

	Executive costs	HR and IT costs	Other support function costs	Depreciation	Total costs
	£	£	£	£	£
Donations	10,972	21,360	14,657	2,874	**49,863**
Legacies	5,240	10,201	7,000	463	**22,904**
Costs of raising voluntary income	16,212	31,561	21,657	3,337	**72,767**
Lottery	10,849	21,121	14,492	1,506	**47,968**
Events	13,359	26,006	17,843	1,669	**58,877**
Community	8,783	17,098	11,731	2,720	**40,332**
Shops	59,043	114,942	78,868	50,094	**302,947**
Fundraising and other trading costs	92,034	179,167	122,934	55,989	**450,124**
Patient care – hospice	285,376	555,554	381,194	293,612	**1,515,736**
Patient care – community	59,043	114,942	78,868	12,831	**265,684**
Therapies and rehabilitation	39,362	76,628	52,579	15,399	**183,968**
Cost of charitable activities	383,781	747,124	512,641	321,842	**1,965,388**
Total	492,027	957,852	657,232	381,168	**2,488,279**

11. Net movement in funds is stated after charging:

	2024 Group £	2023 Group £
Auditors' remuneration – audit	**18,250**	17,685
Auditors' remuneration – tax	**945**	915
Auditors' remuneration – other	**5,160**	16,250
Depreciation – owned assets	**415,832**	371,231
Depreciation – assets held on hire purchase	**-**	9,937
Payments made under operating leases	**364,771**	330,722

12. Wages and staff costs

	2024 Group £	2023 Group £
Gross salaries	**9,457,600**	7,957,144
Social security costs	**838,027**	727,678
Pension costs	**596,681**	505,094
Total	**10,892,308**	9,189,916

Pension contributions relating to the staff earning over £60,000 totalled £44,452 (2023: £20,155).

The total amount of employee benefits received by key management personnel is £476,812 (2023: £421,663). The charity considers these to be the staff who comprise the senior management team on the hospice payroll: Chief Executive Officer, Deputy Chief Executive, Director of Quality, Director of Finance and Estates, Director of People and Culture, Director of Care Services, Director of Income Generation and Deputy Director of Income Generation.

Included within gross salaries are redundancy payments totalling £nil (2023: £1,624).

Average number of employees and full time equivalents for the group and analysis of employees in the year were:

	2024 No.	2024 FTE	2023 No.	2023 FTE
Clinical	**174**	**132**	159	113
Retail	**126**	**78**	105	65
Finance and IT	**8**	**7**	8	8
HR and Executive	**25**	**20**	22	19
Estate	**28**	**21**	26	18
Fundraising/Marketing	**36**	**31**	34	29
Total	**397**	**289**	354	252

Employees earning over £60,000 are summarised below (excluding pension costs):

	2024 No.	2023 No.
£60,001 – £70,000	**2**	2
£70,001 – £80,000	**2**	1
£80,001 – £90,000	**2**	1

13. Tangible fixed assets

The group	Freehold Land and Buildings Original	Extension and Development	Fixtures and Fittings	Plant and IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2023	355,000	4,903,727	1,152,312	1,456,639	203,217	8,070,895
Additions	-	-	170,419	151,061	78,180	399,660
Disposals	-	-	-	-	(50,643)	(50,643)
At 31 March 2024	**355,000**	**4,903,727**	**1,322,731**	**1,607,700**	**230,754**	**8,419,912**
Depreciation						
At 1 April 2023	163,300	1,158,958	946,497	687,025	169,868	3,125,648
Charge for the year	7,100	98,075	99,915	193,070	17,672	415,832
Disposals	-	-	-	-	(50,643)	(50,643)
At 31 March 2024	**170,400**	**1,257,033**	**1,046,412**	**880,095**	**136,897**	**3,490,837**
Net Book Value						
At 1 April 2023	191,700	3,744,769	205,815	769,614	33,349	4,945,247
At 31 March 2024	**184,600**	**3,646,694**	**276,319**	**727,605**	**93,857**	**4,929,075**

The charity	Freehold Land and Buildings Original	Extension and Development	Fixtures and Fittings	Plant and IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2023	355,000	4,903,727	568,312	1,394,182	80,350	7,301,571
Additions	-	-	143,208	133,771	-	276,979
Disposals	-	-	-	-	-	-
At 31 March 2024	**355,000**	**4,903,727**	**711,520**	**1,527,953**	**80,350**	**7,578,550**
Depreciation						
At 1 April 2023	163,300	1,158,958	446,307	640,102	80,350	2,489,017
Charge for the year	7,100	98,075	64,199	182,915	-	352,289
Disposals	-	-	-	-	-	-
At 31 March 2024	**170,400**	**1,257,033**	**510,506**	**823,017**	**80,350**	**2,841,306**
Net Book Value						
At 1 April 2023	191,700	3,744,769	122,005	754,080	-	4,812,554
At 31 March 2024	**184,600**	**3,646,694**	**201,014**	**704,936**	**-**	**4,737,244**

14. (a) Investments – charity

Shares in group undertakings and participating interests:	£
Cost at 1 April 2023 and 31 March 2024	4
Net book value at 1 April 2023 and 31 March 2024	4

Holding of more than 20%

The charity holds more than 20% of the share capital of the following company:

Company	Company number	County of registration or incorporation	Shares held class %
Ashgate Hospicecare Shops Limited	02577401	England & Wales	Ordinary 100%

The aggregate amount of capital and reserves and the results of the subsidiary for the financial year are as follows:

	Principal Activity	Capital and reserves £	Profit for the year £
Ashgate Hospicecare Shops Limited	Charity shop	£99,550	£98,308

14. (b) Fixed asset investments

	Group and Charity	
	2024	2023
Listed investments	**£**	£
Fair value at 1 April 2023	**965,761**	1,026,780
Investment gains / (losses)	**57,975**	(61,019)
Fair value at 31 March 2024	**1,023,736**	965,761

The historical cost of the investment is £900,000 (2023: £900,000).

15. Debtors

	Group		Charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Trade debtors	**143,233**	101,390	**129,337**	96,553
Other debtors	**66,424**	53,053	**21,022**	14,712
Value added tax	**56,709**	61,068	**45,041**	46,659
Prepayments and accrued income	**1,605,714**	2,076,522	**1,494,610**	1,978,571
Amounts owed by group undertakings	**-**	-	**1,219,328**	913,002
	1,872,080	2,292,033	**2,909,338**	3,049,497

The Charity's intercompany debtor balance includes an intercompany loan of £543,093 (2023: £543,093) which is due after more than one year. The loan has been provided on a five year term, is repayable by 8 December 2026 and has an interest rate of 5% per annum.

16. Creditors

	Group		Charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Amounts falling due within one year				
Trade creditors	**263,301**	280,169	**206,528**	163,166
Tax and social security	**306,991**	276,287	**275,718**	221,349
Accruals and deferred income	**404,965**	424,921	**264,091**	298,731
	975,257	981,377	**746,337**	683,246

Deferred income includes lottery money received in advance for future draws. At 31 March 2024 this totalled £103,010 (2023: £95,818).

17. Creditors: amounts falling due after more than one year

	Group		Charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Other creditors	**355,000**	355,000	**355,000**	355,000

18. Operating lease commitments

At 31 March 2024 the charity had future minimum lease payments under non cancellable operating leases as follows:

	Group		Charity	
	2024	2023	**2024**	2023
	£	£	**£**	£
Within one year	**313,066**	307,550	**15,230**	8,319
Within two to five years	**281,902**	479,432	**7,690**	1,067
In more than five years	**-**	-	**-**	-
	594,968	786,982	**22,920**	9,386

Notes to the financial statements

For the year ended 31 March 2024

19. Pension costs

The pension costs relate to the amounts contributed by the Group and paid over to the Health Service pension scheme or to eligible employees' pension schemes. The pension costs amounted to £596,681 (2023: £505,094). The amount owed to the pension providers at the year-end was £85,763 (2023: £69,868). All schemes are treated as defined contribution and payments are charged to the SOFA in the year they are payable.

20. Capital commitments

There were no capital commitments at 31 March 2024 (2023:£nil).

21. Related party transactions and trustee remuneration

No Trustee received or waived any remuneration during either year. During the year the charity paid expenses of £368 (2023: £nil) to one trustee (2023: none).

The only other related party transactions were between the parent charity and the trading subsidiary. These were routine items, primarily where shops in the subsidiary receive gift aided donations of the sale proceeds of donated goods but then transfer such donations, net of commission, into the parent charity accounts. The parent charity administers payroll for the group and transfers the salary costs of shops staff into the subsidiary. Both companies also incur some costs which benefit the other entity, primarily costs borne in the subsidiary associated with sales of gift aided stock and costs of central support functions such as finance and HR, borne in the charity. Year end balances are shown in the charity columns of Note 15 Debtors. Net recharges in the year were £2,616k (2023: 1,979k).

22. Taxation

As a charity, Ashgate Hospicecare is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or s256 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objectives. No tax charges have arisen in the Charity. The tax charge arises from the trading results of the subsidiary.

	Group	
	2024	2023
	£	£
Corporation Tax current year	**428**	28,000

23. (a) Statement of funds current year

	Balance at 1 April 2023	Income	Expenditure	Transfers in/out	Designated	(Losses)/ Gains	Corporation Tax	**Balance at 31 March 2024**
Unrestricted Funds	£	£	£	£	£	£	£	**£**
General Funds	9,670,127	14,048,151	(14,959,139)	191,446	351,000	57,975	(428)	**9,359,132**
Designated Funds	601,000	-	-	-	(351,000)	-	-	**250,000**
	10,271,127	14,048,151	(14,959,139)	191,446	-	57,975	(428)	**9,609,132**
Restricted Funds								
Earmarked Donations	189,747	338,092	(24,140)	(124,426)	-	-	-	**379,273**
Children's Services	459,930	14,557	-	(67,020)	-	-	-	**407,467**
	649,677	352,649	(24,140)	(191,446)	-	-	-	**786,740**
Total of Funds	10,920,804	14,400,800	(14,983,279)	-	-	57,975	(428)	**10,395,872**

23. (b) Statement of funds prior year

	Balance at 1 April 2022	Income	Expenditure	Transfers in/out	Designated	(Losses)/ Gains	Corporation Tax	**Balance at 31 March 2023**
Unrestricted Funds	£	£	£	£	£	£	£	**£**
General Funds	9,026,506	13,721,932	(12,769,169)	280,877	(501,000)	(61,019)	(28,000)	**9,670,127**
Designated Funds	100,000	-	-	-	501,000	-	-	**601,000**
	9,126,506	13,721,932	(12,769,169)	280,877	-	(61,019)	(28,000)	**10,271,127**
Restricted Funds								
Earmarked Donations	244,811	244,909	(29,977)	(269,996)	-	-	-	**189,747**
Children's Services	-	470,811	-	(10,881)	-	-	-	**459,930**
	244,811	715,720	(29,977)	(280,877)	-	-	-	**649,677**
Total of Funds	9,371,317	14,437,652	(12,799,146)	-	-	(61,019)	(28,000)	**10,920,804**

Notes to the financial statements

For the year ended 31 March 2024

Transfer of Funds

The transfer of £191,446 relates to expenditure on restricted projects which has been disclosed as unrestricted expenditure on the face of the SOFA. This predominantly relates to staff costs which are reported within the costs of charitable activities.

Designation of Funds

The Trustees have designated £100,000 (2023: £100,000) to support the pilot of new income generation initiatives and £150,000 (2023: £nil) for refurbishment of the Day Hospice scheduled to start in September 2024. During the year, the hospice utilised designated funds of £501,000 against the current year's deficit.

Restricted Funds

These are funds restricted by the donors for items of expenditure as follows:

Earmarked Donations

These are donations contributed by the general public to help fund specific clinical activities. At the end of the year £379,273 remained unspent and this will be expended in 2024/2025 onwards.

Children's Services

This donation is restricted to develop and extend child bereavement support within Derbyshire and the High Peak.

24.(a) Analysis of net assets between funds current year

	Unrestricted General Funds	Unrestricted Designated Funds	Restricted Funds	Total Funds
	£	£	£	£
Fixed assets	5,950,311	-	2,500	**5,952,811**
Current assets	4,739,078	250,000	784,240	**5,773,318**
Current liabilities	(975,257)	-	-	**(975,257)**
Liabilities due after one year	(355,000)	-	-	**(355,000)**
	9,359,132	250,000	786,740	**10,395,872**

24.(b) Analysis of net assets between funds prior year

	Unrestricted General Funds	Unrestricted Designated Funds	Restricted Funds	Total Funds
	£	£	£	£
Fixed assets	5,908,508	-	2,500	**5,911,008**
Current assets	5,097,996	601,000	647,177	**6,346,173**
Current liabilities	(981,377)	-	-	**(981,377)**
Liabilities due after one year	(355,000)	-	-	**(355,000)**
	9,670,127	601,000	649,677	**10,920,804**

25. Ashgate Hospicecare Shops Limited: Profit and loss account for the year ended 31 March 2024

	2024	2023
	£	£
Turnover	**2,972,304**	2,830,972
Retail Grant	**-**	3,033
Other income	**557,843**	555,000
Total income	**3,530,147**	3,389,005
Cost of sales	**(2,559,423)**	(2,154,518)
Gross Profit	**970,724**	1,234,487
Administrative expenses	**(877,085)**	(801,934)
Other interest payable	**(27,227)**	(27,154)
Other interest receivable	**32,324**	4,285
Tax on profit	**(428)**	(28,000)
Retained profit for the year	**98,308**	381,684
Number of shops and coffee shops	**19**	18

26. Reconciliation of net movement in funds to net cash flow from operating activities

	2024	2023
	£	£
Net movements in funds	**(524,932)**	1,549,487
Depreciation charges	**415,832**	381,168
(Decrease) / increase in creditors	**(6,120)**	163,797
Decrease / (increase) in debtors	**419,953**	(97,647)
(Increase) in stocks	**(4,278)**	(35,768)
Loss on disposal	**-**	16,435
(Gain) / loss on investments	**(57,975)**	61,019
Interest received	**(157,668)**	(13,237)
	84,812	2,025,254

There were no changes in net debt other than the cashflows above.

27. Contingent assets – legacy income

As at the reporting date, the charity has entitlement to no further legacies (22/23 – 8 were not included within accrued income, as although the income was probable, the amounts were not yet confirmed).

28. Consolidated statement of financial activities – prior year

	Unrestricted Funds	Designated Funds	Restricted Funds	2023 Total
Income:	£	£	£	£
Donation and legacies				
Donations	1,896,134	-	715,720	**2,611,854**
Legacies	2,688,561	-	-	**2,688,561**
	4,584,695	-	715,720	**5,300,415**
Income from other trading activities:				
Shops	3,632,167	-	-	**3,632,167**
Fundraising	1,047,672	-	-	**1,047,672**
Other	166,844	-	-	**166,844**
	4,846,683	-	-	**4,846,683**
Investment income	13,237	-	-	**13,237**
Income from charitable activities	4,277,317	-	-	**4,277,317**
Total income	13,721,932	-	715,720	**14,437,652**
Expenditure:				
Costs of raising voluntary income	661,298	-	-	**661,298**
Fundraising and other trading costs	4,160,117	-	-	**4,160,117**
Costs of charitable activities	7,947,754	-	29,977	**7,977,731**
Total expenditure	12,769,169	-	29,977	**12,799,146**
Net movement in funds before investment gain	952,763	-	685,743	**1,638,506**
Unrealised losses on investments	(61,019)	-	-	**(61,019)**
Corporation tax	(28,000)	-	-	**(28,000)**
Net income	863,744	-	685,743	**1,549,487**
Funds transfer	280,877	-	(280,877)	**-**
Designated funds transfer	(501,000)	501,000	-	**-**
Net movement in funds	643,621	501,000	404,866	**1,549,487**
Reconciliation of funds				
Total funds brought forward	9,026,506	100,000	244,811	**9,371,317**
Total funds carried forward	9,670,127	601,000	649,677	**10,920,804**

For more information

If you would like to know more about how you can help us to care for people living with a life-limiting or incurable illness, please contact us:

Call us on **01246 567 250**

Or email us at **Fundraising@ashgatehospice.org.uk**

Looking for support?

Call us on **01246 568 801**

Or email us at **clinicalenquiries@ashgatehospice.org.uk**

Or visit **www.ashgatehospice.org.uk**

If you require this document in an alternative format, please contact the Marketing and Communications team at **marcomms@ashgatehospice.org.uk**

यदि आप यह जानकारी किसी अन्य भाषा या फ़ॉर्मेट में चाहते/चाहती हैं, तो कृपया marcomms@ashgatehospice.org.uk पर मार्केटिंग से संपर्क करें।

Jeśli chcieliby Państwo otrzymać te informacje w innym języku lub formacie, prosimy o kontakt z działem marketingu pod adresem marcomms@ashgatehospice.org.uk

اگر آپ یہ معلومات کسی دوسری زبان یا فارمیٹ میں حاصل کرنا چاہتے ہیں تو براہ کرم marcomms@ashgatehospice.org.uk پر مارکیٹنگ سے رابطہ کریں۔

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Registered Charity No. 700636

Registered with FUNDRAISING REGULATOR

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MINDFUL EMPLOYER

Compassionate care for everyone

Ashgate Hospice

ASHGATE HOSPICECARE

England & Wales - Charity number 700636

Accounts



Working together to deliver outstanding palliative and end of life care

Ashgate Hospice Annual Report
April 2022 – March 2023

Ashgate Hospice

Compassionate care for everyone

www.ashgatehospice.org.uk

Hospice care for the people of North Derbyshire

We aim to be there for people at any stage of their illness to ensure they are well supported and cared for in the place of their choosing. Wherever you are, there is an Ashgate Hospice nursing team working in your area, supporting people in your community.

Our support and care covers:



Key to symbols

- Town or village
- Place of interest
- Chesterfield Royal Hospital
- Catchment area
- Ashgate Hospice Shop



Our teams make 6,000 home visits every year.

Contents

The difference we made **4**

Welcome from our Chair and Chief Executive **6**

Strategic report **8**
- Who we are and what we do 10
- What we believe 12
- Our strategic approach 13
- Our future plans 14

Our impact **16**
- Our care 17
- Our people 24
- Our voice 34
- Raising money for our crucial care and support 37

Trustees' report **46**
- How we're governed 46
  - Governance and trusteeship at Ashgate 46
  - Public benefit and fundraising standards 47
- Financial review 48

Financial statements **50**
- Reference and administrative information 50
- Financial review 51
- Principal risks and uncertainties 52
- Independent auditors report 54
- Our financial statements 58

Thank you **83**

The difference we made

Our hospice services are available for those living with a life-limiting illness and complex needs. Wherever you are, there's an Ashgate Hospice team working in your area, supporting people in your community.

765 volunteers gave their time freely

Our eldest volunteer is **90** years old

and our youngest is **14** years old

The work our volunteers do equates to around **£22,924** per week

£2,688,561 left to Ashgate as gifts in wills



One in five of our patients is cared for by a gift left in a will

131,549 visited our website for information, support and to fundraise.

£103,000 was won by our supporters in the Ashgate lottery

617

Christmas Trees were collected as part of our **TreeCycle** campaign

Tractor Fest

50 tractors

helped to raise £17,163 in the first ever Tractor Fest

16,807

lattes were sold across our coffee shops

SOLD

£4,200

raised from a painting that had been donated to our shops

2,351 patients and their families supported across North Derbyshire

293 received specialist inpatient care

271 access Day Services support

1,307 cared for in their own homes

894 supported by our Supportive Care teams

Welcome from our Chair and Chief Executive



Chair, Penny Brooks (left) and Chief Executive, Barbara-Anne Walker (right)

This last year truly epitomises Ashgate Hospice's commitment to working together to deliver outstanding palliative and end of life care.

Despite the profound challenges brought about by the pandemic and then the cost-of-living crisis, our staff and volunteers continued to work tirelessly to support families living with a life-limiting illness in North Derbyshire.

Whether this was caring for someone in their own home, delivering round-the-clock care at our Inpatient Unit or serving our loyal customers in our shops, everyone played an integral part in helping to deliver our crucial support.

This togetherness, something we refer to as One Ashgate, is at the very heart of what we do. It is embodied by our staff and volunteers who are compassionate, dedicated and resilient.

This commitment to making a difference, delivering outstanding care and teamwork is what unites everyone here at Ashgate Hospice. Our annual report gives us an opportunity to look back on a year of immense pressure and significant achievement.

We've seen our care and services adapt to meet the changing needs of our communities. From the introduction of a new virtual ward, supporting people at home with real-time monitoring, to enhancing our services to help guide children and young people through the complexities of grief.

Our fundraising and community events have also evolved to include new and innovative ways to raise the much-needed funds to deliver our care. This includes the reimagining of our poignant Light up a Life celebrations and the opening of a new shop in Buxton.

Together, we supported over 2,300 people, helping them to receive the very best care available at what is often the most difficult time of their lives.

However, there is more to be done. More to improve and adapt our services to the changing needs of our communities. More to address the inequalities of marginalised people accessing our services. More to secure our future with a long-term sustainable funding model.

These are exciting times ahead. We are determined to do more and to do it together. We will work as One Ashgate to develop our services to meet the needs of the population we are proud to serve, and we will work in partnership with others to address inequalities in palliative and end of life care.

We'd like to take this opportunity to thank everyone who has stood alongside Ashgate Hospice this year. From our incredible staff and volunteers to our supporters and local communities, without you the hospice would not be the thriving charity that it is today.



Penny Brooks
Chair of the Board of Trustees



Barbara-Anne Walker
Chief Executive

Remembering Nicholas and Tony
by Barbara-Anne Walker

I would like to pay special tribute to our Chair of Trustees, Nicholas Jeffrey and our Patron, Tony Nunn.





Nicholas Jeffrey

Nicholas joined us in 2018 and became our Chair in April 2019.

During his time as Chair, Nicholas oversaw Ashgate's response to the pandemic, which included services switched to virtual-only offerings overnight, the opening of our award-winning COVID ward and the successful campaign for sustainable funding from local health budgets.

Sadly, he died of cancer on 19 December 2022, aged 80.

On a personal note, I appreciated his true kindness when I was faced with personal bereavements.

I will miss his laughter and his continued and insistent encouragement of my leadership of the hospice. We shall hold his memory at the heart of our work.

Tony Nunn

Tony, founder of Antony Nunn Agencies, a successful toy business based in Chesterfield, had lived next to our hospice in Old Brampton for more than 28 years.

He was a dedicated supporter of the hospice for many years and became an Ashgate Hospice Patron in 2017. He was passionate about supporting the hospice and raising money and introduced many of his friends, family and business contacts to the hospice, bringing further awareness to the essential work and care we provide.

Tony died unexpectedly on 5th February 2023, aged 69.

Our dear friend, Patron and neighbour, will be remembered for his kindness, generosity and will be sincerely missed by all who had the pleasure to know him.

Strategic report

In this section, you can read about who we are and what we do, our plans for the future and a summary of our objectives for the coming financial year.

Why we do what we do



Heather on her wedding day at Ashgate Hospice



Richard and Heather on their wedding day

Heather and Richard's story

Our staff and volunteers pulled together to give Heather, who had incurable cancer, a "beautiful" wedding day to remember.

Heather, 32, and her husband Richard Odams tied the knot surrounded by family and close friends in our picturesque gardens in Old Brampton, Chesterfield.

Our teams "went above and beyond" to ensure their day was as special as possible.

Richard said: "It was a really beautiful day. It seemed to go in a flash just like every wedding does, but we had such a lovely time.

"It was mentioned to the staff at Ashgate that we were supposed to be getting married in June and they just rallied around and took everything off our hands really – everyone was just so brilliant.



"It was pretty much a case of turning up on the day and everything was sorted. We can't thank them enough.

"They organised everything for us in such a short space of time. Everyone at the hospice has just gone above and beyond what we could have imagined."

Who we are and what we do

Whether you're living with a life-limiting illness, caring for someone who is, or grieving the death of a loved one, we're here to help.

We are here for the people of North Derbyshire and beyond. We work together with energy, care and compassion so that people can have a good death in a place of their choosing and know that their loved ones are important to us too.

We provide palliative and end of life care free of charge to people aged 18 and over. We care for people living with a life-limiting illness, including cancer, neurological diseases, and end-stage heart, kidney and lung diseases.

We aim to ensure that our patients are well informed, supported and pain-free. While our purpose is to provide end of life care, our work doesn't only begin at the very end of someone's life. We can help improve quality of life soon after a terminal diagnosis. We also support people's loved ones to ensure they get the practical, emotional and bereavement support they need.

We are proud that the Care Quality Commission continues to rate our care as 'Outstanding'.

When it comes to funding, much of the care and services we deliver are funded by the generosity of our supporters. In fact, more than 70% of what we do is paid for through fundraising and less than 30% comes from local NHS budgets.

Support when and where it's needed

When someone living in North Derbyshire is diagnosed with a life-limiting illness and has complex needs, they can access Ashgate Hospice's services through a referral. This normally comes from their GP, hospital team or community nurse.

At that point, we provide specialist care and support for our patients in their own homes or at our Inpatient Unit in Old Brampton, or sometimes both. For example, patients can come to the hospice for a few days to control their pain, before returning home, if able to do so. We also provide practical, emotional and bereavement support for the families of our patients.

The type of care and level of intervention we provide depend on the degree to which a patient's disease has advanced. We also consider other factors, such as their support network, home environment and pain levels.

Our aim is to provide the right care at the right time.



More than 70% of what we do is paid for through fundraising

Ashgate Hospice was founded in 1988



What we believe

We're working to ensure everyone in North Derbyshire has access to excellent palliative and end of life care when they ask for it and where they need it. Here's how:

Our vision

Our vision is for people with a life-limiting illness to be able to live well and to have a good death – well informed and supported – and for their loved ones to be well supported and comforted too.

Our purpose

We provide, campaign for, and educate about, specialist palliative and end of life care and bereavement support. We aspire to be a centre of excellence – working as part of the wider healthcare system with energy, openness, compassion and hope.

Our values

We are compassionate.
We work as a team.
We are respectful, open and inclusive.



Our strategic approach

At the beginning of 2022, we published our Three Ambitions that set out the ideal world we want to create – not what we are doing day to day – but what we hope will one day come about.

These ambitions were split into three categories; our care, our people and our voice. The things, above all else, we'll work to achieve and will shape everything we do.

Our care

Care is at our heart. We open our arms to you and the people you care about.

Our ambition for our care – an Ashgate model of care which:

- is about living well and dying with dignity and in comfort
- is accessible to everyone who needs our care, in all their diversity
- is safe, and always improving, using feedback, our expertise, research, emerging ideas and innovation
- is delivered in collaboration with other care providers – including on issues where we can have more influence and impact together – promoting best practice across different healthcare settings
- is fairly funded, well supported and understood.

Our people

We are the One Ashgate team working together with warmth and hope to provide compassion and care. Our aim is to be exceptional in everything we do.

Our ambition for our people – a One Ashgate team who:

- bring our values to life with the people in our care at the centre of everything we do
- connect and collaborate, working together and where everyone's views are heard and valued
- are proud ambassadors and fundraisers for Ashgate Hospice and understand how we all help deliver outstanding care
- are committed to improvement and excellence, celebrating successes together and speaking up when something is wrong or requires change
- are leaders and learners, committed to our wellbeing and able to say why a positive working culture matters
- reflect the diversity of the communities we serve.

Our voice

We use our trusted voice to make things better for our patients, their loved ones and people needing specialist palliative and end of life care in North Derbyshire and further afield.

Our ambition for our voice – a powerful and combined Ashgate voice which:

- increases our reach, influence and impact across North Derbyshire and beyond
- is as inclusive and accessible as possible, so that everyone can get the help they need
- helps create a North Derbyshire community who know how to support people at the end of their lives, and those living with loss
- encourages conversations about death and dying, and demystifies hospice care
- advocates locally, regionally and nationally for specialist palliative and end of life care to be properly funded and resourced.

Our future plans

Just as we were beginning to emerge from the shadow of the pandemic the cost-of-living crisis hit. Like everyone, we have been impacted by a rise in our day-to-day running costs for things like food, heat and electricity. So, we're focussing on building financial resilience, improving access to our services and developing our workforce to ensure our care remains the very best.

With all this in mind, in 2023/24, we will:

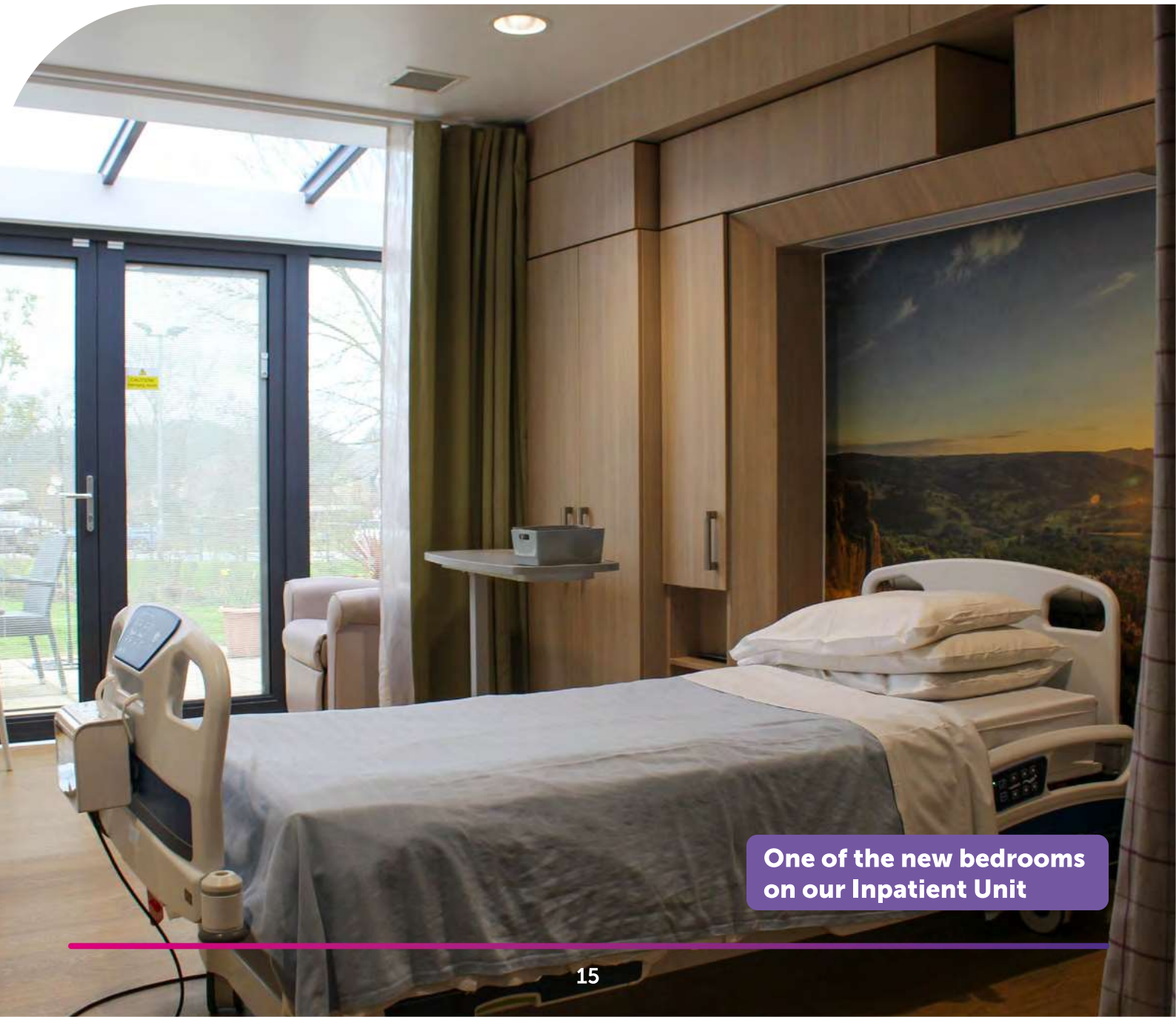
1. **Listen to our patients and their families to improve our care** by expanding the methods used to obtain meaningful feedback. As part of this work, the hospice will continue to introduce and embed the new national Patient Safety Incident Response Framework.
2. **Increase access to pre-bereavement support and intervention for children and young people** with an aim to reduce inequalities in later life and reduce the impact of adverse childhood experiences. We will increase the awareness of the pre-bereavement service across North Derbyshire, offering and delivering workshops to schools and colleges with a focus on supporting students who have a relative approaching end of life.
3. **Embed the virtual ward approach to support our community in their preferred place of care**, enhancing our community services with a rapid response to care needs, admission avoidance and discharge support. We will use qualitative feedback from service users and staff to support continuous improvements.
4. **Continue to work as part of Joined Up Care Derbyshire**, to share our specialist palliative and end of life care expertise, to enhance the quality of care for the people of North Derbyshire.
5. **Continue to improve the facilities at our Old Brampton site to support the standardisation of care and to improve patient experience and comfort.** This includes updating our Outpatient Clinic rooms, reimagining our Day Services space and defining plans for modernising the remainder of bedrooms on the Inpatient Unit, and associated work spaces, which were not included in our previous refurbishment in 2019.
6. **Continue to develop a Single Point of Access**, to ensure that all referrals have a consistent response and that those referred receive the right service at the right time.
7. **Continue to make Ashgate Hospice a great place to work and volunteer** with the introduction of wellness days and an even greater focus on inclusion, including awareness and training on topics such as menopause to ensure our people continue to be well supported.

Joined Up Care Derbyshire

Ashgate Hospice

8 **Expand our reach and grow our sales in retail** with the opening of further shops across the region. Not only does this help to generate the much-needed income to fund our care but it also helps to raise awareness of hospice services within local communities.

9 **Deliver an inclusive portfolio of fundraising campaigns and events**, offering an activity for everyone and expanding our regional reach to generate more income and build deeper relationships with the community. Our events and fundraising activities will grow and adapt to ensure they are as accessible and inclusive as possible. New events added this year include the Superhero Night Walk, for under 11s and the return of the Open Air Cinema.



One of the new bedrooms on our Inpatient Unit

Our impact

Working together to provide the very best care

At Ashgate, our ambition, for every patient we meet, is to enable them to live their life as fully as they are able for however many days, weeks or months they have left. We care for them in a way that is right for them. Because every person is different, and their care must be too. We try to care for everyone we meet as if they were our own loved ones.



Our care

In 2022/23, we continued to emerge from the pandemic and respond to the ever-changing environment caused by the cost-of-living crisis. Our focus was always on providing those families living with a life-limiting illness the very best care and support at what is often the most difficult time in their lives.

Our teams supported 2,351 people living with a life-limiting illness, their families and their loved ones. That included care in homes across North Derbyshire and the High Peak and Dales, as well as on the ward at our site in Old Brampton.

We supported 2,351 people living with a life-limiting illness in 2022/23

Our services at a glance

Palliative Care Specialist Nurses
supporting you in your place of choice

Lymphoedema
managing the symptoms of lymphoedema

Complementary Therapy
from head massages to aromatherapy

Counselling and Therapies
a safe space for you to be heard

Social Work
support for you and your loved ones

Inpatient Unit
round the clock care on our ward

Physiotherapy
helping to improve your quality of life

Spiritual Care
finding peace, comfort and hope

Day Services
advice, activities and peer support

Occupational Therapy
helping you maintain your independence

Virtual Ward
safe care at home through remote monitoring using easy-to-use technology

Helping those living with a life-limiting illness to make the most of the time they have left

At Ashgate Hospice, we offer a holistic range of services to help our patients and their loved ones manage both their physical and emotional needs. We believe that everyone should be able to spend their final days surrounded by the people they love.

As we began to emerge from the pandemic, our clinical teams were able to increase face-to-face contacts, either at the hospice or in a patient's own home. They continually adapted to changing guidance and restrictions issued by the government to ensure that our care and support continued.

Lydia's story

Lydia Williams is one of our Palliative Care Specialist Nurses at the hospice and has been caring for patients and their families in their homes for about 15 years now.

From working with other hospice teams to ensure patients are comfortable to prescribing the correct medication so their symptoms are under control – Lydia provides complex care to people who are nearing the final months, weeks and days of their life.

"The best thing about working at the hospice is working with patients and families – it is a privilege to go into someone's home and get to know them and their family," says Lydia.

"It's different from being in a clinical setting; you can see how people are living their lives and you get a real feel of what's important to each individual. Every patient we support is unique, it is about them as a whole and what means most to them.



Lydia Williams, Palliative Care Specialist Nurse

"People think that dying and preparing for death is sad but there is often a lot of humour, love and warmth. You have difficult conversations but there is an openness which can be really moving.

"Of course, it can be very challenging at times too. There are lots of sad and painful moments and you feel for patients and families who are experiencing such heartbreak.

"Working in their homes, you're more aware of the emotions patients and families are going through. You can almost absorb the emotions physically and sometimes the conversation sticks in your mind and sits with you for many years – it can be very emotional.

"That's why we do what we do – to try and make the lives and journeys of the patients and families we're caring for that little bit easier for them."

During the year our services included:

Care at home – Most of our patients tell us that they would prefer to spend their last days at home. Our nurses, doctors, occupational therapists and support workers work alongside other health and social care professionals to ensure patients can remain in their own homes. This includes helping to manage difficult symptoms and providing advice or equipment when needed.

Physiotherapy – our physiotherapists assist patients with a variety of needs including breathlessness, fatigue, discomfort, weakness, mobility and pain, by providing a realistic and appropriate treatment regime to help improve quality of life.

Lymphoedema specialist support – our specialist Lymphoedema Nurses work with our medical team to provide support and care to patients who have lymphoedema. We help them by carrying out a thorough assessment and providing an individual treatment plan. The plan may consist of skincare, massage, exercise and compression. It aims to manage the symptoms of lymphoedema and improve quality of life.

Counselling and therapies – the Counselling Team is part of the Ashgate Hospice Supportive Care Team and is based in the Harry Fisher Building at the hospice. Our service is available to patients with palliative care needs, their families, friends and carers. We offer a safe space for our patients to be heard and supported, as they explore their concerns and any issues they wish to resolve.

Outpatient care – we continue to provide important services including lymphoedema treatment, counselling, consulting, medical assistance, physiotherapy, psychology, consultation with the Ashgate Community Nurse Specialists and bereavement services.

Social work – our Social Work Team is based at the hospice and out in the community. They work alongside other professionals and agencies to understand the needs of patients, their families, friends and carers. They help people to understand what help and support is available, including any wider needs (for example, the needs of children and young people when an important adult in their lives has died). They help to arrange and manage practical support for daily tasks.

Spiritual care – our Spiritual Care Practitioners works as part of the Supportive Care Team. They are all specially trained and experienced in providing person-centred spiritual care in a healthcare setting and provide support to patients, their relatives, friends, carers, staff members and volunteers. The team seeks to listen, with compassion, helping people to explore their own sources of strength, comfort and hope.

Occupational therapy – our Occupational Therapists promote independence and quality of life when a patient's illness has restricted their normal activities of daily living. The team works very closely with other members of the care team, carers and community agencies, and the patient's choice is central to any decisions made. They can see patients in a variety of settings, including their own homes and at Ashgate Hospice's Inpatient Unit and Day Services. They can also provide an advisory role to nursing and residential homes.

Complementary therapy – our Complementary Therapists specialise in palliative care. They form part of the Supportive Care Team at Ashgate Hospice and are based in the main hospice building. This service is available to inpatients, Day Services attendees and to participants in the recently bereaved groups. The complementary therapy treatments that we provide can be used alongside conventional medicine or on their own.

Inpatient unit – our Inpatient Unit at Old Brampton in Chesterfield offers the reassurance of round-the-clock, expert care and support.

Day services – Our Day Services Team provide advice, education, activities and support to a patient and their family at an earlier stage of their diagnosis. At a drop-in session a patient has access to a range of services, including physiotherapy, complimentary therapy and expert medical advice. In 2022/23, Day Services were able to resume onsite drop-in sessions that were complemented by virtual groups for those who are unable to attend.

You can read the Quality Account online at **www.ashgatehospice.org.uk/reports**

293	people received specialist Inpatient care
271	people accessed day services support
1,307	people were cared for in their own homes
894	people were supported by our supportive care teams
724	people were supported to live independently by our occupational therapists
480	people were supported by the lymphoedema team
612	patients received physiotherapy support
237	people were supported with complementary therapies onsite at Old Brampton and in their own homes

What makes a good death?
By Dr Sarah Parnacott



Dr Sarah Parnacott

For many people, trying to comprehend the concept of a 'good death' may seem impossible, particularly so soon after the death of a loved one.

You might think that the term is jarring and insensitive; that the words 'good' and 'death' should not be in the same sentence.

However, for us at Ashgate Hospice, and for our palliative and end of life care colleagues across the UK, we believe the term 'good death' can have positive connotations.

For us, a 'good death' is an end of life experience that seeks to remove pain, distress and suffering and takes into account the wishes of the patient and their loved ones.

The London End of Life Clinical Network has worked with a range of organisations and people to identify exactly what makes a 'good death'.

The organisation says a service supporting someone at the end of their life must follow certain criteria for the patient to experience a 'good death'. This includes:

- providing care which is competent, confident, compassionate and personalised
- offering joined-up, co-ordinated services and pathways which are easy to access and navigate
- access to psychological and spiritual support
- tailored pain management
- timely assessment and provision of bereavement services.

For each individual we care for, we strive to ensure all these attributes are met – doing everything possible to ensure our patients have the most comfortable death possible.

We all wish we could avoid death. It is certainly something that is never wanted and can never be forgotten.

At the point when death is something that can't be avoided, when there really is no other outcome to the most heart-breaking of situations, we strive to ensure that symptoms are controlled, and that the person has a say in where they want to be.

Extending our care with the Virtual Ward

In January 2023, we opened our palliative and end of life care Virtual Ward, allowing us to admit 10 patients at any one time. The Virtual Ward allows patients to get the care they need in the place they call home safely and conveniently, rather than being in hospital or the hospice.

Patients remain under our care, through remote monitoring using easy-to-use technology and face-to-face visits.

Care includes remote supervision from consultants, specialist nurses, social workers, therapists and other medical professionals.

Modern equipment and technology provided to patients also allows them to easily submit readings, such as their blood oxygen levels and temperature.

Patients, including those in care homes, receive high quality face-to-face care when needed and can request 24-hour help through an out-of-hours number.

Here's what our Director of Quality and Patient Care, Hayley Wardle, had to say...



Hayley Wardle

We're delighted to be introducing our new Virtual Ward to the patients and families who need us now and in the future.

The initiative is an enhanced version of the community care we are already delivering and allows patients to get the support they need at home safely and conveniently, rather than being in hospital or the hospice.

Virtual wards can also support the safe and earlier discharge of patients from our Inpatient Unit, enabling patients to be monitored at home and freeing up our specialist beds.

It essentially means that we can extend our care and support the community even further by bringing more people into our care.

Patients and their families will have access to doctors, nurses, physiotherapists, occupational therapists and more whilst receiving Virtual Ward care at Ashgate.

Support can include remote monitoring using apps, technology platforms, wearables and medical devices and may also involve face-to-face care from multi-disciplinary teams, such as our community nursing team, doctors and therapists – and they can be reassured they're being monitored on an on-going basis.

Not only will the service be convenient so the patient's condition can be monitored at home, but we hope it will empower patients to take a more active role in the management of their health to improve their quality of life.



Our Virtual Ward Palliative Care Specialist Nurses, Amanda Hall and Sophie Dudley

Supporting children and young people through bereavement

Bereavement isn't easy for anyone, but it can be especially difficult for children and young people. That is why we have developed our children's services to offer one-to-one support in schools and support to teaching staff and other professionals in the community.

Work is now underway to widen the offer and reach more children and young people. This will include virtual groups and specific targeted activities.

Support is also given to those attending the bereavement groups, to support them to talk to their children and grandchildren about death, and similar sessions will be delivered throughout the year through our Day Services.

We have also increased our pre-bereavement support, with a greater presence on the Inpatient Unit, supporting children to understand what is happening to their loved one and having honest and kind conversations about death. We also have a variety of books to give to children and families to help them prepare for a death or to reflect on the death of a loved one. These may be story books or books written by other young people offering advice and coping strategies.

Ensuring patient safety

Ashgate is well known for its outstanding patient care, but we are always looking for ways to improve. It is important that our staff and volunteers feel well supported to be able to keep delivering the best possible care.

We champion an environment of reflection and learning, encouraging staff and volunteers to be open and honest including access to reflective practice and clinical supervision. In July 2022, we established one-to-one, small and medium-sized clinical supervision groups.

In addition, the development of our clinical supervision training offer is in progress and focuses on a restorative and resilience-based model with support from Hospice UK.

During 2022/23, we provided 22 patient safety study days for our staff on the Inpatient Unit, introducing the basics of clinical human factors, principles of incident investigation, and a refresher on the Duty of Candour.

We welcome the introduction of the new national Patient Safety Incident Response Framework and have begun a phased approach to the introduction of the new framework. We are providing education and training to all staff who work in and support clinical teams via patient safety study days and cascading via team meetings.

Making our care and support easy to access

We want everyone who needs our care and support to be able to easily access it. This starts at the point of referral. In 2022/23, we began work to create a single point of access to all our services.

We implemented a new streamlined method of referral to ensure that 100% of patient and client referrals, both external and internal, are registered consistently and given a decision outcome based on service criteria. Additionally, we have worked to ensure that there is a consistent and centralised approach to making internal referrals between services.

The second part of the project has been looking at how we ensure that referrals are sent to the right service at the right time through a single point of access. Improvements are also being made to make it easier for referrals to be made through our website.

How engaging with patients and families is key to care improvements

by Ashgate's Head of Quality Improvement, Claire Blakey



Claire Blakey

We strive to continuously improve for our patients and their loved ones because we want them to experience the highest standards of specialist palliative and end of life care and support.

Quality Improvement (QI) is embedded into our practices to ensure that all services are safe, timely, efficient, equitable and patient-centred.

It is a collaborative approach to identify and address problems in order to improve the quality of care, a process or a system. It is about looking at what we do and seeing if we can do things differently to improve safety, experience, and effectiveness.

So why does it matter for patients and families?

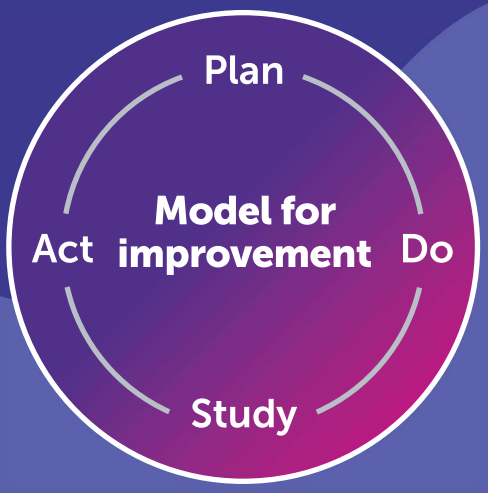
In clinical work, there are many reasons why QI is important for patients and their families:

- It helps to ensure that patients receive the best possible care and treatment;
- It helps to improve patient safety and reduce the risk of errors and adverse events;
- It helps to improve the efficiency of care delivery and make the best use of resources;
- When QI is part of everyday work it has been shown to deliver better patient outcomes, staff experience, and improve morale.

At Ashgate, we introduced our own Model for Improvement (MFI), a three steps process that uses a simple methodology. It recognises that improvement works best when people at the point of delivery, those who are directly engaged in the work, are empowered to test changes and use feedback from staff, volunteers and patients to make improvements.

MFI is made up of the 'Plan, Do, Study, Act' cycle which allows for continuous improvement and learning that is fundamental to quality.

Since introducing QI at Ashgate, we have already seen fantastic changes made by our staff and volunteers who ensure patients, and their families remain at the heart of our QI practices. By listening to their experiences, we can learn and improve instead of assuming that we understand what is needed.



Our people

We're proud of the way our staff and volunteers work together to support families living with a life-limiting illness in North Derbyshire. Our aim is to create an environment where our people can bring their authentic selves to work, fulfil their potential and support their wellbeing. We invest in training and development and strive to become North Derbyshire's employer of choice, attracting and retaining the best people to work with us.

We want everyone's experience of Ashgate Hospice to be a great one – whether they work for us, volunteer with us, support us, or come to us for care and support.

Caring for our people

We know that looking after the wellbeing of our workforce is important to engaging our people, preventing stress and creating a positive working environment where our staff and volunteers can deliver the outstanding care and support we are known for.

In the last twelve months, we developed an inclusive and dynamic rolling offer of wellbeing support. This includes virtual and face-to-face support and one-to-one wellbeing and coaching sessions. We are also working with Joined Up Care Derbyshire to access their wellbeing support and ensure it is readily available to our workforce.

This wellbeing support, coupled with an encouragement in peer-to-peer support has contributed to a steady reduction in staff absence throughout the year.

Radical Kindness

We have developed a bespoke model for communication, teamwork and management at Ashgate to help our people better live our values. This approach was adapted from Kim Scott's Radical Candor and encourages open and compassionate conversations, supports compliance with management processes, and challenges incivility and bullying at work. The intent is to have a shared language and understanding, and processes and spaces that enable clear and consistent actions in line with our values.

We have
352 staff
who are supported
by a team of
765 volunteers.

Supporting equality, diversity and inclusivity

Equality, diversity and inclusivity (EDI) is deeply important at Ashgate. We are passionate about our care and services being accessible to anyone who needs them and in turn we're committed to being an inclusive employer and valuing the diversity of our people.

Driven by our Equality, Diversity and Inclusion Lead, we set up a Workforce Advisory Group to bring about positive changes in our policies, practices and culture. This has included information sessions for our staff and volunteers about identity, pronouns and LGBT+ awareness. We've also engaged with local communities who represent marginalised groups, including the Chesterfield EDI Forum, the MacIntyre charity for people with learning disabilities and Derbyshire LGBT+.

Our work with Derbyshire LGBT+ has resulted in us signing up for their Rainbow Accreditation Scheme, which offers a comprehensive framework to look at every area of Ashgate from patient care, to fundraising events and the experience of customers in our shops and cafes. It is an opportunity to evaluate our organisation with honesty and openness, so that we can identify potential barriers and areas for improvement in our LGBT+ inclusion. We reinforced our commitment to the LGBT+ community with the installation of a rainbow crossing at our Old Brampton site, ensuring everyone gets a warm welcome when they visit.

We've also focussed on the diversity of our workforce, helping us to understand who we are and how we can create a better working environment where they can do their best.





Liz Allam

Our Equality, Diversity and Inclusion Lead, Liz Allam on our work to become an open and inclusive organisation where everyone is warmly welcomed.

Staff and volunteers at Ashgate are committed to welcoming people from all identities and backgrounds to the organisation as patients, staff, volunteers or supporters – however we know that historically people from LGBT+ communities have experienced discrimination and inequality both within healthcare and in the workplace.

Research tells us that, even in organisations with good intentions, LGBT+ people can experience barriers accessing services, such as end of life care, due to systemic discrimination and inequality embedded in society and its institutions.

We want to ensure Ashgate is open to everyone who needs us, and we are working to understand how we can improve this.

Ashgate already has a hugely committed and compassionate workforce and by welcoming staff and volunteers with diverse backgrounds we can enhance and strengthen the organisation further.

Working towards the Rainbow Accreditation with Derbyshire LGBT+

Compassionate care for everyone



Liz Allam from Ashgate Hospice and John Yates-Harold from Derbyshire LGBT+



Improving accessibility to our services

We have a longstanding focus on providing welcoming and inclusive facilities for our patients, staff, volunteers and visitors of all abilities. As part of the continuous improvement of our facilities, we have created a new accessible entrance at our Old Brampton site in Chesterfield.

The project has not only allowed for improved access to our Inpatient Unit through the new automatic door next to the Reflections Room, but also the transformation of the internal courtyard next to the hospice café and the refurbishment of the entrance and corridor space.

The new doors into the courtyard will enable patients in beds to easily be taken into the outdoors and our staff, volunteers and visitors will benefit from new outside seating for the café.

To reinforce that our care and support is for everyone, we now offer our service literature in alternative languages. This includes Traditional Chinese/unsimplified Chinese, Cantonese, Polish, Hindi and Urdu. These languages are the most spoken after English in North Derbyshire.



Gender pay gap

The Equality Act 2010 requires all organisations with 250 employees or more to report on their gender pay gap. The gender pay gap is defined as the difference in the average earnings of men and women over a defined period, regardless of role or seniority.

In 2022, Ashgate had a negative gender pay gap. The 'mean' gender pay gap shows that for every £1 a man is paid a woman is paid £1.05. The 'median' figure shows that for every £1 a man is paid a woman is paid £1.16.

Following an anomaly in the 2021 figures – due to the engagement of contractors that year – the 2022 data builds on the 2020 gender pay gap (in favour of women) and demonstrates that Ashgate is continuing to close the gender pay gap ahead of national benchmarks.

This is a testament to our commitment to equity, and to Ashgate as an organisation where women are treated fairly, are valued and hold positions of authority. We are also delighted that following several new appointments, the gender diversity on our board of trustees now more closely reflects the make-up of our workforce.

In recognition of our predominantly female workforce, we are enhancing workplace support; for example, increased carers leave, women's wellbeing provision and the introduction of a menopause policy and support. We have improved employee diversity monitoring, which will enable us to examine potential intersectional factors influencing the pay, performance and progression of our employees.

We acknowledge the society wide issues that mean women are over-represented in the hospice and health care sector and recognise that there is work to be done to increase the representation of men in roles such as nursing and healthcare assistants, and to ensure the representation of women at senior levels in the organisation.

Mean gender pay gap

-5.35%



£1.00 **£1.05**

Median gender pay gap

-15.65%



£1.00 **£1.16**

Listening to our people

We have focused heavily on our internal engagement this year, including the introduction of stay interviews to complement our existing exit surveys and bi-annual People Survey. This helps us to understand what our people think about working at Ashgate and enables us to prioritise areas for further development.

We also created a new Employee Forum, which is a way for our workforce to raise ideas or questions through their elected representative. The Employee Forum played a crucial role in Reward and Recognition, the review of staff terms and conditions, which saw the introduction of a new pay framework and enhanced benefits.

Our weekly email communication, The Weekly Bulletin, provides regular organisational updates, equality, diversity and inclusion initiatives, and celebrations of our workforce successes to all our staff. This is complemented by a bi-weekly email communication to our volunteers.



Fairly rewarding our people

Recruiting, retaining, and motivating employees are critical to Ashgate's sustainability and success. Our Reward and Recognition project saw an organisation wide consultation and review of staff terms and conditions with the aim of introducing a fair, transparent and consistent framework for how we pay and reward staff and to strive for the hospice to be North Derbyshire's employer of choice.

We prioritised clear communications and inclusivity to ensure that everyone's voices could be heard throughout the collective consultation which ran from April 2022 to July 2022.

As a result of the Reward and Recognition project, a new equitable and sustainable pay framework has been implemented, ensuring that for the first time all staff have the opportunity for pay progression. Other changes included an increase in carer's leave, bereavement leave and compassionate leave.

Offering staff greater choice and flexibility has also seen the introduction of a new way for staff to buy and sell their annual leave.

The annual review process was also overhauled to support staff to perform their best by providing a comprehensive evaluation of their progress and development in a way that is fair and transparent. Individuals are assessed against clear criteria for performance, values and learning, and supported by regular 1:1 meetings throughout the year.

In addition, we have modernised our long service recognition, ensuring staff and volunteers receive formal recognition sooner in their service with us.

Attracting the very best people

As part of our response to a highly competitive labour market, we have introduced onsite clinical recruitment events to showcase our benefits and amenities. We were keen to recruit more nurses to help alleviate winter pressures, help staff our new Virtual Ward and future proof our Inpatient Unit. Pleasingly, an increasing number of nursing vacancies have also been due to internal promotion and progression.

The recruitment events included guided tours, a chance to speak with staff on the ground and on-the-spot interviews. Both events were well attended, and 10 people were recruited in addition to our usual recruitment activities.

We also modernised our application process as part of our digital transformation, to create a seamless and easy-to-use system, not just for prospective candidates but for managers too.





Developing our people

At Ashgate, we are committed to developing our people. We offer apprenticeships, work placements and shadowing opportunities across the organisation to give individuals the chance to step into a career they love.



Charlotte's story

Our very own Charlotte Butterworth started off her career at Ashgate Hospice 10 years ago by taking on a one-year Business and Administration apprenticeship; now she works as our Partnerships Manager.

She said: "Completing an apprenticeship with the hospice helped with my personal development; I learned what working in a charitable fundraising team was like, and it gave me the opportunity to learn from professionals. It boosted my confidence and provided me with the opportunity to grow within an organisation which I love working for.

"The best thing about the apprenticeship was that it helped me decide that a career in events was right for me and more so, it opened my eyes to the third sector as an industry which I had never considered. I learnt so much about the broad range of care the hospice provides and the importance of what we do, it made me incredibly passionate about the cause and how organising fundraising events was able to directly impact patients and families."



Charlotte Butterworth, Partnerships Manager
(2nd from right)

Innovating in technology

During 2022/23, we nurtured innovation across Ashgate to enable collaborative working and developed our digital space to transform how we share information and data. This has included providing new laptops and a new Virtual Desktop Interface solution to ensure our workforce has the tools they need to fulfil their roles whilst working from a range of locations.

An overhaul of the way in which we work has seen a move to cloud-based servers to reduce cost and risk whilst providing a sustainable solution for our future. This has been further enhanced by a new strategic reporting database with live downloads of clinical data which allows Ashgate to produce real-time reports on all aspects of patient care.

Our intranet system has also undergone extensive development to encourage easier information sharing and collaboration with teams from across Ashgate. Staff have also undergone internet and email training to help improve knowledge, confidence and encourage safe practice.

Information security continues to be of utmost importance at Ashgate, particularly as cyber-crime continues to increase. Our security has been greatly enhanced through device encryption, network and website scans as well as multi-factor authentication and awareness raising for our workforce. External auditors carried out penetration testing of our systems which we were pleased to pass with "flying colours".

Internet and email training has helped improve knowledge, confidence and encouraged safe practice

Celebrating our amazing volunteers

Yet again, our volunteers have been incredible. Volunteers are a crucial part of the work we do at Ashgate, enabling us to support families who need us the most. In the past year, 765 volunteers contributed their time, knowledge, and expertise, supporting Ashgate in a wide variety of roles, including as part of our Inpatient Unit, maintaining our gardens and fundraising events. In the last year alone, we have welcomed more than 200 new volunteers into our hospice.

Significant progress has been made to improve volunteer recruitment and retention. This includes the introduction of dedicated recruitment events, streamlining online applications and refreshing training and development.



Ann Roberts enjoying a Calendar Girls photo opportunity

49% of our volunteers are based in our shops, coffee shops and donation centre, helping to generate the £8 million needed to fund our services



Ann's story

Our fundraising volunteer Ann Roberts gives back her time after we were there to support her when she was first diagnosed with incurable cancer more than 30 years ago.

From giving talks in the community about Ashgate to doing her bit to help us prepare for our events – Ann says volunteering gives her "a great sense of pride".

She was first touched by our care after being diagnosed with a rare form of cancer in 1991, aged 37; doctors said it had spread around her body and Ann was given two years to live.

Ann said: "The hospice was there for me when I desperately needed them. When I was first diagnosed – my kids would have been 10 and 12 – I had two operations and they thought they had stopped it in its tracks.

"But in a few short weeks they told me it was well and truly taking over my body; they couldn't cure it and gave me two years to live.

"In desperation, I rang Ashgate and within two days, a nurse came to visit and was just absolutely brilliant and helped me get my emotions under control.

"Ashgate did so much for my family all those years ago and it's a pleasure to give something back and do my bit.

"I'm determined that the hospice should survive so other families can benefit as mine did.

"If giving up a few hours of my time each week helps then I'll continue to volunteer as long as I'm able.

"I love volunteering. I get to go out into the community and tell people about the history of the hospice, what we do, how we're funded, what it costs to run each year, how we're staffed, and then if appropriate I'll tell them my story too."

Our voice

Raising awareness of death, dying and bereavement and the work we do is essential to our fundraising and campaigns work. Through our website, social media and the press, we can make more people aware of what we do and help create a North Derbyshire community who know how to support people at the end of their lives, and those living with loss.

Life, death and everything in-between

Series three of The Life and Death podcast debuted in May. Hosted by our Senior Physiotherapist, Stephen Rumford, the six-part series is an honest look at life, death, bereavement and everything in-between. In this series he sat down with special guests to discuss their experiences of death, dying and bereavement – with the aim of finding a deeper understanding of what life and death means to them.

This series saw us meet guests from as far as Arizona who have experienced death, dying and bereavement.

Guests included:

- **Mary-Frances O'Connor** – neuroscientist, author and associate professor at the University of Arizona and investigator on the effects of grief on the brain and the body.
- **Clover Stroud** – Sunday Times Bestseller and journalist writing for the Daily Mail, Sunday Times, Daily Telegraph and author of her new book, The Red of My Blood. Her book shares her grief story following the death of her beloved sister, Nell.
- **Stacey Heale** – writer, Ted Talk contributor and well-known grief commentator on social media. Her husband, Greg Gilbert, lead singer of noughties indie-rock band The Delays, died of bowel cancer in 2021.

Mary-Frances O'Connor from episode three visited Ashgate to deliver an in-person talk to staff and volunteers about the effects that grief has on the brain.

The popularity of the podcast continues to grow, allowing us to help create a North Derbyshire community who know how to support people at the end of their lives, and those living with loss. It also supports conversations about death and dying, and helps to demystify hospice care.

Since the first episode was shared on 8th October 2020, the podcast as a collective has had

11,614 listens

The podcast has listeners right across the world, including

58.6% in the **UK** and **24%** in **America**

70.9% are **women** listeners aged 35–44 (35.5%)

Giving a voice to others

Throughout 2022/23, we helped people living with a life-limiting illness and their loved ones tell their stories and bring to life the challenges they face. We also highlighted the crucial role of Ashgate in the healthcare system, challenges in the way we are funded and how our care and support can make a lasting impact to those in need. We achieved this through vital media coverage, to help inform and educate about the way hospice care is funded and reach others that may need our services so they would know they were not alone.

Stories told by our patients and their loved ones gained extensive local media coverage, including broadcast and print. Their stories were also shared within our twice-yearly supporter newsletter which is delivered to 17,000 homes across the region.

Our professionals on the frontline understand the challenges faced by those living with a life-limiting illness. That is why we set up an online blog area on our website; to give them a platform to tell their stories.

The blog is written by staff and volunteers right across Ashgate and includes stories from nurses, those working in fundraising and our Supportive Care team.

This included the blog:

'What makes a good death?'

from Specialist Palliative Care Nurse, Sophie Dudley.

She said: "I think a good death is one that the patient wanted. To be as settled, comfortable and pain free as possible, in the place that they want to be. For us, it is about ensuring that the patient's wishes are met, whether that is to be surrounded by loved ones, their pets and their favourite things, or simply being in their own bed."





An online community of support

Our website is often the first step in someone getting in touch with Ashgate. It's the place our patients and their families go to find vital information to make informed choices about their care.

Our website is also home to multiple resources, including videos, leaflets and articles. This includes tips for coping with grief at Christmas, hand massage techniques and mindfulness breathing exercises.

At Ashgate, we know that peer-to-peer support is important to those we care for and their families. Whether someone is living with a life-limiting illness or is grieving their loss, our online communities are there for each other. It is also an important way for us to raise awareness of our services, extend our support and encourage open and honest conversations about death, dying and bereavement.

In 2022/23, our social media platforms reached approximately 1.3 million people.

As well as sharing our own content across our social media channels, we engage with others through the content they share, and encourage engagement. It is a valuable tool to not only cement our messages in other media, but also to reach new people and generate more support for Ashgate.

We have also increased our video content, including reels (short videos), and have started to post more content on TikTok, aiming to grow our audience on that platform.

131,549
people visited the Ashgate Hospice website



Raising money for our crucial care and support

Without our incredible supporters, we simply couldn't provide so much care and support to families living with a life-limiting illness. Last year, despite the shadow of the pandemic and the cost-of-living crisis, they helped us to raise £10,147,098.

From recovery to record growth

Our network of 16 shops and two coffee shops directly funds the compassionate care and support we provide to families living with a life-limiting illness. Without this support, we simply couldn't do what we do. Last year, we were delighted to report record-breaking sales for our shops totalling £3,632,167 and exceeding our expectations.

The ongoing economic uncertainty meant our shops saw record numbers of customers and transactions. In our clearance shops, where items are 50p to £3, an amazing 182,996 items were sold and saved from recycling or disposal, generating an incredible £216,685 of income.

Across the wider network of our shops, we sold 1,001,872 items, from second hand clothing and homeware to furniture and toys.

Over the past year, our furniture store has been working alongside new local suppliers to broaden our product range. This has allowed us to include more choices to cater to all budgets as well as the addition of white goods. This led to record-breaking sales here too, with income reaching £1,193,247.

Not only are we seeing an increase in footfall on the high street, but our online sales have also rocketed with a record-breaking year for our eBay, Amazon and Auction activities, raising £158,921.

£3,632,167
was raised by our network of shops

£1,193,247
was raised by our furniture store

£158,921
was raised by our online sales

We are not an NHS Hospice.
That means we must raise
£8 million
each year to continue to provide our crucial palliative and end of life care.

Thank you

We are hugely grateful to our retail teams, who work tirelessly to sort through donations, keep our shelves stocked and our tills ringing. We are also hugely grateful to the communities who shopped and donated throughout the year. This ongoing support enables us to fund our compassionate hospice care, when and where it's needed most.

How your donation can make a difference

One donation that made a huge difference was a mystery painting that was picked up by staff in one of our shops – it turned out to unknowingly be the work of a world-renowned artist and raised thousands of pounds at auction.

Our Ecommerce team spotted something special when they saw the framed artwork, so sent it across to its partners at Sheffield Auction Gallery to get their opinion.



The closing bid reached £4,200!

Experts revealed the piece had been painted by famous French impressionist painter Pierre Adolphe Valette, who tutored L.S. Lowry before he would go on to become one of Britain's most celebrated and renowned artists.

When it went to auction earlier this month it was expected to fetch between £300 and £500, but bidding exceeded way beyond the estimate before eventually reaching £4,200!

Ashgate Hospice received the total amount fee-free thanks to the continued generosity and support of Sheffield Auction Gallery, meaning the money will go further towards helping us fund vital care for the families who need the hospice most.

Emma's story

Emma Holloway, who uses a wheelchair, decided to volunteer with us as she was looking for a new volunteering opportunity in her local area of Alfreton and she saw that we were opening a new shop – that was over seven years ago, and the rest is history!

Her main duties include operating the till and serving customers and she says one of the best things about volunteering in retail is the connections and relationships she has made.

Emma does three shifts a week, plus an additional Saturday shift once a month and is a highly valued member or the Alfreton team.

She added: "I enjoy the fact that every day is different and it's never boring, I enjoy meeting lots of new people and getting to know regular customers.



Emma Holloway
Alfreton shop volunteer

"There is a wide variety of jobs within the shops and there is always somebody around for support. Every day is different and you learn new skills which could help you in the future."

New shop opened in Buxton

Around 100 patients living in the Buxton area accessed our care and support last year – from clinical care at home to our Inpatient Unit to occupational support and physiotherapy.

Now with the opening of our 16th shop there is a way for the Buxton community to support the delivery of our care to families in their local community living with a life-limiting illness.

The opening of the shop has proven to be very popular with £886 taken on the first day.



The opening of our new shop in Buxton



Mick Cook was looked after on our Inpatient Unit last summer

Penny's story

The shop has been funding care for families like Penny Cook's, whose husband Mick died on the hospice's Inpatient Unit, aged 75, after being diagnosed with incurable stomach cancer.

The Buxton couple had only just celebrated their 50th wedding anniversary the year before.

Penny said: "Within a few hours of being at the hospice, Mick looked like a different person – he was relaxed, I'd finally got my husband back.

"Being at the hospice feels like someone has wrapped a blanket around you, like you're getting a hug. It's the people who make it feel that way.

"When Mick was admitted for the second time, we knew it would be the last. My big, cuddly husband became thin, frail and not much longer for this world – in just a few days.

"We'd been together 24/7 for the last 30 years and the thought of being apart now engulfed me in sadness. But once again, the hospice's team came together and pulled out all the stops for us.

"Sleeping by Mick meant we didn't lose a minute together. I was blessed to have another eight weeks with him at the hospice before he died.

"We planned to make lots of memories when Mick was diagnosed but we didn't get the chance because he lost his mobility quickly. So being able to spend the last eight weeks together with nowhere else to be and nothing else to do was precious.

"Having nowhere else to be except by my husband's side meant the world to both of us."

Extending our support further

In response to the cost-of-living crisis, we set up a warm space to help the community of Clowne amid the cost-of-living crisis.

The initiative was backed by Derbyshire County Council, which provided Ashgate with a grant of £3,000 to fund the scheme.

The scheme was open twice daily throughout March and April. Anyone who asked for a "winter warmer" at the till point of the coffee shop received a hot drink, as well as a slice of toast, teacake or crumpet for free.

Stepping out for palliative and end of life care

On Saturday 9th July 2022, more than 2,000 people donned flashing bunny ears and their brightest clothing and took part in our annual Sparkle Night Walk.

Together, they raised £171,575 in 2022 to help fund our vital, compassionate care for patients and their loved ones living with a life-limiting illness.

A total of 135 people volunteered at the event, including many staff and volunteers from across the organisation who supported in a variety of roles, including assisting with car parking, helping out at the event village and marshaling the route.



Our 2022 Sparkle Night Walk raised £171,575

Rachel's story

Among those taking part in Sparkle Night Walk was Rachel, who walked with her sisters Helen, Hannah and Becky in loving memory of her father, Keith to raise funds for the vital care he received at the end of his life.

Before he died on 8th February 2021, aged 63, Keith was cared for at the hospice for two weeks and during that time, Rachel said the care he received was "second-to-none."

"The staff were just so attentive, compassionate and professional during the time Dad was in Ashgate's care," said Rachel.

"I remember just days before he died, one of the wonderful Healthcare Assistants explained everything to me, not in a patronising way, but in a manner which I could understand.

"Their honesty and support was so comforting at such a difficult time, and I just knew his care was in the best hands it could have been.



Rachel with her father, Keith

"Ashgate's care relies so much on fundraising and we want to do as much as we can to support Ashgate as it made our family feel as though we were at home from the moment we arrived."

Gifts in Kind

Not all the support we receive is monetary, many companies and organisations choose to support us by donating their goods or services. This support is just as valuable, and in 2022/23 gifts in kind totaled £160,829. Some of those gifts include:

- **Netflix** which continues to be donated to our Inpatient Unit by our IT provider, Central Technology
- £4,000 worth of bread donated by **Jacksons the Bakers** for our patients at the hospice and for our fundraising events
- The scoreboard at **Chesterfield Football Club** which was kindly donated by **Jason Elliott** and is worth over £16,000
- 3,300 bottles of water donated by **Nestle** for supporters taking on our fundraising events
- Pro bono quantity surveyor time to assess our new accessible entrance and courtyard from **CLoSE UK** worth £10,000.

Trust and Grants

Without funding from trusts and foundations, we wouldn't be able to make a difference to the lives of so many people living with a life-limiting illness and their loved ones. In 2022/23, we received £740,424 from a wide range of charitable funds. This included:

- £122,784 secured from nine trusts, the largest being £45,000 from **CRASH** to pay for the renovation of our courtyard and accessible entrance*
- £49,834 from **BBC Children in Need** to enable our Supportive Care Team to make an incredibly positive difference to the lives and futures of the children and young people facing grief and loss living in Bolsover
- £10,000 secured from **Westfield Health Charitable Foundation** and £10,250 secured from **The Gordon Bramah Charitable Settlement** to pay for syringe drivers to help to keep our patients pain free on our Inpatient Unit
- £470,617 from the **Laura John Foundation** to fund the provision of children's bereavement services over many future years.

*As well as the significant donation of £45,000 from **CRASH** Charity, we also received donations of between £1,000 and £20,000 from other foundations and charities, including:

The **Garfield Weston Foundation**, **Edward Gostling Foundation**, **Zachary Merton and George Woofindin Convalescent Trust**, **February Foundation**, **Hobson Charity**, and the **Welcome Club** of Dronfield.

This meant that the project was funded entirely by grants, donations, and through gifts in kind from the patrons of **CRASH** Charity and local businesses.

We also received a grant of £20,000 from the **Albert Hunt Trust** towards the running costs of the Hospice.



Before and after photos of the new accessible entrance and courtyard renovation

Our corporate partners

Thank you to our corporate partners, who went above and beyond in supporting us last year. We partnered with several fantastic organisations to help families living with a life-limiting illness, including:

- **Kingfield Electronics**, who raised a total of £13,500 via monthly contributions. They increased their monthly donation to £1,500 in January after receiving a tour of the hospice and being awarded a framed nurses tunic
- **Technique Learning Solutions** for sponsoring the Hospice's flagship Sparkle Night Walk event
- **Harold Lilleker & Son's Funeral Directors** for their ongoing support of fundraising events and initiatives, including Sparkle Night Walk and Light up a Life. A special thank you also goes to them for developing the idea of the Tractor Fest event
- **FlameCare** supported Ashgate by donating every time they signed up a new customer, raising £4,228
- **Whittam Cox Architects**, who raised £6,000 by donating £500 a month
- **Graysons Solicitors** for their generous ongoing sponsorship and support of our Spring Appeal
- **£10,500** raised from multiple businesses who sponsored of the stars that adorn the front of the hospice building in Old Brampton throughout December.



Kingfield Electronics

TECHNIQUE
For ALL your engineering training needs

Harold Lilleker & Sons Ltd
INDEPENDENT FAMILY FUNERAL DIRECTORS
Tel: 01246 277095

Whittam Cox ARCHITECTS

GRAYSONS SOLICITORS

FlameCare



The total raised by BRM Solicitors was £23,495

Make a Will Month

We have once again been grateful for the support of **BRM Solicitors**, who encouraged local people to make a will and instead of paying a fee to the solicitors, they were encouraged to make a donation to the hospice.

During Make a Will Month, which took place in April, a total of 175 people made their will with BRM while making a suggested donation of £75 for a single will or £150 for a mirror will for a couple.

The total amount raised by BRM Solicitors was £23,495 – the largest amount the firm have raised for any charity in a single month.

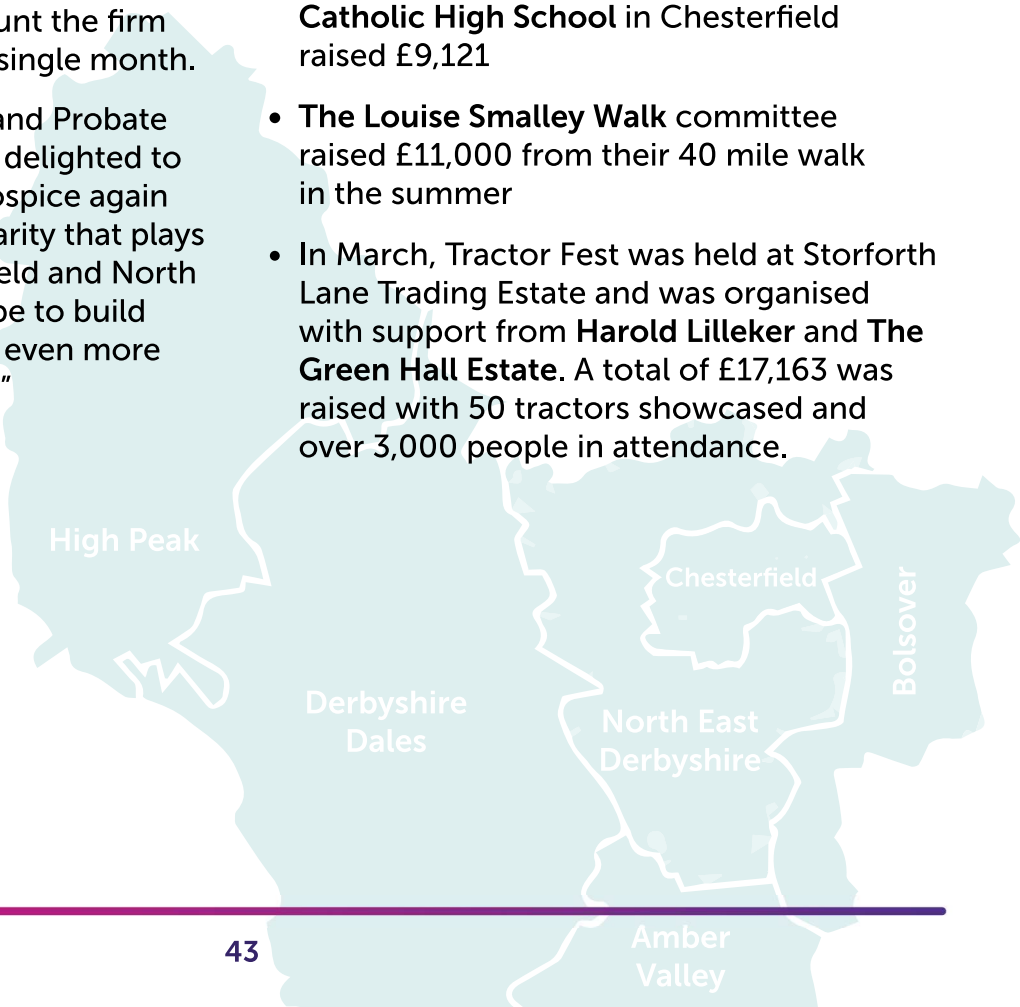
Rob Woodhead, Head of Wills and Probate at BRM Solicitors, said: "We are delighted to be teaming up with Ashgate Hospice again this year to raise funds for a charity that plays such a key role in the Chesterfield and North Derbyshire community. We hope to build on this year's success and raise even more money for the hospice in 2023."

739 fundraising tins were distributed across shops and pubs and raised an incredible **£38,937**

Fantastic fundraisers right across the region

Over the past year, we have been overwhelmed by the ongoing support from fundraisers across North Derbyshire. Their ongoing dedication to funding our crucial care and support is demonstrated through their tremendous efforts:

- **Challenge Derbyshire** The initiative began in 2015 with an ambition to raise £1m, which they achieved by 2019. The initiative continues to provide outstanding support, including the Challenge Derbyshire Ball at the Dome in Buxton in February which raised £165,000 of which Ashgate will receive £82,500
- North Derbyshire turned pink in October for Go Pink Week and raised £8,146
- In the run up to Christmas, thirty-six hampers were beautifully wrapped by staff and volunteers, with the content primarily donated by **Spar**. These were given to organisations to run their own raffles and raised £3,489
- During the last academic year **St Mary's Catholic High School** in Chesterfield raised £9,121
- **The Louise Smalley Walk** committee raised £11,000 from their 40 mile walk in the summer
- In March, Tractor Fest was held at Storforth Lane Trading Estate and was organised with support from **Harold Lilleker** and **The Green Hall Estate**. A total of £17,163 was raised with 50 tractors showcased and over 3,000 people in attendance.



Fundraising in memory

Last year we provided two very special ways for supporters to celebrate and honour the lives of their loved ones. Our Forget-Me-Not Appeal, sponsored by Graysons Solicitors, invited supporters to dedicate a flower in memory of their loved ones. Over 1,200 flowers then formed a beautiful display at Renishaw Hall, helping to raise £62,850.

Then in December, our annual Light up a Life event took place, this time with a memorial lantern procession which concluded with a touching ceremony within the grounds of our hospice at Old Brampton. The appeal raised £27,100, including generous sponsorship from Harrold Lilleker and Sons Funeral Director.

Chloe's story

We were pleased to receive the support from five families who shared stories about the care their loved ones received to help us promote our Light up a Life campaign.

Among them was Chloe Rumsey, whose mum, Claire Sivorn, a teaching assistant from Chesterfield, was diagnosed with secondary cancer in October 2020.

Chloe will always be grateful to the hospice after we ensured her mum was able to fulfil her wish of getting married to her partner Craig before she died, aged just 55.

She said: "Everyone says it about their own but my mum really was one of a kind – she was amazing.

"My mum was a patient in Ashgate's Inpatient Unit for a few weeks after being in hospital with a blood clot in her leg.



Chloe with a photo of her mum, Claire Sivorn

"She had 24-hour care and a physio which enabled her to build the strength to stand and walk so it was safe for her to come home.

"The support they provided with the wedding meant the world to Mum as it took a little stress away for her.

"Although her original plans changed, it meant she could get married and that is all she wanted."

As well as the care Claire received, Chloe has received counselling from our Supportive Care team.

Her counsellor, Annie, made a huge difference. Chloe says it helped to "talk to someone about what mum was dealing with and what we were going through as a family".

She added: "It was a very confusing time, and it still is, but she listened and helped me try and understand. I'm grateful she was there for me to talk to."

Gifts in wills

Over 30 people generously left us a gift in their will last year. This resulted in us receiving an incredible £1,261,890 in cash during 2022/23 to help fund our crucial, compassionate hospice care. This amount is increased to £2,688,561 in our financial statements due to a requirement in charity accounting rules, to accrue for legacies received post year end where there was sufficient certainty and entitlement at the year end date.

In 22/23, we were fortunate to be supported by BRM Solicitors and Graysons Solicitors who held free will months and weeks in which they waived their will-making fee and instead asked for donations to Ashgate Hospice. This not only helps to raise immediate funds for the hospice, but also helps to secure legacy gifts for the future. We are looking forward to working with these solicitors in future years, as well as welcome new ones as partners of the hospice.

Finally, this year we are also pleased to have partnered with Guardian Angel to offer free online will-making services to our supporters. This was launched in January 2023 and so far, six people have completed their wills via the site which is estimated to bring in £22,000 in future legacy income.



One in five of our patients is cared for by a gift left in a will

Lottery

Ashgate Hospice operates raffles and a weekly lottery as a way for people to support us. These activities are regulated by The Gambling Commission. In 2022/23, our lottery raised £710,425. We currently have around 8,000 active players with 12,200 numbers at £1 per week.



Every penny really does make a difference.

In fact, last year we received **21,375 donations of £10 or less.** Together, this raised

£142,826

How we're governed

Governance and Trusteeship at Ashgate

Our Board of Trustees consists of volunteers who bring a range of professional expertise and life experiences to shape the direction of our strategic approach. Trustees are not involved in the day-to-day management of the charity. They delegate this responsibility to the Chief Executive and the Leadership Team. They hold the Chief Executive to account, ensuring that the hospice is managed effectively and in line with the highest standards of quality, safety and customer service.

Trustees undertake a full induction and take part in the role-specific essential training provided by the hospice for all staff and volunteers. Trustees also take part in Quality Visits to clinical services. They shadow both clinical and non-clinical teams to gain assurances about performance and quality, to introduce themselves to staff and volunteers and to increase their knowledge of our services.

Our Ashgate Governance Framework sets out a robust hospice-wide governance and assurance structure. This has fully developed operational alignment and an emphasis on the 'golden thread' from frontline to Board.

Our Board of Trustees

Our Trustees are all volunteers and they are responsible for ensuring that the organisation is effectively managed and well led. Our Chief Executive and the Leadership Team report directly to the Board.



Penny Brooks
Chair of the Board of Trustees



Dr Ruth Cooper
Vice Chair



Kirsty McMillan
Vice Chair



Malcolm Pope
Vice Chair



Lynn Andrews



Nigel Myhill



Claire Pilsworth



Tim Robinson



Dermot Toberty



Victoria Webb



Kirstie Wilson

Ashgate Hospice

Registered Charity No. 700636

Our Leadership Team

Our Leadership Team is responsible for managing all aspects of our work here at Ashgate.



Barbara-Anne Walker
Chief Executive



Matt Corbishley
Director of People, Engagement and Performance



Heidi Golden
Head of Corporate Governance



Rod Ismay
Director of Finance and Estates



Dr Sarah Parnacott
Consultant in Palliative Medicine



Peter Stone
Director of Income Generation



Hayley Wardle
Director of Quality and Patient Care

For more information, go to www.ashgatehospice.org.uk/our-people

There are three committees which report directly to the Board. Their membership is drawn from the Trustees and senior leaders. The Healthcare Quality Committee includes clinical quality and safety, evidence-based care and patient experience in its portfolio. The People, Engagement and Performance Committee has a focus on our staff and volunteer workforce, on information governance, IT and digital development and community engagement. The Finance and Strategy Committee is charged with governance of our income generation, our reserves and investments, procurement and estate management.

This framework enables the Board meetings and development days to focus on long-term strategy, oversight of the charity's performance, risk management and sustainability. The Board and the Committees meet on a quarterly basis.

Public benefit

The Trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the hospice's objectives and in planning its future activities. In particular, the Board of Trustees considers how planned activities will contribute to the objectives they have set. The Trustees are confident that this report appropriately reflects public benefit in some detail when describing the purpose, objectives and strategic plans, services, service developments and future plans for continued or enhanced service delivery.

Fundraising standards

Ashgate Hospice's approach to fundraising is focused on supporter care through extensive and regular training of staff and volunteers. Ashgate Hospice is registered with the Fundraising Regulator and ensures its fundraising is legal, open, honest and respectful. We monitor third parties who fundraise for us by asking supporters for feedback, providing training and following up any complaints. The charity received no complaints during the year.

As part of our approach, policies and standards, we ensure that we protect vulnerable people and other members of the public from inappropriate behaviour. We train everyone involved in fundraising and clear processes are in place to monitor and manage every interaction. In the past year, we have not uncovered any failure by staff, volunteers, professional fundraisers or commercial participators to comply with our policies and standards.

Registered with FUNDRAISING REGULATOR

Financial review

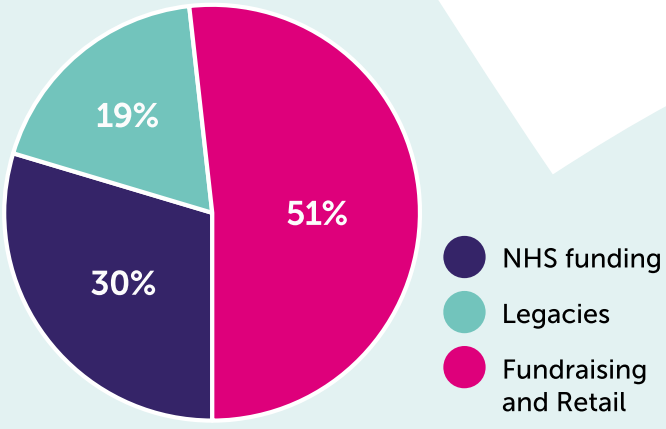
A firm foundation

2022/23 has been a transformational year in terms of our funding. It began precariously but has ended on a significant note of optimism for the future.

In March 2022, the Hospice Board approved a £2.1m deficit budget for 22/23 – this had obvious risk and would have necessitated drawing on our tight reserves. It was, however, agreed to maintain our well integrated portfolio of services, while we engaged in longer term funding discussions with Joined Up Care Derbyshire (JUCD).

JUCD recognised the value and importance of our hospice services within the wider healthcare system and agreed to provide a one off £0.9m for 22/23 from their Hospice Sustainability Fund. This was a supplement to our underlying statutory funding.

As a result of continued partnership dialogue, and despite their own financial challenges, JUCD were sufficiently assured as to the funding risks in the hospice and Ashgate's criticality to the wider system, that they initiated a £1.5m recurrent increase to our annual contract value for 23/24 onwards. That is now firmed up in a five-year contract as opposed to previous one-year contracts.



This will still mean that statutory funding covers only 32% of our total cost base, but this is a massive vote of confidence in the future of Ashgate and the need for our services. Inflationary pressures on our costs and on our donors, mean that we still have a £0.5m deficit budget for 23/24, but we are injecting fresh momentum into a strategic review of our functions in order to elevate the hospice back out of deficit.

22/23 in more detail

Despite a £2.1m deficit budget for 22/23, the actual result was much better, with a £1.5m surplus. The £3.6m improvement reflected three main themes: negotiation of improved funding, a large restricted donation to fund future years' children's bereavement services and a large adjustment to legacy income due to charity accounting requirements.

As explained above, the Hospice secured a £0.9m increase in JUCD funding which has become a stepping stone to a larger increase for 23/24 onwards. The Hospice has also successfully engaged in the first year of the national pilot of Virtual Wards, taking on new staff and new costs in the process, but securing an extra £0.2m funding in 22/23 (you can read more about this new service on page 21). Strong donations of goods and their sale led to £0.2m extra contribution from retail activities and staff costs were £0.1m below budget due to the complex resourcing environment.

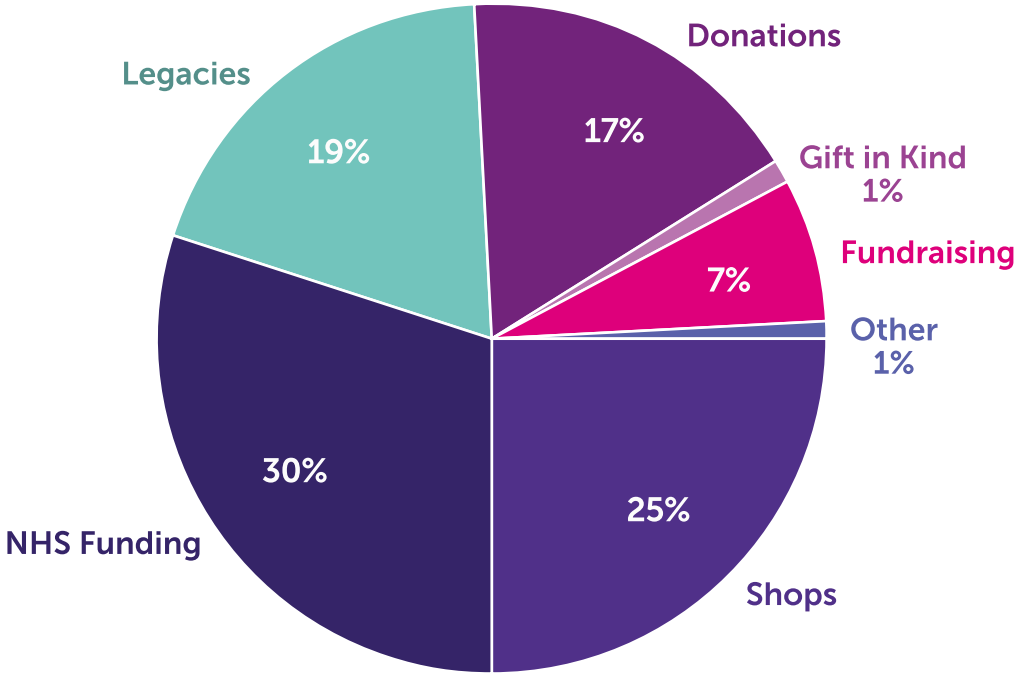
The restricted donation for children's bereavement services was £0.5m and has had to be accounted for in full in the year of receipt even though it will be used to cover increased costs of new roles in future years. Legacy income was £1.4m above budget at £2.7m due to an increase in the year end debtor figure reflecting legacies received or expected in the subsequent year, but where there was entitlement and high likelihood at year end.

Trusts and trust

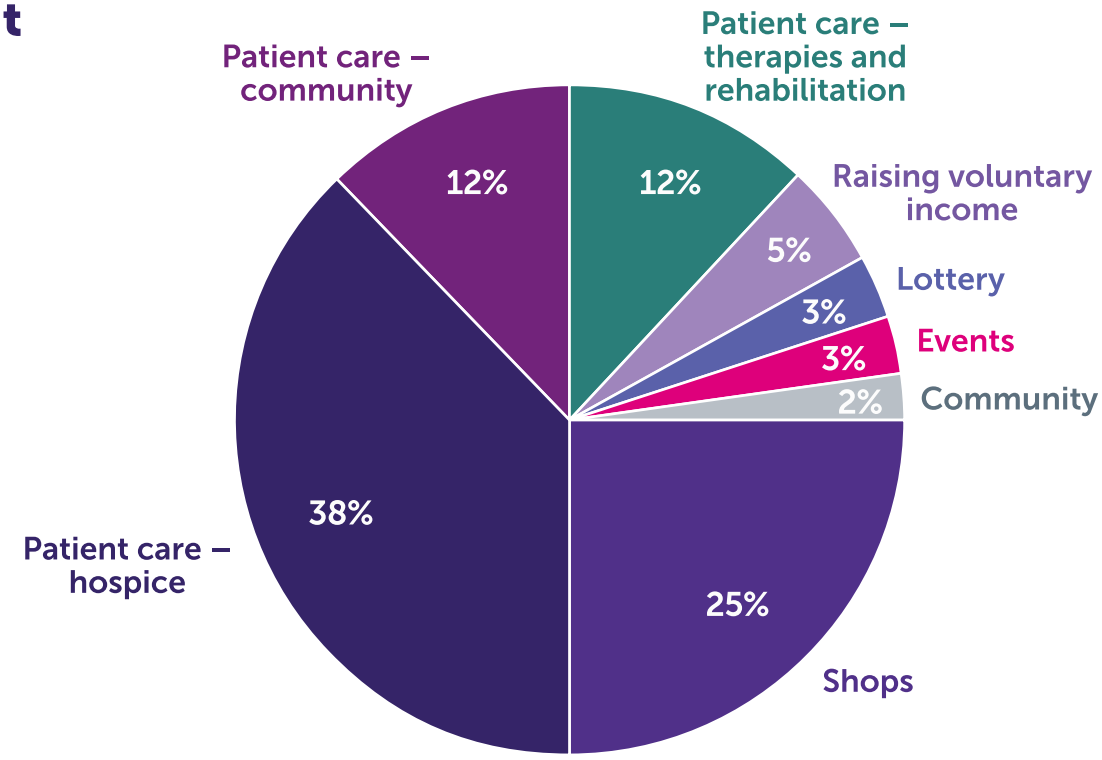
Our trust in our staff and volunteers, our trust in our supporters and the trust that JUCD has demonstrated in us, manifest themselves in many other positive outcomes. Early in 22/23 we knew that we needed to enhance our accessibility at the main hospice site, but we did not have the funds to do the necessary building work. Our Trust and Grants Team were able to share our story with supporters and trust and grant funders with a wonderful outcome of complete funding for the required works. The project is explained further on page 41.

How we raised our money

For every £1 we raise:
62p goes towards delivering and improving our care and services.
The other **38p** goes towards generating future income.



How we spent our money



Reference and Administrative Information

Charity Name: Ashgate Hospicecare
Charity Registration Number: 700636
Company Registration Number: 02263980

Registered Office and Operational address: Ashgate Road, Old Brampton, Chesterfield, S42 7JD

This Trustees' Report also meets the requirements of a Directors' Report for Companies Act purposes.

Directors and Trustees

Penny Brooks, Chair
Malcolm Pope, Vice Chair
Kirsty McMillan
Nigel Myhill
Dermot Toberty
Nicholas Jeffrey, Chair (sadly died 20/12/2022)
Daniel Ratchford, Vice Chair (resigned 23/03/2023)
Claire Newton (appointed 01/07/2022)
Ruth Cooper (appointed 29/09/2022)
Tim Robinson (appointed 29/09/2022)
Victoria Webb (appointed 15/12/2022)
Kirstie Wilson (appointed 15/12/2022)
Lynn Andrews (appointed 23/03/2023)

Leadership Team

Matt Corbishley
Helen Furnivall (Resigned 06/05/2022)
Rod Ismay
Dr Sarah Parnacott
Peter Stone
Barbara-Anne Walker
Hayley Wardle

Company Secretary

Heidi Golden

Auditors

Azets Audit Services Limited, Triune Court, Monks Cross Drive, York, YO32 9GZ

Bankers

Barclays, 1 St. Paul's Place, 121 Norfolk Street, Sheffield, S1 2JW

Governing Document

Ashgate Hospicecare is a charitable company limited by guarantee, incorporated on 2 June 1988 and registered as a charity in England and Wales on 14 September 1988.

The charity's objects are specifically restricted to the relief of sickness and the preservation of health among people residing permanently, or temporarily, in North Derbyshire.

The company was established under a Memorandum of Association and is governed under its Articles of Association which were revised and amended in 2016, to ensure that appropriate consideration was given to tenures and succession planning for the Chair and Trustees.

Related Parties

Ashgate Hospicecare Shops Limited is a subsidiary of Ashgate Hospicecare. During 2022/23, it operated fifteen shops and three coffee shops, the profits of which are spent wholly supporting the work of Ashgate Hospicecare.

Ashgate Hospicecare is a partner and shareholder in Hospice Quality Partnership (HQP). HQP was set up to support independent hospices with procurement, benchmarking and collaboration regarding the improvement of value and reduction of cost, as well as the potential to generate new income through dividends in the future. The hospice sees significant benefits in being a Partner/Shareholder with HQP and is supportive of the company's aims.

Financial Review

The consolidated net surplus before investment movements and tax for 22/23 is £1,639k compared to a net deficit of £492k in 21/22. The improvement of £2,131k is almost exactly explainable by an increase in legacy income of £2,125k. That increase is partly a reflection of higher legacy receipts within the year, but is mainly due to legacy SORP accounting and its requirement to accrue for post year end legacies where there were was entitlement and high likelihood as at the year end.

Naturally, there are many other variances line by line. These broadly net off against each other.

Within donations, unrestricted income fell by £108k, but restricted income rose by £503k driven by a one-off donation of £472k to fund bereavement services for children. This will cover the incremental costs of such services for many years ahead, but has to be recognised in full in the year of receipt. This is a very exciting development for the breadth of services.

Retail income rose by £381k on the back of strong donations, strong brand awareness and increased recognition of Hospice shops as both a value and quality retailer. The cessation of any Covid related funding in 22/23 meant a drop of £894k in that area now that normal trade and service has resumed. Income from charitable activities was £1,264k higher. This mainly reflected additional funding from Joined Up Care Derbyshire who recognised the underlying year on year funding challenge and the distorting effect of legacy accounting. All these variations in income closely matched an increase in costs of £1,232k. This increase reflected inflationary pressures on salaries, consumables and energy, plus higher new goods purchases linked to higher sales of such new goods. It also reflected stronger recruitment and retention after a very challenging period for resourcing as well as the cost of retail, fundraising and events returning to full service after all the restrictions of Covid.

Total funds have increased by £1,549k due to the surplus above, partly offset by a decrease in investment valuations of £61k.

Investment Policy

The hospice has a portfolio of long-term investments, deposit accounts and an interest-bearing current account, to ensure appropriate liquidity of funds. Investments were £966k at 31 March 2023, down 6% from 31 March 2022. With regard to the ethical investment element of the Policy, the Trustees do not wish to adopt an exclusionary policy when considering prospective investments, or potential donation receipts. However, individual investment proposals, and donations, may be rejected if they are perceived to be in conflict with the purpose of the Charity.

Reserves Policy

Reserves are held to give the hospice a financial buffer against shocks to income and expenditure. They are necessary for protecting services in the event of a short-term disruption to normal income streams and they ensure the hospice has funds available to cater for capital works.

The Hospice implemented a risk-based reserves policy in 19/20. This has supported subsequent years' strategic decision making and has been subject to regular review in the Finance & Strategy Committee.

Whilst total funds have increased by 17% (£1,549k) from £9,371k to £10,921k, in line with the surplus for the year, free reserves have reduced by 21% (£852k) from £4,070k to £3,218k mainly due to the legacy debtor of £1,861k (21/22 – £434k) no longer being recognised in free reserves in either year – it is not a liquid debtor at year end, and although accrued under charity SORP, a large part of it may not arise in cash for many months. There is also an increase of £405k in the offset for restricted funds and designation of £501k for the budgeted deficit in 23/24.

The risk-based target for free reserves on 31st March 2023 was £2,144k (21/22 – £2,797k) meaning that the hospice was at 150% of target (21/22 – 146%). Whilst there is an expected increase in expenditure in 23/24, the free reserves target has reduced due to the certainty of the increased funding from JUCD. Free reserves are net of restricted funds and designated funds. The purpose of such funds is narrated further in Note 25 of the accounts.

Financial Review continued

Senior Management Remuneration

Pay awards for the workforce are recommended to the Board by the Chief Executive with supporting evidence and rationale from the Leadership Team. No recommendations are made by the Chief Executive or Leadership Team for setting their own pay or remuneration, other than where an explicit recommendation or offer is made by them to forfeit any award. Instead, the Board of Trustees take responsibility for making any such decisions for key senior management personnel based on organisational performance, affordability and taking account of sector benchmarks. The HR team undertake regular pay benchmarking exercises for the workforce in general, using the independent benchmarking tool, Cendex. This includes review of salaries for Chief Executive and Leadership Team.

Principal Risks and Uncertainties

The Board of Trustees has established processes to assess business and corporate risk. This involves identifying the types of risk the charity faces, prioritising them in terms of potential impact and the likelihood of occurrence, and identifying means of mitigating the risks. This assessment is monitored and updated on a regular basis.

The corporate risk register and the operational risk registers are monitored by the Risk Review Group which meets quarterly to ensure effective operational management of risk. Operational risk registers are, in turn, reported to the three Board Committees to ensure effective oversight and escalation. The corporate risk register is reported to the Board to ensure that Trustees are fully appraised of any strategic risks and the actions being taken to mitigate them.

A wide range of policies and procedures have been introduced to minimise risk and ensure compliance with legislation and CQC standards. Specific policies relating to risk include management guidelines, standing financial instructions, health and safety, information governance, clinical issues and employment.

Going Concern and Cashflow

The Trustees have considered the impact of the global economic situation, UK inflation, international tensions and the legacy of COVID-19 on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2025 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Statement of Trustees' Responsibilities

The trustees (who are also directors of Ashgate Hospicecare for the purposes of company law) are responsible for preparing the Trustees' Annual 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 trustees 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 trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2019 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees 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.

In so far as the trustees are aware:

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

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Auditors

The auditor, Azets Audit Services Limited, is deemed to be reappointed under section 487(2) of the Companies Act 2006.
By Order of the Board



14/12/2023

Penny Brooks
Chair of Trustees
Chesterfield

Independent Auditor's Report to the Members of Ashgate Hospicecare

Opinion

We have audited the financial statements of Ashgate Hospicecare (the "parent charity") and its subsidiary (the "group") for the year ended 31 March 2023, which comprise the Consolidated Statement of Financial Activities, the Group and Charity Balance Sheets, the Consolidated Statement of Cash Flows and the related Notes to the Financial Statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and parent group and parent charity's affairs as at 31 March 2023 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on the group and parent charity's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

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

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report (incorporating the strategic report and the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the trustees' report (incorporating the strategic report and the directors' report) has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and parent charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

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

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of trustees

As explained more fully in the trustees' responsibilities statement, the Trustees 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 they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Independent Auditor's Report to the Members of Ashgate Hospicecare

Our responsibilities for the audit of the financial statements

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

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

Extent to which the audit was considered capable of identifying irregularities, including fraud

Irregularities, including fraud, are instances of non-compliance with laws and regulations. We design procedures in line with our responsibilities, outlined above and on the Financial Reporting Council's website, to detect material misstatements in respect of irregularities, including fraud.

We obtain and update our understanding of the entity, its activities, its control environment, and likely future developments, including in relation to the legal and regulatory framework applicable and how the entity is complying with that framework. Based on this understanding, we identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. This includes consideration of the risk of acts by the entity that were contrary to applicable laws and regulations, including fraud.

In response to the risk of irregularities and non-compliance with laws and regulations, including fraud, we designed procedures which included:

- Enquiry of management and those charged with governance around actual and potential litigation and claims as well as actual, suspected and alleged fraud;
- Reviewing minutes of meetings of those charged with governance;
- Assessing the extent of compliance with the laws and regulations considered to have a direct material effect on the financial statements or the operations of the group through enquiry and inspection;
- Reviewing financial statement disclosures and testing to supporting documentation to assess compliance with applicable laws and regulations;
- Performing audit work over the risk of management bias and override of controls, including testing of journal entries and other adjustments for appropriateness, evaluating the business rationale of significant transactions outside the normal course of business and reviewing accounting estimates for indicators of potential bias;
- Performing audit work over the timing and recognition of income and in particular whether it has been recorded in the correct accounting period.

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

Use of our report

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

Alan Sidebottom

14/12/2023

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Alan Sidebottom (Senior Statutory Auditor)
For and on behalf of Azets Audit Services Limited
Chartered Accountants
Statutory Auditor

Triune Court
Monks Cross Drive
York
YO32 9GZ

Consolidated Statement of Financial Activities

Incorporating a Consolidated Income and Expenditure Account

For the year ended 31 March 2023

		Unrestricted Funds	Designated Funds	Restricted Funds	2023 Total	2022 Total
Income:		£	£	£	**£**	£
Donation and legacies						
Donations	(2)	1,896,134	-	715,720	**2,611,854**	2,217,064
Legacies	(3)	2,688,561	-	-	**2,688,561**	563,881
		4,584,695	-	715,720	**5,300,415**	2,780,945
Income from other trading activities:						
Shops	(4)	3,632,167	-	-	**3,632,167**	3,251,641
Fundraising	(5)	1,047,672	-	-	**1,047,672**	1,020,660
Other	(6)	166,844	-	-	**166,844**	114,105
		4,846,683	-	-	**4,846,683**	4,386,406
Investment income	(7)	13,237	-	-	**13,237**	1,372
Income from charitable activities	(8)	4,277,317	-	-	**4,277,317**	3,012,897
Income from COVID-19 Grants	(9)	-	-	-	-	880,154
Income from furlough	(10)	-	-	-	-	13,350
Total income		13,721,932	-	715,720	**14,437,652**	11,075,124
Expenditure:						
Costs of raising voluntary income	(11)	661,298	-	-	**661,298**	579,404
Fundraising & other trading costs	(11)	4,160,117	-	-	**4,160,117**	3,652,729
Costs of charitable activities	(11)	7,947,754	-	29,977	**7,977,731**	7,335,066
Total expenditure		12,769,169	-	29,977	**12,799,146**	11,567,199
Net movement in funds before investment gains		952,763	-	685,743	**1,638,506**	(492,075)
Unrealised (losses) / gains on investments	(16b)	(61,019)	-	-	**(61,019)**	19,941
Corporation tax	(24)	(28,000)	-	-	**(28,000)**	-
Net income / (expenditure)		863,744	-	685,743	**1,549,487**	(472,134)
Funds transfer	(25)	280,877	-	(280,877)	-	-
Designated funds transfer		(501,000)	501,000	-	-	-
Net movement in funds		643,621	501,000	404,866	**1,549,487**	(472,134)
Reconciliation of funds						
Total funds brought forward		9,026,506	100,000	244,811	**9,371,317**	9,843,451
Total funds carried forward	(25)	9,670,127	601,000	649,677	**10,920,804**	9,371,317

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. A fully detailed Consolidated Statement of Financial Activities for the year ended 31 March 2023 is shown in note 30. The Statement of Financial Activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

Balance Sheets

At 31 March 2023

		2023 Group	2022 Group	2023 Charity	2022 Charity
Fixed assets		£	£	£	£
Tangible assets	(15)	**4,945,247**	4,876,608	**4,812,554**	4,746,443
Investments	(16 a&b)	**965,761**	1,026,780	**965,765**	1,026,784
		5,911,008	5,903,388	**5,778,319**	5,773,227
Current assets					
Stock of finished goods		**79,627**	43,859	**39,631**	2,572
Debtors	(17)	**2,292,033**	2,194,386	**3,049,497**	3,241,983
Cash at bank and in hand		**3,974,513**	2,408,861	**3,090,366**	1,709,015
		6,346,173	4,647,106	**6,179,494**	4,953,570
Creditors: Amounts falling due within one year	(18)	**(981,377)**	(824,177)	**(683,246)**	(620,035)
Net current assets		**5,364,796**	3,822,929	**5,496,248**	4,333,535
Total assets less current liabilities		**11,275,804**	9,726,317	**11,274,567**	10,106,762
Creditors: Amounts falling due after more than a year	(19)	**(355,000)**	(355,000)	**(355,000)**	(355,000)
Net assets		**10,920,804**	9,371,317	**10,919,567**	9,751,762
Unrestricted charity funds					
Unrestricted general funds		**9,670,127**	9,026,506	**9,668,890**	9,406,951
Unrestricted designated funds		**601,000**	100,000	**601,000**	100,000
Restricted funds		**649,677**	244,811	**649,677**	244,811
Total funds	(25 & 26)	**10,920,804**	9,371,317	**10,919,567**	9,751,762

The financial statements were approved by the Board of Directors and are signed on its behalf by:-



14/12/2023

Penny Brooks, Chair of Trustees

Company Registration No. 02263980

The notes on pages 61 to 82 form part of these financial statements.

Statement of Cash Flows

For the year ended 31 March 2023

		2023 £	2022 £
Cash generated by operating activities	(28)	**2,025,254**	787,807
		2,025,254	787,807
Cash flows from investing activities			
Interest received		**13,237**	1,372
Purchase of tangible fixed assets		**(466,242)**	(249,237)
Cash used in investing activities		**(453,005)**	(247,865)
Cash flows from financing activities			
Repayment of finance leases		**(6,597)**	(19,790)
Cash used in financing activites		**(6,597)**	(19,790)
Increase in cash and cash equivalents in the year		**1,565,652**	520,152
Cash and cash equivalents at the beginning of the year		**2,408,861**	1,888,709
Cash and cash equivalents at the end of the year		**3,974,513**	2,408,861

Notes to the financial statements

For the year ended 31 March 2023

1. Accounting policies

a. Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Accounting Practice.

Ashgate Hospicecare 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.

The financial statements are presented in sterling which is the functional currency of the charity and group and rounded to the nearest £1.

b. Company status

The charity is a company limited by guarantee and has no share capital. The charity is registered in England and Wales, with company number 02263980 and charity number 700636. The members of the charity are the Trustees named on page 50. 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.

c. Basis of consolidation

The consolidated financial statements include the results of Ashgate Hospicecare and its wholly owned subsidiary Ashgate Hospicecare Shops Limited on a line by line basis.

A separate Statement of Financial Activities for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

The surplus for the year for the charity was £1,167,803 (2022 deficit £463,961).

d. Going concern

The Trustees have considered the impact of the global economic situation, UK inflation, international tensions and the legacy of COVID-19 on the group and charity's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2025 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the group and charity remain a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Notes to the financial statements

For the year ended 31 March 2023

e. Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees 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 Trustees 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.

f. Critical accounting estimates and areas of judgment

In the application of the group's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors considered to be relevant.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised, if the revision affects only that period, or in the period of the revision and future periods if the revision affects both current and future periods.

The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities are outlined below:

Depreciation of tangible assets

Depreciation policies have been set according to management's experience of the useful lives of the assets in each category, something which is reviewed annually.

The charity incurs expenditure on creating tangible fixed assets for use in the charity with costs being incurred over a number of months. The Trustees believe it is possible to segregate these costs into identifiable projects, and as such no depreciation is charged on that project until it is brought into use.

Legacies

Legacies are recognised as income when probate has been granted, the charity has established its entitlement to the funds and where sufficient information is available to allow it to measure its entitlement with reasonable accuracy.

Notes to the financial statements

For the year ended 31 March 2023

g. Income

All income is recognised when the charity and group have entitlement to the income, it is probable that the income will be received and the amount of income receivable can be measured reliably.

Donated services are recognised when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and the economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised. Please refer to the Trustees' report for more information about their contribution.

Donations and gifts towards the running cost of the hospice are treated as income when received. Gifts in kind and donated goods are valued where the item is specifically identified and some reliable form of valuation is available. Goods donated for sale are not accounted for until the point of sale. On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Government and other grants are included in the SOFA in the year in which they are receivable and allocated to the necessary funds accordingly, and would be deferred if relating to services in a future period.

Lottery income is accounted for in respect of those draws that have taken place in the year. Income received from draws after the balance sheet date is deferred to the relevant accounting period.

Trading income is recognised at point of sale for both donated and purchased goods.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

Retail grants received after the first national lockdown have been recognised in the period in which they relate to.

h. Expenditure

Expenditure is recognised on an accruals basis inclusive of any irrecoverable VAT. Costs of generating funds comprise the costs associated with attracting voluntary income. Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them, which have been apportioned based on headcount and activity.

Allocation of support costs

Support costs are those functions that assist the work of the charity and group but do not directly undertake charitable activities. Support costs include executive costs, HR & IT costs, other support functions, depreciation and governance costs which support the services providing care to patients and families. These costs have been allocated between the costs of raising funds and expenditure on charitable activities on the basis set out in notes 11 and 12.

Notes to the financial statements

For the year ended 31 March 2023

i. Tangible fixed assets and depreciation

All assets costing more than £1,000 are capitalised, except for computer equipment where all items with a value of £100 or more are capitalised.

All fixed assets are included at cost, net of depreciation and any provision for impairment. Depreciation is calculated to write down the cost of fixed assets by equal annual instalments over the following periods:-

Freehold buildings	2% straight line per annum
Fixtures and fittings	25% straight line per annum
Motor vehicles	25% straight line per annum
Buildings extension	2% straight line per annum
IT hardware	33% straight line per annum
Plant	10% straight line per annum

Freehold land is not depreciated

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in the statement of financial activities.

j. Fixed asset investments

Investments are a form of basic financial instruments and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing market price, except for shares in the trading subsidiary which are carried at cost. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

All gains and losses are taken to the Statement of Financial Activities as they arise.

k. Stock

Stocks of retail goods are included at the lower of cost and net realisable value. Donated items of stock for resale or distribution are not included in the financial statements until they are sold or distributed because the Trustees consider it impracticable to be able to assess the amount of donated stocks as there are no systems in place which record these items until they are sold and undertaking a stock take would incur undue cost for the charity which would far outweigh the benefits. Additionally, due to the agent arrangements present for the purposes of retail gift-aid, some donated items of stock held at the year end are not technically an asset of the charity and therefore no value can be assigned to them.

l. 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.

m. 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.

Notes to the financial statements

For the year ended 31 March 2023

n. Creditors and provisions

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

o. Leases

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred.

Leases are classified as finance leases whenever the terms of the lease transfer substantially all the risks and rewards of ownership to the lessees. All other leases are classified as operating leases.

Assets held under finance leases are recognised as assets at the lower of the assets fair value at the date of inception and the present value of the minimum lease payments. The related liability is included in the balance sheet as a finance lease obligation. Lease payments are treated as consisting of capital and interest elements. The interest is charged to the statement of financial activities so as to produce a constant periodic rate of interest on the remaining balance of the liability.

p. Pensions

The pension costs charged in the financial statements represent the contributions payable by the charity during the year in accordance with FRS 102. Employees who joined the hospice before February 2020 and who were already active members of the NHS Pension Scheme are permitted to continue contributing to the Scheme. Rates are set by the NHS Pensions Agency. The scheme is a multi-employer scheme not designed to identify the assets and liabilities attributable to the Charity, so in accordance with FRS102 the scheme is accounted for as a defined contribution scheme.

q. Employee benefits

The costs of short-term employee benefits are recognised as a liability and an expense, unless those costs are required to be recognised as part of the cost of stock or fixed assets.

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the group is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

r. Taxation

The Hospice is a registered charity and as such is a charity within the meaning of schedule 6 of the Finance Act 2010. Accordingly, the Hospice is potentially entitled to tax exemption under part 11 of the Corporation Tax Act 2010 or section 256 of the Taxation of Chargeable Gains Act 1992 in respect of income and gains arising. Given this, no tax charge arises on the charity.

The trading subsidiary is liable to corporation tax on its chargeable profits. Current tax, including UK Corporation and foreign tax, is provided at amounts expected to be paid (or recovered) using the tax rates and laws that have been enacted or substantially enacted at the balance sheet date.

Notes to the financial statements

For the year ended 31 March 2023

2. Donations

	Unrestricted	Restricted	2023 Total	Unrestricted	Restricted	2022 Total
	£	£	£	£	£	£
General donations	**773,880**	**5,064**	**778,944**	933,767	17,765	951,532
In memory	**305,570**	**1,100**	**306,670**	319,809	2,375	322,184
Gift aid income from individuals	**138,708**	**-**	**138,708**	172,692	622	173,314
Community	**476,970**	**9,309**	**486,279**	356,156	5,664	361,820
Gifts in kind (see below)	**131,791**	**29,038**	**160,829**	96,892	-	96,892
Trusts and grants	**69,215**	**671,209**	**740,424**	125,175	186,147	311,322
	1,896,134	**715,720**	**2,611,854**	2,004,491	212,573	2,217,064

Gifts in kind	Unrestricted	Restricted	2023 Total	Unrestricted	Restricted	2022 Total
	£	£	£	£	£	£
Donated food and drink	**13,333**	**-**	**13,333**	2,704	-	2,704
Capital items	**-**	**29,038**	**29,038**	13,280	-	13,280
Other items	**118,458**	**-**	**118,458**	80,908	-	80,908
	131,791	**29,038**	**160,829**	96,892	-	96,892

3. Legacies

	Unrestricted	Restricted	2023 Total	Unrestricted	Restricted	2022 Total
	£	£	£	£	£	£
Legacies	**2,688,561**	**-**	**2,688,561**	562,381	1,500	563,881

4. Shops

	2023 Unrestricted	2022 Unrestricted
	£	£
Trading activities	**2,830,972**	2,500,559
Donation of sale proceeds for goods sold as agent	**637,243**	553,877
Gift aid on donations of sale proceeds to charity	**160,919**	139,868
COVID-19 Retail Grant	**3,033**	57,337
	3,632,167	3,251,641

Notes to the financial statements

For the year ended 31 March 2023

5. Fundraising

	2023 Unrestricted	2022 Unrestricted
	£	£
Lottery	710,425	745,304
Events	337,247	275,356
	1,047,672	1,020,660

6. Other income

	2023 Unrestricted	2022 Unrestricted
	£	£
Training and Education	4,188	2,842
Catering	42,012	30,461
Other	120,644	80,802
	166,844	114,105

7. Investment income

	2023 Unrestricted	2022 Unrestricted
	£	£
Gross interest receivable	13,237	1,372

8. Income from charitable activities

	2023 Unrestricted	2022 Unrestricted
	£	£
NHS Derby and Derbyshire Integrated Care Board / Joined Up Care Derbyshire	4,192,831	2,946,714
University of Sheffield – Student training	54,180	39,200
Chesterfield Royal Hospital – Medical secretarial support	16,591	16,590
Other	13,715	10,393
	4,277,317	3,012,897

Notes to the financial statements

For the year ended 31 March 2023

9. Income from COVID-19 grants

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from December 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

10. Income from furlough

The hospice received funding through the COVID-19 Furlough Scheme for staff who were furloughed due to Government restrictions. In accordance with the guidance on gov.uk, 'furlough' refers to employees who have been asked to stop working for at least 3 weeks, but who are still being kept on their employer's payroll.

11. (a) Analysis of group expenditure current year

	Direct staff costs	Other direct costs	Support costs	**Total costs**
	£	£	£	**£**
Donations	377,092	180,951	49,863	**607,906**
Legacies	21,559	8,929	22,904	**53,392**
Costs of raising voluntary income	398,651	189,880	72,767	**661,298**
Lottery	69,894	225,700	47,968	**343,562**
Events	164,895	146,272	58,877	**370,044**
Community	150,521	46,353	40,332	**237,206**
Shops	1,741,023	1,165,335	302,947	**3,209,305**
Fundraising and other trading costs	2,126,333	1,583,660	450,124	**4,160,117**
Patient care – hospice	2,876,133	498,650	1,515,736	**4,890,519**
Patient care – community	1,261,011	49,718	265,684	**1,576,413**
Therapies & rehabilitation	1,247,668	79,163	183,968	**1,510,799**
Cost of charitable activities	5,384,812	627,531	1,965,388	**7,977,731**
Total	7,909,796	2,401,071	2,488,279	**12,799,146**

Notes to the financial statements

For the year ended 31 March 2023

11. (b) Analysis of group expenditure prior year

	Direct staff costs	Other direct costs	Support costs	**Total costs**
	£	£	£	**£**
Donations	303,108	160,504	45,356	**508,968**
Legacies	43,197	6,399	20,840	**70,436**
Costs of raising voluntary income	346,305	166,903	66,196	**579,404**
Lottery	101,108	223,405	43,641	**368,154**
Events	129,826	139,655	53,567	**323,048**
Community	92,104	32,007	36,685	**160,796**
Shops	1,550,237	972,571	277,923	**2,800,731**
Fundraising and other trading costs	1,873,275	1,367,638	411,816	**3,652,729**
Patient care – hospice	2,823,221	421,039	1,377,470	**4,621,730**
Patient care – community	1,097,510	45,618	241,691	**1,384,819**
Therapies & rehabilitation	1,095,541	65,663	167,313	**1,328,517**
Cost of charitable activities	5,016,272	532,320	1,786,474	**7,335,066**
Total	7,235,852	2,066,861	2,264,486	**11,567,199**

All costs for raising voluntary income and for fundraising and other trading costs, in both years, related to unrestricted funds.

Charitable expenditure includes £29,977 (2022 – £914,640) of restricted expenditure.

Patient care within the hospice includes the activities of the Inpatient Unit, Outpatient and Day Services teams.

Patient care within the community includes the activities of the Palliative Care Nurse Specialists, Palliative Care Community Nurses, Support Workers and End of Life Care Facilitators.

Therapy and rehabilitation includes the activities of teams within Supportive Care Services, Lymphoedema, Occupational Therapy and Physiotherapy.

The patient facing functions above are all directly supported by a Clinical Administration Team, Quality Improvement Team, Catering, Housekeeping and other Estates functions. The costs of these functions are included within the direct costs above.

All patient facing functions, direct support teams and fundraising functions are then supported by the wider management structure of the organisation including HR, Learning & Development, Executive Team, Finance, Procurement, IT and Governance. The costs of these functions and costs of depreciation are all included in Support Costs.

Support costs include £165,365 (21/22 £150,132) of governance costs incurred in connection with the compliance with constitutional and statutory requirements of the charity.

Notes to the financial statements

For the year ended 31 March 2023

12. (a) Analysis of support costs current year

	Executive costs	HR & IT costs	Other support function costs	Depreciation	**Total costs**
	£	£	£	£	**£**
Donations	10,972	21,360	14,657	2,874	**49,863**
Legacies	5,240	10,201	7,000	463	**22,904**
Costs of raising voluntary income	16,212	31,561	21,657	3,337	**72,767**
Lottery	10,849	21,121	14,492	1,506	**47,968**
Events	13,359	26,006	17,843	1,669	**58,877**
Community	8,783	17,098	11,731	2,720	**40,332**
Shops	59,043	114,942	78,868	50,094	**302,947**
Fundraising and other trading costs	92,034	179,167	122,934	55,989	**450,124**
Patient care – hospice	285,376	555,554	381,194	293,612	**1,515,736**
Patient care – community	59,043	114,942	78,868	12,831	**265,684**
Therapies & rehabilitation	39,362	76,628	52,579	15,399	**183,968**
Cost of charitable activities	383,781	747,124	512,641	321,842	**1,965,388**
Total	492,027	957,852	657,232	381,168	**2,488,279**

Notes to the financial statements

For the year ended 31 March 2023

12. (b) Analysis of support costs prior year

	Executive costs	HR & IT costs	Other support function costs	Depreciation	**Total costs**
	£	£	£	£	**£**
Donations	11,999	17,844	12,916	2,597	**45,356**
Legacies	5,731	8,522	6,168	419	**20,840**
Costs of raising voluntary income	17,730	26,366	19,804	3,016	**66,196**
Lottery	11,865	17,644	12,771	1,361	**43,641**
Events	14,609	21,725	15,725	1,508	**53,567**
Community	9,605	14,283	10,339	2,458	**36,685**
Shops	64,571	96,021	69,504	47,827	**277,923**
Fundraising and other trading costs	100,650	149,673	108,339	53,154	**411,816**
Patient care – hospice	312,091	464,102	335,935	265,342	**1,377,470**
Patient care – community	64,571	96,021	69,504	11,595	**241,691**
Therapies & rehabilitation	43,047	64,014	46,336	13,916	**167,313**
Cost of charitable activities	419,709	624,137	451,775	290,853	**1,786,474**
Total	538,089	800,176	579,198	347,023	**2,264,486**

13. Net movement in funds is stated after charging:

	2023 Group	2022 Group
	£	£
Auditors' remuneration – audit	**17,685**	13,385
Auditors' remuneration – tax	**915**	840
Auditors' remuneration – other	**16,250**	4,575
Depreciation – owned assets	**371,231**	327,149
Depreciation – assets held on hire purchase	**9,937**	19,874
Payments made under operating leases	**330,722**	317,626

Notes to the financial statements

For the year ended 31 March 2023

14. Wages and staff costs

	2023 Group	2022 Group
	£	£
Gross salaries	**7,957,144**	7,111,858
Social security costs	**727,678**	612,537
Pension costs	**505,094**	495,474
	9,189,916	8,219,869

Average number of employees and full time equivalents for the group and analysis of employees in the year were:

	2023		2022	
	No.	FTE	No.	FTE
Clinical	**159**	**113**	161	115
Retail	**105**	**65**	96	65
Finance & IT	**8**	**8**	6	6
HR & Executive	**22**	**19**	18	13
Estate	**26**	**18**	27	18
Fundraising/Marketing	**34**	**29**	31	27
Total	**354**	**252**	339	244

Employees earning over £60,000 are summarised below (excluding pension costs):

	2023 No.	2022 No.
£60,001 – £70,000	**2**	2
£70,001 – £80,000	**1**	3
£80,001 – £90,000	**1**	-

Pension contributions relating to the staff earning over £60,000 totalled £20,155 (2022: £30,028).

The total amount of employee benefits received by key management personnel is £421,663 (2022: £477,188). The charity considers these to be the staff who comprise the senior management team on the hospice payroll: Chief Executive Officer, Director of Income Generation, Director of Quality & Patient Care, Director of People, Engagement & Performance, Director of Finance & Estates and Director of Marketing & Communications.

Included within gross salaries are redundancy payments totalling £1,624 (2022: £nil).

Notes to the financial statements

For the year ended 31 March 2023

15. Tangible fixed assets

The group	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2022	355,000	4,903,727	1,102,284	1,193,175	188,644	7,742,830
Additions	-	-	104,589	323,540	38,113	466,242
Disposals	-	-	(54,561)	(60,076)	(23,540)	(138,177)
At 31 March 2023	**355,000**	**4,903,727**	**1,152,312**	**1,456,639**	**203,217**	**8,070,895**
Depreciation						
At 1 April 2022	156,200	1,060,883	884,412	576,083	188,644	2,866,222
Charge for the year	7,100	98,075	100,401	170,828	4,764	381,168
Disposals	-	-	(38,316)	(59,886)	(23,540)	(121,742)
At 31 March 2023	**163,300**	**1,158,958**	**946,497**	**687,025**	**169,868**	**3,125,648**
Net Book Value						
At 1 April 2022	198,800	3,842,844	217,872	617,092	-	4,876,608
At 31 March 2023	**191,700**	**3,744,769**	**205,815**	**769,614**	**33,349**	**4,945,247**

The charity	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2022	355,000	4,903,727	492,959	1,131,971	80,350	6,964,007
Additions	-	-	75,353	321,831	-	397,184
Disposals	-	-	-	(59,620)	-	(59,620)
At 31 March 2023	**355,000**	**4,903,727**	**568,312**	**1,394,182**	**80,350**	**7,301,571**
Depreciation						
At 1 April 2022	156,200	1,060,883	381,652	538,479	80,350	2,217,564
Charge for the year	7,100	98,075	64,655	161,243	-	331,073
Disposals	-	-	-	(59,620)	-	(59,620)
At 31 March 2023	**163,300**	**1,158,958**	**446,307**	**640,102**	**80,350**	**2,489,017**
Net Book Value						
At 1 April 2022	198,800	3,842,844	111,307	593,492	-	4,746,443
At 31 March 2023	**191,700**	**3,744,769**	**122,005**	**754,080**	**-**	**4,812,554**

The value of fixed assets held under finance leases is £nil (2022: £9,937) in both the group and the charity.

Notes to the financial statements

For the year ended 31 March 2023

16. (a) Investments – charity

	Shares in group undertakings and participating interests
	£
Cost at 1 April 2022 and 31 March 2023	4
Net book value at 1 April 2022 and 31 March 2023	4

Holding of more than 20%

The charity holds more than 20% of the share capital of the following company:

Company	Company number	County of registration or incorporation	Shares held class %
Ashgate Hospicecare Shops Limited	02577401	England & Wales	Ordinary 100%

The aggregate amount of capital and reserves and the results of the subsidiary for the financial year are as follows:

	Principal Activity	Capital and reserves	Profit for the year
		£	£
Ashgate Hospicecare Shops Limited	Charity shop	1,242	381,684

(b) Fixed asset investments

	Charity and group	
	2023	2022
Listed investments	**£**	£
Fair value at 1 April 2022	**1,026,780**	1,006,839
Additions	**-**	-
Adjustment	**-**	-
Investment (losses) / gains	**(61,019)**	19,941
Fair value at 31 March 2023	**965,761**	1,026,780

The historical cost of the investment is £900,000 (2022: £900,000).

Notes to the financial statements

For the year ended 31 March 2023

17. Debtors

	Group		Charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Trade debtors	**101,390**	89,249	**96,553**	79,891
Other debtors	**53,053**	260,225	**14,712**	229,169
Value added tax	**61,068**	686,098	**46,659**	668,434
Prepayments and accrued income	**2,076,522**	1,158,814	**1,978,571**	1,085,490
Amounts owed by group undertakings	**-**	-	**913,002**	1,178,999
	2,292,033	2,194,386	**3,049,497**	3,241,983

The Charity's intercompany debtor balance includes an intercompany loan of £543,093 which is due after more than one year. The loan has been provided on a 5 year term, is repayable by 8 December 2026 and has an interest rate of 5% per annum.

18. Creditors

	Group		Charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Amounts falling due within one year				
Trade creditors	**280,169**	210,407	**163,166**	145,537
Tax and social security	**276,287**	191,270	**221,349**	170,525
Accruals and deferred income	**424,921**	415,903	**298,731**	297,376
Finance lease creditors < 1 year	**-**	6,597	**-**	6,597
	981,377	824,177	**683,246**	620,035

Deferred income relates to lottery money received in advance for future draws. At 31 March 2023 this totalled £95,818 (2022: £100,790).

19. Creditors: amounts falling due after more than one year

	Group		Charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Other creditors	**355,000**	355,000	**355,000**	355,000
	355,000	355,000	**355,000**	355,000

Notes to the financial statements

For the year ended 31 March 2023

20. Operating lease commitments

At 31 March 2023 the charity had future minimum lease payments under non cancellable operating leases as follows:

	Group		Charity	
	2023	2022	**2023**	2022
	£	£	**£**	£
Within one year	**307,550**	277,709	**8,319**	12,743
Within two to five years	**479,432**	365,622	**1,067**	3,634
In more than five years	**-**	-	**-**	-
	786,982	643,331	**9,386**	16,377

21. Pension costs

The pension costs relate to the amounts contributed by the Group and paid over to the Health Service pension scheme or to eligible employees' pension schemes. The pension costs amounted to £505,094 (2022: £495,474). The amount owed to the pension providers at the year end was £69,868 (2022: £39,688). All schemes are treated as defined contribution and payments are charged to the SOFA in the year they are payable.

22. Capital commitments

There were no capital commitments at 31 March 2023 (2022:£nil).

Notes to the financial statements

For the year ended 31 March 2023

23. Related party transactions and trustee renumeration

No Trustee received or waived any remuneration during either year.
There were no other transactions with Trustees during either year.

The only related party transactions were between the parent charity and the trading subsidiary. These were routine items, primarily where shops in the subsidiary receive gift aided donations of the sale proceeds of donated goods but then transfer such donations, net of commission, into the parent charity accounts. The parent charity administers payroll for the group and transfers the salary costs of shops staff into the subsidiary. Both companies also incur some costs which benefit the other entity, primarily costs borne in the subsidiary associated with sales of gift aided stock and costs of central support functions such as finance and HR, borne in the charity. Year end balances are shown in the charity columns of Note 17 Debtors. Net recharges in the year were £1,979k (2022: £2,238k).

24. Taxation

As a charity, Ashgate Hospicecare is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or s256 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objectives. No tax charges have arisen in the Charity. The tax charge arises from the trading results of the subsidiary.

	Group	
	2023	2022
	£	£
Corporation Tax current year	**28,000**	**-**

Notes to the financial statements

For the year ended 31 March 2023

25. (a) Statement of funds current year

	Balance at 1 April 2022	Income	Expenditure	Transfers in/out	Designated	Losses	Corporation Tax	**Balance at 31 March 2023**
Unrestricted Funds	£	£	£	£	£	£	£	**£**
General Funds	9,026,506	13,721,932	(12,769,169)	280,877	(501,000)	(61,019)	(28,000)	**9,670,127**
Designated Funds	100,000	-	-	-	501,000	-	-	**601,000**
	9,126,506	13,721,932	(12,769,169)	280,877	-	(61,019)	(28,000)	**10,271,127**
Restricted Funds								
Earmarked Donations	244,811	244,909	(29,977)	(269,996)	-	-	-	**189,747**
Children's Services	-	470,811	-	(10,881)	-	-	-	**459,930**
	244,811	715,720	(29,977)	(280,877)	-	-	-	**649,677**
Total of Funds	9,371,317	14,437,652	(12,799,146)	-	-	(61,019)	(28,000)	**10,920,804**

(b) Statement of funds prior year

	Balance at 1 April 2021	Income	Expenditure	Transfers in/out	Designated	Gains	Corporation Tax	**Balance at 31 March 2022**
Unrestricted Funds	£	£	£	£	£	£	£	**£**
General Funds	7,292,645	9,980,897	(10,652,559)	106,497	2,279,085	19,941	-	**9,026,506**
Designated Funds	2,379,085	-	-	-	(2,279,085)	-	-	**100,000**
	9,671,730	9,980,897	(10,652,559)	106,497	-	19,941	-	**9,126,506**
Restricted Funds								
Earmarked Donations	171,721	214,073	(34,486)	(106,497)	-	-	-	**244,811**
HUK/NHSE COVID-19	-	880,154	(880,154)	-	-	-	-	-
	171,721	1,094,227	(914,640)	(106,497)	-	-	-	**244,811**
Total of Funds	9,843,451	11,075,124	(11,567,199)	-	-	19,941	-	**9,371,317**

Notes to the financial statements

For the year ended 31 March 2023

Transfer of Funds

The transfer of £280,877 relates to expenditure on restricted projects which has been disclosed as unrestricted expenditure on the face of the SOFA. This predominantly relates to staff costs which are reported within the costs of charitable activities.

Designation of Funds

The Trustees designated £100,000 in 2022 to support the pilot of new income generation initiatives. The balance remains unutilised. In 2022/2023, the trustees have also designated £501,000 for the budgeted deficit in 2023/2024.

Restricted Funds

These are funds restricted by the donors for items of expenditure as follows:

Earmarked Donations

These are donations contributed by the general public to help fund specific clinical activities.
At the end of the year £189,747 remained unspent and this will be expended in 2023/2024 onwards.

Hospice UK/NHSE

In 21/22 non recurring funding of a restricted nature was received from NHSE as explained in Note 9. The cost of charitable activities (Note 11) is greater than the combination of this NHSE funding and other income from charitable activities (Note 8) and therefore the Trustees consider that this restricted funding was fully utilised in 21/22.

Children's Services

This donation is restricted to develop and extend child bereavement support within Derbyshire and the High Peak.

Notes to the financial statements

For the year ended 31 March 2023

26. (a) Analysis of net assets between funds current year

	Unrestricted General Funds	Unrestricted Designated Funds	Restricted Funds	Total Funds
	£	£	£	£
Fixed assets	5,908,508	-	2,500	5,911,008
Current assets	5,097,996	601,000	647,177	6,346,173
Current liabilities	(981,377)	-	-	(981,377)
Liabilities due after one year	(355,000)	-	-	(355,000)
	9,670,127	601,000	649,677	10,920,804

(b) Analysis of net assets between funds prior year

	Unrestricted General Funds	Unrestricted Designated Funds	Restricted Funds	Total Funds
	£	£	£	£
Fixed assets	5,900,888	-	2,500	5,903,388
Current assets	4,304,795	100,000	242,311	4,647,106
Current liabilities	(824,177)	-	-	(824,177)
Liabilities due after one year	(355,000)	-	-	(355,000)
	9,026,506	100,000	244,811	9,371,317

27. Ashgate Hospicecare Shops Limited: Profit and loss account for the year ended 31 March 2023

	2023	2022
	£	£
Turnover	**2,830,972**	2,500,559
Furlough	**-**	12,659
Retail Grant	**3,033**	57,337
Other income	**555,000**	-
Total income	**3,389,005**	2,570,555
Cost of sales	**(2,154,518)**	(1,898,882)
Gross Profit	**1,234,487**	671,673
Administrative expenses	**(801,934)**	(671,754)
Other interest payable	**(27,154)**	(8,258)
Other interest receivable	**4,285**	166
Tax on profit	**(28,000)**	-
Retained profit / (loss) for the year	**381,684**	(8,173)
Number of shops and coffee shops	**18**	18

Notes to the financial statements

For the year ended 31 March 2023

28. Reconciliation of net movement in funds to net cash flow from operating activities

	2023	2022
	£	£
Net movement in funds	**1,549,487**	(472,134)
Depreciation charges	**381,168**	347,023
Increase / (decrease) in creditors excluding finance leases	**163,797**	(22,502)
(Increase) / decrease in debtors	**(97,647)**	965,359
(Increase) / decrease in stocks	**(35,768)**	(8,626)
Loss on disposal	**16,435**	-
Loss / (gain) on investments	**61,019**	(19,941)
Interest received	**(13,237)**	(1,372)
	2,025,254	787,807

There were no changes in net debt other than the cashflows above.

29. Contingent assets – legacy income

As at the reporting date, the charity has entitlement to 8 further legacies (21/22 – 18), but these have not been included within accrued income, as although the income is probable, the amounts have not yet been confirmed.

Notes to the financial statements

For the year ended 31 March 2023

30. Consolidated statement of financial activities – prior year

	Unrestricted Funds	Designated Funds	Restricted Funds	2022 Total
Income:	£	£	£	**£**
Donation and legacies				
Donations	2,004,491	-	212,573	**2,217,064**
Legacies	562,381	-	1,500	**563,881**
	2,566,872	-	214,073	**2,780,945**
Income from other trading activities:				
Shops	3,251,641	-	-	**3,251,641**
Fundraising	1,020,660	-	-	**1,020,660**
Other	114,105	-	-	**114,105**
	4,386,406	-	-	**4,386,406**
Investment income	1,372	-	-	**1,372**
Income from charitable activities	3,012,897	-	-	**3,012,897**
Income from COVID-19 Grants	-	-	880,154	**880,154**
Income from furlough	13,350	-	-	**13,350**
Total income	9,980,897	-	1,094,227	**11,075,124**
Expenditure:				
Costs of raising voluntary income	579,404	-	-	**579,404**
Fundraising & other trading costs	3,652,729	-	-	**3,652,729**
Costs of charitable activities	6,420,426	-	914,640	**7,335,066**
Total expenditure	10,652,559	-	914,640	**11,567,199**
Net (expenditure)/income before investment gains	(671,662)	-	179,587	**(492,075)**
Gains on investments	19,941	-	-	**19,941**
Corporation tax	-	-	-	-
Net (expenditure)/income	(651,721)	-	179,587	**(472,134)**
Funds transfer	106,497	-	(106,497)	-
Designated funds transfer	2,279,085	(2,279,085)	-	-
Net movement in funds	1,733,861	(2,279,085)	73,090	**(472,134)**
Reconciliation of funds				
Total funds brought forward	7,292,645	2,379,085	171,721	**9,843,451**
Total funds carried forward	9,026,506	100,000	244,811	**9,371,317**

Thank you

We'd like to say a special thank you to everyone who supports us and helps us to be there when it matters most.

Our funders and supporters, you recognise the importance of what we do and are as determined as we are to ensure that those who need our care can access it. We couldn't do what we do without your unwavering generosity.

Our One Ashgate team, our dedicated and hardworking staff and our loyal volunteers. We are incredibly proud of all you do and how you work together to help families living with a life-limiting illness across North Derbyshire.

Lastly, a special thank you to the **patients and the families** who allow us to share their stories. Who are featured throughout this report to help raise awareness and understanding of our crucial palliative and end of life care.

Our patients and their families remain at the heart of Ashgate Hospice and all we do.

Thank you.

For more information

If you would like to know more about how you can help us to care for people living with a life-limiting illness, please contact us:

Call us on **01246 567 250**

Or email us at **fundraising@ashgatehospice.org.uk**

Looking for support?

Call us on **01246 568 801**

Or email us at **clinicalenquiries@ashgatehospice.org.uk**

Or visit **www.ashgatehospice.org.uk**

Compassionate care for everyone

Registered with FUNDRAISING REGULATOR

disability confident EMPLOYER

MINDFUL EMPLOYER

Ashgate Hospice

Registered Charity No. 700636

ASHGATE HOSPICECARE

England & Wales - Charity number 700636

Accounts



A year of resilience

Ashgate Hospice

Ashgate Hospice Annual Report
April 2021 – March 2022

www.ashgatehospice.org.uk

Hospice care for the people of North Derbyshire

We aim to be there for people at any stage of their illness to ensure they are well supported and cared for in the place of their choosing. Wherever you are, there is an Ashgate Hospice nursing team working in your area, supporting people in your community.



Key to symbols

- Town or village
- Place of interest
- Chesterfield Royal Hospital
- Catchment area
- Ashgate Hospice Shop



Our teams make 6,000 home visits every year.

Contents

Highlights **4**

Welcome from our Chair and Chief Executive **6**

Strategic report **8**
- Who we are and what we do 10
- What we believe 12
- Delivering our purpose 13
- Our plans for the coming year 15

Our impact **16**
- Our care 17
- Our people 24
- Our voice 33
- Our financial sustainability 37

Trustees' report **48**
- How we're governed 48
- Financial review 50

Financial statements and notes to the accounts **52**
- Reference and administrative details 52
- Independent auditors report 56
- Our financial statements 60

Highlights 2021/2022

599 volunteers gave their time freely

Our youngest volunteers are **15** years old whilst our eldest is **88**!

70% of our volunteers are women

£90,682 was raised from our raffles

£179,000 was raised from gift aid in fundraising activities

131,742 visited our website for information, support and to fundraise.



£128,500

was won by our supporters in the Ashgate lottery

The best-selling item in our coffee shops was a latte with

8,671 sold

894,447 items were sold across our 15 charity shops

2,229 patients and their families supported across North Derbyshire

345 received specialist inpatient care

257 people access Day Services support

1,294 people were cared for in their own homes

1,183 people were supported by our Supportive Care teams

A message from our Chair and Chief Executive

At Ashgate Hospice we do whatever it takes to support those living with a life-limiting illness. This past year was no exception.

Sadly, COVID-19 has remained a very real threat to our way of life and to the vulnerable patients in our care. Despite this, our teams continue to evolve and adapt their ways of working as we learn to live alongside the virus.

After the unprecedented year before, this has taken much resilience. But we are proud to say that we never took our foot off the pedal – in fact, we've used the pandemic as an opportunity to strengthen our services, ensuring that our patients and their families are at the heart of all our decision making.

This resilience was recognised when our Inpatient Unit team won the highly coveted Royal College of Nursing Award for their Outstanding Contribution to Infection Prevention and Control. This award recognised the team for their scrupulous approach to infection prevention which had avoided any outbreaks of COVID-19.

Perhaps even more importantly, our team were able to allow patients to continue to receive visitors throughout the pandemic, ensuring those in their final days were given the dignity, respect and love they deserved.

Not only have we been there to support our patients and their families, but we've also continued to support our healthcare partners. We've been by their side every step of the way, continuing to admit end of life COVID-19 positive patients and freeing up hospital beds at every opportunity.

It is the sheer resilience of the Ashgate workforce that continues to see us through these challenging times, and which ensures we can be there when it matters most.

Of course, none of what we do would be possible without the support of our local community and the tenacity of our fundraising team. Every year we must raise £8 million to continue to provide our services and that is no mean feat when we're still very much in the grips of a global pandemic.

That is why we were delighted to welcome shoppers back into our 15 shops when they reopened in April 2021. With precautionary measures in place, we have been able to safely continue trading and in fact, we celebrated our most successful week in retail – managing to take £105,326 in our first week open.

The way in which we are funded, and indeed the way in which end of life care services are funded nationally, continues to be an important topic and one we are fiercely passionate about. With an aging population who are living for longer with complex health concerns, the demand for end of life care will continue to increase. That is why we have continued to talk about the very important subject of sustainable funding, raising the issue with our local MPs.

It would be remiss of me not to recognise the potential impact that this sustained resilience could have on our teams. Our frontline workers were under stress from increased workloads and pressure. To support them, we recruited a Wellbeing Advisor to help support and manage their emotional needs. Alongside a comprehensive calendar of wellbeing initiatives, she has been onsite to provide a listening ear when needed.

Despite our achievements, there is still more to be done. We want to support every person who needs us and not just those who require the most complex care. We want to increase our presence in those harder to reach areas of North Derbyshire. We want to address the inequalities faced by marginalised people accessing our services. We want to ensure a more diverse and inclusive workforce. None of these things will be easy. But we are confident that we will see change and that we can turn these aspirations into our reality.

It will take resilience. It will take hope. And most importantly it will take everyone working together in our 'One Ashgate' approach.

With our purpose and vision so clear, we would just like to take this opportunity to say thank you to our supporters, partners, volunteers and employees for the crucial part they are playing in delivering our care and support to the people of North Derbyshire.



Barbara-Anne Walker,
Chief Executive



Nicholas Jeffrey,
Chair of the Board of Trustees

Strategic report

In this section, you can read about who we are and what we do, our plans for the future and a summary of our objectives for the coming financial year.



Tony Jackson during his stay at Ashgate's Inpatient Unit .



Karen's story

Karen explains how Ashgate Hospice was there for her father in his final moments.

Tony Jackson was diagnosed with a rare form of motor neurone disease (MND) in November of 2020 and died in December 2021 after receiving care on our Inpatient Unit.

Karen said: "Our first stay with Ashgate was in Summer of 2021 to manage his symptoms. Both of my parents were fiercely independent, so getting used to carers over a relatively short period of time was trying. But the wonderful medical and nursing staff optimised his care, and Dad never lost his sense of humour and positivity.

"The physiotherapists took him for walks around the grounds, which he loved. We received regular home visits from the specialist nurse and the consultant, and through this we felt respected, looked after, and listened to. I especially remember the much-needed humour in the face of a terrifying disease. Ashgate made Dad feel as comfortable as he possibly could be.

"Dad died at Ashgate in December 2021. We weren't there with him when he passed away – I had gone home for a rest, expecting to see him again the next day – so it was such a comfort to speak to the two wonderful nurses who were holding his hands for us.

"The staff are special at Ashgate. They are skilled, compassionate, and open.

"I honestly do not know how we would have managed without them; we all have an increased respect for the work they do and the need for the specialised approach that is needed for people who are at very vulnerable stages of life."

Who we are and what we do

Whether you're living with a life-limiting illness, caring for someone who is, or grieving the death of a loved one, we're here to help.

We are here for the people of North Derbyshire and beyond. We work together with energy, care and compassion so that people can have a good death in a place of their choosing and know that their loved ones are important to us too.

We provide palliative and end of life care free of charge to people aged 18 and over. We care for people living with a life-limiting illness, including cancer, neurological diseases, and end-stage heart, kidney and lung diseases.

We aim to ensure that our patients are well informed, supported and pain free. While our purpose is to provide end of life care, our work doesn't only begin at the very end of someone's life. We can help improve quality of life soon after a terminal diagnosis. We also support people's loved ones to ensure they get the practical, emotional and bereavement support they need.

We are proud that the Care Quality Commission continues to rate our care as 'Outstanding'.

When it comes to funding, much of the care and services we deliver are funded by the generosity of our supporters. In fact, more than 70% of what we do is paid for through fundraising and less than 30% comes from local NHS budgets.

Support when it's needed

When someone living in North Derbyshire is diagnosed with a life-limiting illness, they can access Ashgate Hospice's services through a referral. This normally comes from their GP, hospital team or community nurse.

At that point, we provide specialist care and support for our patients in their own homes or at our Inpatient Unit in Old Brampton, or sometimes both. For example, patients can come to the hospice for a few days to control their pain, before returning home, if able to do so. We also provide practical, emotional and bereavement support for the families of our patients.

The type of care and level of intervention we provide depend on the degree to which a patient's disease has advanced. We also consider other factors, such as their support network, home environment and pain levels.

Our COVID-19 referrals work in the same way. End of life patients with COVID-19 are referred to us by their GP, hospital team or community nurse and we then provide our care either at our Inpatient Unit or in the community.

We have been sure to allow as much visiting as possible throughout the pandemic. This is important not just for patients, but for their loved ones too.



More than 70% of what we do is paid for through fundraising


We were
founded in
1988
Welcome to
Ashgate
Hospice
STOP
Automatic
door
Automatic
door
STOP
Out of hours access
to the hospice

What we believe

We're working to ensure everyone in North Derbyshire has access to excellent palliative and end of life care when they ask for it and where they need it. Here's how:

Our vision

Our vision is for people with a life-limiting illness to be able to live well and to have a good death – well informed and supported – and for their loved ones to be well supported and comforted too.

Our purpose

We provide, campaign for, and educate about, specialist palliative and end of life care and bereavement support. We aspire to be a centre of excellence – working as part of the wider healthcare system with energy, openness, compassion and hope.

Our values

We are compassionate.
We work as a team.
We are respectful, open and inclusive.



Delivering our purpose

At the beginning of 2022, we published our Three Ambitions that set out the ideal world we want to create – not what we are doing day to day – but what we hope will one day come about.

These ambitions were split into three categories; our care, our people and our voice.

Our care

Care is at our heart. We open our arms to you and the people you care about.

Our ambition for our care – an Ashgate model of care which:

- is about living well and dying with dignity and in comfort
- is accessible to everyone who needs our care, in all their diversity
- is safe, and always improving, using feedback, our expertise, research, emerging ideas and innovation
- is delivered in collaboration with other care providers – including on issues where we can have more influence and impact together – promoting best practice across different healthcare settings
- is fairly funded, well supported and understood.

Our people

We are the One Ashgate team working together with warmth and hope to provide compassion and care. Our aim is to be exceptional in everything we do.

Our ambition for our people – a One Ashgate team who:

- bring our values to life with the people in our care at the centre of everything we do
- connect and collaborate, working together and where everyone's views are heard and valued
- are proud ambassadors and fundraisers for Ashgate Hospice and understand how we all help deliver outstanding care
- are committed to improvement and excellence, celebrating successes together and speaking up when something is wrong or requires change
- are leaders and learners, committed to our wellbeing and able to say why a positive working culture matters
- reflect the diversity of the communities we serve.

Our voice

We use our trusted voice to make things better for our patients, their loved ones and people needing specialist palliative and end of life care in North Derbyshire and further afield.

Our ambition for our voice – a powerful and combined Ashgate voice which:

- increases our reach, influence and impact across North Derbyshire and beyond
- is as inclusive and accessible as possible, so that everyone can get the help they need
- helps create a North Derbyshire community who know how to support people at the end of their lives, and those living with loss
- encourages conversations about death and dying, and demystifies hospice care
- advocates locally, regionally and nationally for specialist palliative and end of life care to be properly funded and resourced.



Sue, outside Ashgate Hospice's Community Hub.

Our plans for the coming year

Our ambitions for the coming year have been shaped by the pandemic and how we will continue to operate alongside the virus. We must now focus on developing our services, creating financial sustainability and a workforce that continues to be resilient.

With all this in mind, in 2022/23, we will:

1. Improve access to our services by creating a single point of access and triage hub for all service referrals. This will speed up the process, ensuring that patients and their families get the help and support they need when it's needed. We'll also look at the services we offer, and which ones can be extended to further support the community 24/7, helping equity of access across North Derbyshire.
2. Collaborate and work with others, sharing our expertise to develop the specialist skills of clinical/social care staff and introduce new roles to enhance skill mix and care provision.
3. Bring our care into the heart of the communities we serve by opening community hubs across the region that are tailored to the needs of that area.
4. Support more children and young people who are experiencing bereavement by extending our services into areas of greatest need in North Derbyshire.
5. Develop the specialist clinical services provided on site at Ashgate to reduce the need for patients to have to go offsite to attend hospital.
6. Invest in research, working alongside East Midlands Clinical Research Network to contribute to improvements in palliative and end of life care for all.
7. Continue to work towards more equitable access to our care and services, ensuring staff and volunteers receive comprehensive equality, diversity and inclusion training.
8. Work in partnership with local organisations to exchange best practice and expertise in working with dementia, learning disabilities, mental health, LGBT+, disability and other underrepresented groups.
9. Offer more management and leadership development opportunities to our staff, taking a values-based approach and ensuring we continue to be a compassionate employer.
10. Review the way we fundraise, including our retail portfolio, to ensure that we are raising as much money as possible.

OUR IMPACT:
A look back at a year of unprecedented need

We are hugely proud of the difference we have made and the quality of the care we have provided during the year 2021/22, including to end of life patients with COVID-19.

We would like to thank the resilience of our incredible workforce who together have pulled us through this challenging time. We would also like to thank our funders, supporters and donors for their unwavering support.



Our care

In 2021/22, our teams supported more than 2,200 people living with a life-limiting illness, their families and their loved ones. This care is delivered at our specialist Inpatient Unit at Old Brampton and out in people's own homes right across North Derbyshire and the High Peak and Dales.

Crucial care and services for those living with a life-limiting illness

At Ashgate Hospice, we offer a holistic range of services to help our patients and their loved ones manage both their physical and emotional needs. Some of these services had to stop temporarily or be delivered virtually during the height of the COVID-19 pandemic. We were about to cautiously reopen many services when the Omicron variant once again meant we had to direct resources to the frontline. From August, we managed to resume more in-person services for the first time since the very start of the pandemic.

During the year our services included:

Physiotherapy – our physiotherapists assist patients with a variety of needs including breathlessness, fatigue, discomfort, weakness, mobility and pain, by providing a realistic and appropriate treatment regime to help improve quality of life.

Lymphoedema specialist support – our small team of highly specialist lymphoedema nurses work with our medical team to provide support and care to patients who have lymphoedema. We help them by carrying out a thorough assessment and providing an individual treatment plan. The plan may consist of skincare, massage, exercise and compression. It aims to manage the symptoms of lymphoedema and improve quality of life.

Counselling & therapies – the Counselling Team is part of the Ashgate Hospice Supportive Care Team and is based in the Harry Fisher Building at the hospice. Our service is available to patients with palliative care needs, their families, friends and carers. We offer a safe space for our patients to be heard and supported, as they explore their concerns and any issues they wish to resolve.

Outpatient care – we continued to provide important services including lymphoedema treatment, counselling, consulting, medical assistance, physiotherapy, psychology, consultation with the Ashgate Community Nurse Specialists and bereavement services.

Social work – the Social Work Team is based at the hospice and out in the community. They work alongside other professionals and agencies to understand the needs of patients, their families, friends and carers. They help people to understand what help and support are available and what wider needs must be met (for example, the needs of children and young people when an important adult in their lives has died). They help to arrange and manage practical support for daily tasks.

Spiritual care – our team of spiritual care practitioners works as part of the supportive Supportive Care Team. They are all specially trained and experienced in providing person-centred spiritual care in a healthcare setting and provide support to patients, their relatives, friends, carers, staff members and volunteers. The team seeks to listen,

with compassion, helping people to explore their own sources of strength, comfort and hope.

Occupational therapy – Occupational Therapists promote independence and quality of life when a patient's illness has restricted their normal activities of daily living. The team works very closely with other members of the care team, carers and community agencies, but the patient's choice is central to any decisions made. They can see patients in a variety of settings, including their own homes and at Ashgate Hospice's Inpatient Unit and Day Services. They can also provide an advisory role to nursing and residential homes.

Complementary therapy – our Complementary Therapists specialise in palliative care. They form part of the Supportive Care Team at Ashgate Hospice and are based in the main hospice building. This service is available to inpatients, Day Services attendees and to participants in the recently bereaved groups. The complementary therapy treatments that we provide can be used alongside conventional medicine or on their own.

Inpatient Unit – our Inpatient Unit at Old Brampton in Chesterfield offers the reassurance of round-the-clock, expert care and support.

Day Services – to reduce the spread of infection our day services continued to offer virtual support throughout the year, alongside the return of some in-person services including our new Community Hub at our Hasland site. The combination of virtual and in-person services has worked really well and included telephone and online support packages so that we were keeping in touch with patients and able to see how they were doing.

- **345** people received specialist Inpatient care
- **257** people accessed Day Services support
- **1,294** people were cared for in their own homes
- **1,183** people were supported by our Supportive Care teams
- **723** people were supported to live independently by our Occupational Therapists
- **474** people supported by the Lymphoedema team
- **569** patients received physiotherapy support
- **132** people were supported with complementary therapies



Ward Manager, Karen Walker, accepted the award on behalf of Ashgate Hospice.

Keeping our inpatient care open and safe

Keeping our patients, staff, volunteers, visitors and the wider community safe has continued to be a priority.

Throughout the year our infection control measures remained in place – even when the government removed all legal restrictions in July.

Our infection control measures during the year worked well for us and included weekly COVID-19 testing for all patient facing staff and volunteers, strict personal protective equipment (PPE) requirements for workers and visitors and ensuring access to COVID-19 positive patients' rooms for visitors is through a separate entrance and exit to the main ward on the Inpatient Unit.

Inpatient care at a glance:

- During 2021/22, there was a small increase in the number of referrals to our Inpatient Unit with **488 referred** compared to 464 the previous year.
- During 2021/2, the Inpatient Unit cared for **345 patients** and their loved ones. The average length of stay on the Inpatient Unit during the year was **12.5 days**.
- During 2021/22, our **average bed occupancy was 85%**, with **87% of patients admitted within two days** of referral.

Ashgate Hospice's Inpatient Unit wins prestigious Royal College of Nursing award

The Inpatient Unit team from Ashgate Hospice were delighted to win an award from the Royal College of Nursing Institute in October 2021.

The **Outstanding Contribution to Infection Prevention and Control Award** was won by the Inpatient Unit team, who were recognised for their scrupulous approach to infection prevention which had avoided any outbreaks of COVID-19 and had allowed patients to continue to receive visitors throughout the pandemic.

"It is a privilege to be part of this incredible team who have consistently gone above and beyond to ensure our patients and their families receive the very best care," Ashgate's Ward Manager, Karen Walker said, in accepting the award.

She continued: "When COVID-19 first hit we were quick to respond to the changing demands and procedures that must be put in place, this was despite our own anxieties and fears around the virus.

"I feel honoured that my team have been acknowledged and it's amazing that we have been given this award. I look forward to continuing to make a difference alongside my colleagues and ensuring those who need our care can access it."

Supporting those living with a life-limiting illness out in the community

Our community teams cover North Derbyshire: Chesterfield, North East Derbyshire, the Derbyshire Dales and most of the High Peak. They help people living in these communities access the services Ashgate Hospice has to offer so they can have the best possible quality of life.

In 2021/22, our Clinical Nurse Specialists and Palliative Care Support Workers provided support for 1,294 patients at home. They undertook 2,624 visits and made 16,993 phone and video calls.

Because we provide essential end of life care at home, our patients are able to stay where they feel most comfortable, surrounded by the people they love, for as long as possible. If their condition deteriorates or their symptoms worsen, we can provide closer monitoring and care at our Inpatient Unit.

We provide out-of-hours telephone advice and support to patients, their carers and other health professionals.

All the patients whom we cared for at home, who completed our patient experience questionnaires, said that they would recommend us to friends or family.



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- They undertook **2,624** visits.
- They made **16,993** phone and video calls.



Sophie's story

Sophie is a Palliative Care Nurse with Ashgate Hospice and has been caring for patients and their families in their own homes for the past four years. This includes providing crucial support on special occasions like Christmas Day.

Sophie said: "I'm really proud that regardless of what time of year it is the hospice is still there for people going through the worst possible time.

"Whether it's someone to cry to and let it all out, for advice on medication or even a Christmas Carol singalong down the phone – I will be there to support the families who need us in whatever way I can.

"It is important that we go above and beyond to help people make memories every day, but particularly at this time of year.

"Christmas is a time for family, love and thanksgiving, but I think in situations like this it can sometimes bring home all of the worries of the future and the things you're going to miss or never be able to have.

"Christmas really makes you appreciate what you have, and I am privileged to witness patients celebrating and laughing with loved ones despite all their heartaches and issues.

"It is just a very emotional time, so it's important that we do what we can to make sure people have something to hold on to and remember forever."

Developing and testing new services

Due to the vulnerable patients in our care, our Day Services remained closed onsite at Old Brampton in order to keep footfall to a minimum. Instead, the team opened up a hub within the community at Hasland.

The hub reinstated face-to-face support but away from the clinical environment of the main hospice site. This gave patients access to services without having to travel to the hospice. Although the number of patients accessing the service was small, the feedback was extremely positive. The team are now in talks with local GPs to explore how they expand this service further.

The Day Services team also continued to contact patients over video and phone to provide support where needed. This included a twice weekly virtual coffee and quiz session for peer-to-peer support. Those without digital capabilities were supported to participate through the loan of a tablet.

Clinical training and education

Our role at Ashgate is to care for patients who have specialist needs. We are also committed to ensuring that all local healthcare professionals are able to provide the best end of life care for everyone. This is for patients who may be in the hospital, in a nursing home, in a residential home or being cared for in their own home. That's why we have continued to provide a varied programme of training and education, including evening seminars, as an educational resource to upskill the healthcare community of North Derbyshire.



David's story



David is living with heart failure after suffering a cardiac arrest in 2013. He started attending Ashgate's virtual sessions and has particularly enjoyed the horticultural sessions.

He said: "I've really enjoyed taking part in the sessions. They've been very interesting and I've been learning along the way.

"I've not really been a green-fingered person before so there's lots to take in, but it's been great, and I've even been eating some of my produce!

"We've made chives, mint – and it's been great watching it grow. It's come on well and some of it is still growing.

"It's a little something different and just shows you're never too old to learn new things. The course facilitator is lovely and very knowledgeable; she's just been great."

Our people

To continue to deliver high-quality palliative and end of life care, we need to be the best we can be. That is why we look after our staff and volunteers and support them to continue working through the personal and professional challenges brought about by the pandemic.

We are One Ashgate

Together, we are the 'One Ashgate' team, working with energy, openness and compassion. We strive to be a respectful and inclusive community that welcomes everyone, and we are committed to investing in the development of the skills and leadership of all our staff and our volunteers.

We have over 340 staff working across departments including clinical, fundraising and retail, marketing, finance, human resources and estates.

They are supported by 600 volunteers who carry out a whole range of roles to support our services. Their contribution across the entire organisation is immeasurable. There would be so much we would struggle to do without the time, skills and commitment of our volunteers. They bring an inestimable amount to our care and the operation of our hospice.

The work of all our staff and volunteers is valued and appreciated.





Our Head Chef, Mark, cooks up a storm for our patients and their loved ones.



Our dedicated volunteers

Our volunteers work tirelessly in 18 different types of volunteering roles, including our shops, gardens, on the ward and in fundraising. Our volunteers contribute to every department.

We have improved the ways in which we recognise and appreciate our volunteers. We've highlighted more volunteer stories and utilised national and local volunteer awards. Ashgate even scooped the Organisation of the Year award at the regional Voluntary Sector Awards ceremony.

We've also listened to how our volunteers would like to be recognised and have introduced pin badges for long service.

Did you know?

- Our volunteers come from all walks of life and with varying experience. Our **youngest** volunteers are **15 years old** and support our fundraising teams in raising the money needed to provide our care.
- Our **oldest** volunteer is **88 years old** and welcomes our patients and their families on our ward reception.
- **70%** of our volunteers identify as **female** and **46%** are aged between **56 and 75 years old**.

We would like to thank every one of our dedicated volunteers for their outstanding contributions to Ashgate Hospice in 2021/2022.

For more information about opportunities to volunteer with Ashgate Hospice, please visit **www.ashgatehospice.org.uk/volunteering**



Mike's story

Mike decided to volunteer in our Chesterfield town centre shop to gain some retail experience eight years ago – and hasn't looked back since.

Mike said: "I love being a volunteer in one of Ashgate's shops. You make no end of friends, gain plenty of experience and get a real sense of satisfaction from doing your bit for the hospice.

"I like helping people and if I can raise a laugh whilst I'm working behind the till then that's great!

"I've supported Ashgate in various ways and find giving up my time to help in the shops is rewarding and very much appreciated by the whole team.

"To anyone thinking about volunteering I'd tell them not to hesitate – I'm so glad I signed up and I wouldn't change it for anything."

Wellbeing and mental health

While the outside world started getting back to normal at the end of the financial year, this was not the same for our workforce.

Since the start of the pandemic and throughout this financial year, our staff and volunteers have been adhering rigorously to infection control measures all the while coping with workforce shortages, due to isolation requirements and because of the general shortage of nurses and other healthcare professionals in the system.

In August 2021, we appointed a dedicated Health and Wellbeing Advisor to help support our staff and volunteers. She implemented a comprehensive plan of wellbing measures, including 1:1 wellbeing calls, group meetings on nutrition and 30-minute mindfulness sessions.

We continued the extension of carers' leave entitlement for our staff from three to seven days, reflecting the fact that the pandemic had meant many people were dealing with more at home.

We also continued to support our workforce through established wellbeing initiatives, such as the Wobble Room, a confidential space for staff and volunteers to talk freely and regular huddles designed to encourage staff to offload their days and to support each other.

Investing in our skills

This year has been a positive one for Learning and Organisational Development, with the introduction of a new structure and several new posts to increase our specialist support in Organisational Development, Equality, Diversity & Inclusion (EDI), and Health & Safety, as well as meeting the increased needs across the hospice for learning and development as we continue to strive for excellence.

Throughout 2021/22 we have maintained a programme of learning to keep staff and volunteers upskilled and confident in all aspects of their work. We implemented a new online learning system to support this, delivering engaging e-learning courses alongside our calendar of interactive workshops.

Our Learning and Development team saw a gradual return to face-to-face events, including workshops and courses, school events and careers fairs. This has felt like an important step to keep our people and our wider community connected as we manage the ongoing risk of COVID-19.

We also began running management and leadership development programmes to ensure our workforce are well led and supported. Several graduates of our bespoke Leading Together programme were key to a Hot Groups project that used the collective leadership and creativity of Ashgate to inform our Three Ambitions.

Ruth's story



Former Royal Ballet dancer, Ruth Bailey, joined the Ashgate team as the Wellbeing Advisor. Putting a focus on wellbeing and mental health like never before.

Ruth said: "Since the start of the pandemic, we have seen how people have been impacted by the changes to our work and home lives. At Ashgate, we are taking a proactive approach to addressing these issues to ensure we have a well-supported and resilient workforce.

"My ambition is to help make wellbeing a priority for everyone. It can be difficult to give yourself permission to allow time for yourself, however, I believe it's the key to long term sustainability.

"I hope to build and promote a really strong message that wellbeing should be paramount to healthy staff and volunteers. Human beings have basic needs and I hope to give time, energy, and a safe space for people to acknowledge these in the workplace."

Staff and volunteer engagement

A pulse survey was undertaken of all staff between February and March 2022. The aim of the survey was to gain an understanding of how employees were feeling about their wellbeing, wellbeing support and training. There were 166 responses from a possible 314 staff members (52.8%).

The quantitative data didn't show much change since the last survey in April 2021; however, we would expect the impact of new interventions to take time to embed. The survey also revealed an increase in neutral responses to feeling stressed, suggesting this is still an area of concern. A focus group was held to explore this area further and action plans were formulated as an ongoing tool to make improvements.

A separate pulse survey was undertaken of all volunteers during the same time period, to gain an understanding of how volunteers felt about communication, recognition and wellbeing. There were 146 responses. Results revealed a 14% increase in positive responses to wellbeing support, which is a credit to our wellbeing work and to the managers and staff who provide this support to our volunteers.

The qualitative data was mainly positive. There are still a few volunteers who are unaware of the wider wellbeing support, but on the whole volunteers commented they felt supported or didn't need to access this support.

Equality, diversity and inclusion (EDI)

We are committed to providing accessible and equitable care and to upholding our values of inclusivity, respect, and openness. We want Ashgate to be open to everyone who needs us and we are working to understand how we can improve this.

At Ashgate this means we are:

- Identifying and removing barriers so that everyone who needs us in our local community can access our services.
- Offering care that is flexible, creative and person centred.
- Encouraging and nurturing diversity in our workforce, our volunteers and our supporters, so that we fully reflect the community we serve.

In 2021/22 we have been working towards a more inclusive Ashgate. This began with the employment of an EDI Lead in November 2021, followed quickly by the establishment of an EDI Advisory and Pride planning group. These groups are safe spaces for people across the organisation to collaborate and feed into the work we do at Ashgate Hospice.

We are now in regular attendance at the Chesterfield Equality & Diversity Forum and Derby BME Forum. This offers an opportunity to network and ensure Ashgate is aware of issues affecting minorities and/or under-served groups in our local community.

Links have been made with MacIntyre Learning Disability charity where we supported their Dying to Talk project. We also renewed our Disability Confident Status to ensure we always give full and fair consideration for all applicants.

A diversity calendar has also been developed so the hospice can celebrate festivals important to everyone in our workforce and the local community, allowing us to use our trusted voice to raise awareness of key events such as Pride.



Colin's story

Colin joined the hospice as an ambassador after we supported him following the sudden death of his husband in 2017.

Colin said: "Right from the very first contact with Ashgate, we never had any problem with the fact I was in a same sex couple.

"I was treated with the same respect as anybody else would be treated, probably more so as everyone seemed to understand that like most same sex couples, we had no family to give us that important extra support that others have.

"After Frank's death, I went into a spiral of suffering from anxiety, depression and having suicidal thoughts. That's when Ashgate's support mattered the most; they helped me get back on my feet again following what was a very difficult time."

"The team offering me bereavement support were incredibly kind and compassionate. I remember on my first couple of visits, I had to leave the room a couple of times as I found it emotionally overwhelming, and I sat outside in tears.

"It was so heart-warming when staff on reception and the Inpatient Unit stopped to see if I was okay and if I needed anything – I could not have been cared for or looked after better than that – and nobody back then even knew who I was!"

Gender pay gap

The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 requires all organisations with 250 employees or more to report annually on their gender pay gap.

The gender pay gap is defined as the difference in the average earnings of men and women over a defined period, regardless of role or seniority.

Our mean gender pay gap for 2021/22 is 0.96% and the median gender pay gap is -9.6%, Ashgate continues to close the gender pay gap ahead of national benchmarks. The mean gender pay gap for the hospice shows that on average for every £1 men earn, women are earning £0.99. The median gender pay gap shows that on average for every £1 men earn, women are earning £1.10.

We know that women are over-represented across the hospice sector. Whilst this brings huge opportunities and benefits, there are also challenges associated with health work being viewed as an inherently 'female' occupation, which tends to have poorer pay and conditions, and lower social status. There are wider socio-political obstacles to overcome for jobs traditionally associated with a particular gender to be occupied more equally by men and women (e.g. men encouraged to work in care and women in IT or estates). Ashgate is committed to playing its part in promoting this wider societal change.

At Ashgate we are determined that people who identify as women have equal opportunities for promotion and leadership roles, and equally that those identifying as men access flexible working options which may reduce the gender imbalance in part and full time working.

The hospice remains committed to carrying out annual equal pay audits to ensure equal work of equal value is recognised. A newly launched Equality, Diversity and Inclusion advisory group will act as a forum to consult on and evaluate potential policies and improvements.

Mean gender pay gap

0.96%



£1.00 **£0.99**

Median gender pay gap

-9.6%



£1.00 **£1.10**

Our voice

This year we made some big changes in how we communicate in order to reach more people living with a life-limiting illness in North Derbyshire. This was achieved through an overhaul of our look, the launch of a new website and new videos and podcasts.

A new look

In October 2021, we rebranded, a decision taken to modernise our look, ensure consistency across all our functions and inclusivity of our services. The revamped logo kept the familiar and much-loved heart design, but now includes some of the pink from our Sparkle Night Walk event. The font is also much easier to read and supports our aims to become more accessible.

We dropped 'care' from our name and are now known as Ashgate Hospice, again helping to improve the clarity of who we are and what we do.

This allowed us a more consistent look right across Ashgate - including at all our retail shops and coffee shops. We hope this will increase our impact, making it possible to see the extent of our work right across North Derbyshire.

To keep costs down, not all the changes will happen overnight – with shop fronts and workwear being changed gradually over time.



Help is just a click away

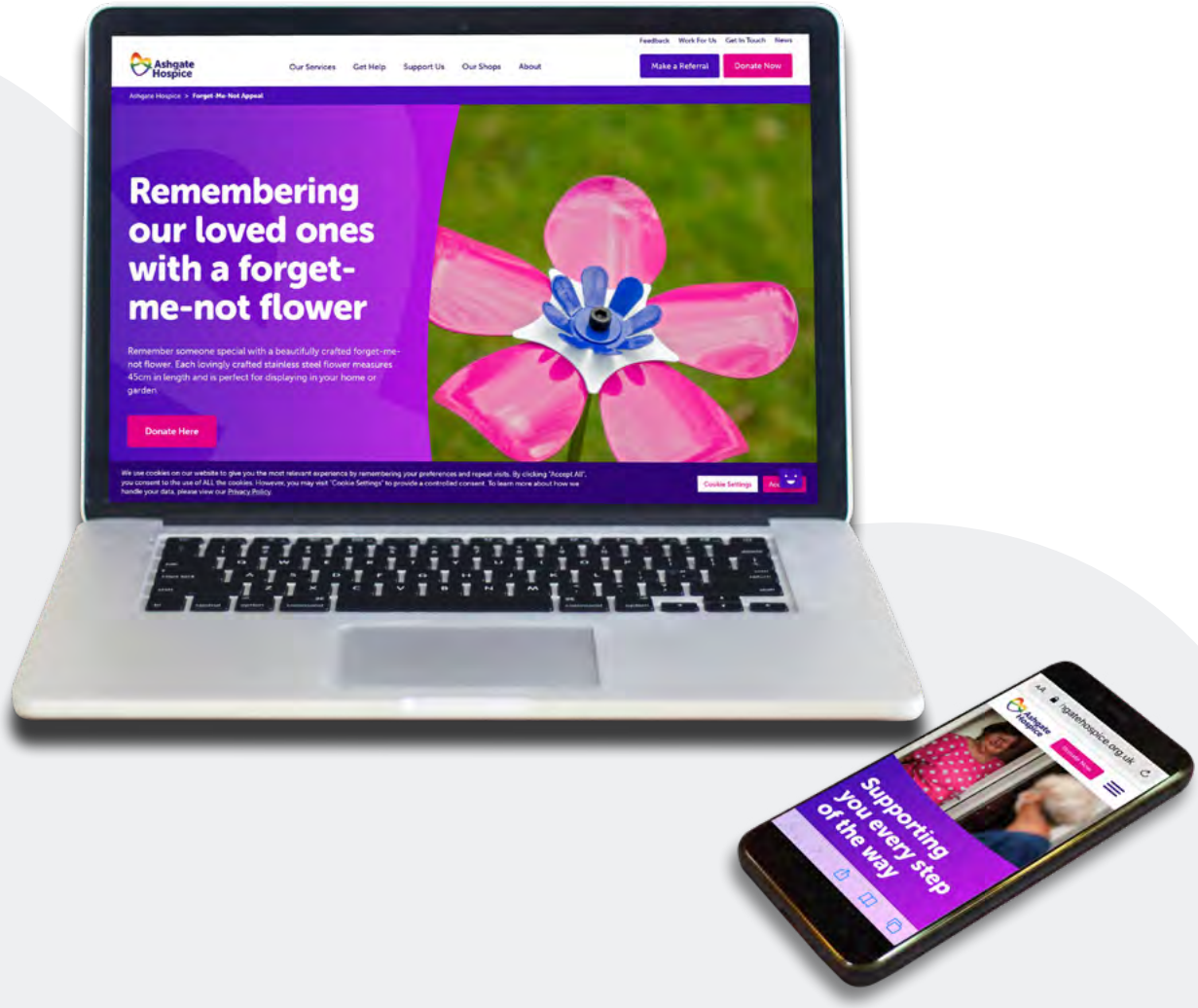
This year we launched a new website to ensure our vital information and support can be easily accessed and that patients and their families can make informed choices about their care.

Our aim has been for the website to be an extension of our care – and culture – so that people can visit the website for help, advice or support and to get a sense of what makes Ashgate so special.

The new website features information on what to expect if being admitted to Ashgate's Inpatient Unit or being cared for at home and has a range of podcasts, videos, leaflets and other resources available online. The new site also allows healthcare professionals to make a referral for their patients much more easily.

Since its launch in October, we have simplified the patient referral process and also significantly reduced the number of failed donations – important when every penny counts. It is now also possible to apply for a staff or volunteer role online without needing to download a form, meaning we have seen applications for our vacancies increase.

131,742
people visited the Ashgate Hospice website



Life and Death

In summer 2021, we launched series two of our Life and Death Podcast, which explores frank and honest conversations around death and what 'dying well' really means. Each episode welcomes both givers and receivers of end of life care, to discuss their unique relationships, hospice life, and how death affects the living.

We also released a one-off special at Christmastime to talk about grief over the festive season. Regular host and Ashgate Senior Physiotherapist, Stephen Rumford, was joined by two people who were at different stages of their grief alongside Ashgate's Reflective Practice Manager, Simon Bell, who shared his expert view and coping strategies.

Since its launch, the podcast has over 100 five-star reviews on Apple and 7,600 listens.

Removing the stigma of talking about death and dying

Encouraging people to talk more openly about death and dying is something always at the forefront of what we do. We believe that open and honest conversations will mean that people are more likely to experience a good death and have their wishes met.

Part of this work is spearheaded by our communications team who share stories and videos of people talking about their very personal experiences of death and dying. That's why in October 2021 they produced a series of videos which saw family members reunited with the Ashgate staff members who had cared for their loved ones.

Their emotional exchanges were caught on camera and have been watched 2,000 times on our YouTube channel.

The videos also received extensive media coverage, both locally and nationally and were featured on The Independent's website.





Sheryle (left) reunites with Ashgate nurse, Helen Harrison (right).

Sheryle's story

Sheryle reunited with Ashgate Hospice nurse Helen Harrison, who cared for her brother, Mark, in his final days.

Sheryle said: "Ashgate came on board when we were at our lowest. We didn't know what to do, where to go or how to do it.

"But as soon as Helen from Ashgate came into our lives everything just changed. Without her I don't know what we would've done.

"She just pulled everything together for us in a matter of days. I could phone her whenever I liked, even during the lockdown it was never a problem.

"Helen became such a big part of our life and I'm so grateful for everything she did for Mark and our family. She just never stopped caring."

Our financial sustainability

In 2021/22, fluctuating COVID-19 rates and changes to restrictions meant that fundraising has been more of a challenge than ever before. Our fundraising teams had to work even harder than ever as they adapted methods of fundraising to a 'virtual' world and developed innovative new products. Supporting them every step of the way has been the incredible community of North Derbyshire, whose unwavering support has ensured we can continue to be there when we're needed most.

As an independent charity,

only around 28% of our total income

comes from local NHS budgets.



That means we must raise a further

£8 million

from our shops, coffee shops and the generosity of our local community.

A retail revival

After spending much of the previous financial year closed, it was a welcome relief to be able to welcome our loyal supporters back to our shops and coffee shops in the early part of the year. Not only that, our dedicated team of staff and volunteers returned in full force to ensure our shops looked their very best and that the appropriate COVID-19 measures were implemented to keep everyone safe.

We quickly realised that managing sickness would be a challenge, as staff self-isolated due to COVID-19. However, their commitment to ensuring the shops remained open during another challenging year saw staff travelling across the county to cover shifts.

Equally committed were our super supporters who turned out in droves to make our first week back open our most successful to date, bringing in an incredible £105,326 to help fund palliative and end of life care across North Derbyshire.

The record-breaking didn't stop there. By the end of the financial year, we had broken all previous years' trading records.

In February 2022, we were delighted to be able to open our first standalone clearance clothing shop in Matlock, offering our supporters huge savings. The innovative new shop boasted items from as little as £1 and offered a new and affordable way for the community to support the work of the hospice.

Our eBay operation continued to enjoy the benefits of more people choosing to shop online with an increase in revenue of £59,304 in 2020/21 to £97,697 in 2021/22.



Our super supporters brought in

£105,326

to help fund palliative and end of life care

while our eBay operation increased last year's revenue from £59,304 to

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Remembrance reimagined

The previous year had been extraordinarily difficult for many people in so many ways. One of the most heart-breaking aspects of the pandemic was how it kept people apart, particularly at times when people needed each other more than ever.

That's why in May 2021, we launched our first ever Forget-Me-Not Appeal as a way for supporters to celebrate, mourn and remember their loved ones.

Sponsored by Graysons Solicitors, the appeal saw more than 3,000 steel forget-me-not flowers dedicated to loved ones, raising an incredible £117,000 to support our crucial care and services.

The appeal culminated in the flowers forming a display at Chatsworth House, home to Ashgate's president, the Duke of Devonshire. Here, supporters were able to come together after months of separation to remember their loved ones together, providing a much-needed and meaningful way to process their grief.

Ashgate Hospicecare's Forget-Me-Not Appeal





Steve's story

Supporting the Forget-Me-Not Appeal was Steve who dedicated a forget-me-not in memory of his wife, Julie, who experienced 'exceptional' care at our Inpatient Unit.

Steve said: "The hospice allowed Julie to spend her final moments in peace. The last thing I'd want was for her to have an unpleasant death; she'd suffered enough already. Ashgate gave her a very calming and peaceful end to her life and I'm enormously grateful for this.

"That's the marvellous thing about Ashgate – it takes the stress away so you can focus on creating those final memories together. The team are always there and make everything as easy as possible for you. Whatever we needed was there, whenever we needed it.

"In tribute to Julie, I've chosen to support Ashgate Hospice's Forget-Me-Not Appeal and dedicate a keepsake flower in memory of her. I know Julie would have loved to have walked through the stunning grounds at Chatsworth to see the meadow of flowers glistening in the sun."

Together again

After the previous years' virtual-only event, Sparkle Night Walk returned to an in-person event in September 2021. More than 1,700 people felt inspired to wear their flashing bunny ears with pride and light up the streets of Chesterfield in the 10k night walk.

This was the first mass participation event the hospice had held since lockdown began in 2020. Extra safety measures were implemented to keep staff, volunteers and participants safe, and this included mask wearing and staggered start times. The extra precautions didn't take away from the fun atmosphere or the success of the event which saw more than £110,000 raised.

Ashgate Hospicecare's Sparkle Night Walk 2021

Sponsored by Vertu Toyota

More than £110,000 raised





Kimberley's story

Kimberley Greaves was among those taking part in Sparkle Night Walk to help us raise crucial fund after we provided "exceptional" care for her husband Andrew.

She said: "I'll never forget the time I had a very difficult conversation with our children before bringing them both in to see their dad for the last time.

"The hospice was fantastic, and they even arranged to move Andrew to a larger room, so the children had more space to sit down at a table, if they wished to.

"I am so grateful for those last days we had together at the hospice. Despite some of our conversations being incredibly hard, we had each other.

"We talked about a future without Andrew, we arranged the funeral, we cried, and we held hands.

"It's only been a few months since Andrew passed and already the kids and I are being incredibly supported by Ashgate.

"I worry immensely about the lasting effect losing their dad will have on the children for a lifetime. I know now that the hospice will be there to support us for as long as we need them."

Winter Crisis Appeal

In autumn 2021, we launched a Winter Crisis appeal as our teams braced themselves for another challenging winter brought about by COVID-19 and winter flu circulating at the same time.

We once again sought support from our supporters to help us get through the difficult months ahead – ensuring the hospice could continue to provide compassionate end of life care at a crucial time and support the wider health system as it did the previous year.

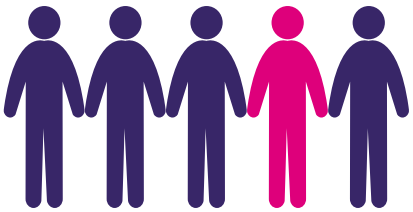
The appeal received widespread coverage including print, radio and online and was complemented by a digital advertising campaign, helping to raise an incredible £122,000.

Gifts in wills

Over the past year, we were fortunate to receive 35 legacy gifts. Six of these gifts had a value of £100,000 or more and our total legacy cash receipts reached over £1.6m, exceeding our expectations for the year.

This is our single largest voluntary income stream, and we intend to continue to promote legacy giving as an easy way to support the hospice's work in the future, at no cost to the supporter today.

We will continue to work closely with local solicitors and online providers to make the will-making process as easy and accessible as possible for everyone.



One in five of our patients is cared for by a gift left in a will

An extraordinary year for trusts and grants

Without funding from trusts and foundations, we wouldn't be able to make a difference to the lives of so many people living with a life-limiting illness and their loved ones. In 2021/22, we received almost £315,000 from a wide range of charitable funds. This included:

- £100,000 from Barclays COVID–19 Community Relief Fund to help us deliver virtual support during the pandemic and the development of a hospice wellbeing hub in the community.
- £76,000 from BBC Children in Need to support children and young carers in the Bolsover area having to deal with the loss of someone they love.
- The Rolls Royce Foundation who are enabling us to deliver creative therapy support to more children experiencing grief and loss across North Derbyshire.
- The Morrisons Foundation for funding our first cuddle bed at the hospice which allows loved ones to be close to each other.
- The Hospital Saturday Fund who funded a specialist falls bed which helps us safely care for our patients staying on our Inpatient Unit who have an increased risk of falling.
- £5,000 from B&Q Foundation towards urgent work on our boiler system at the hospice.

We have received many generous donations towards our running costs during such a difficult and uncertain time. Examples of these include donations from the Chesterfield & District Joint Crematorium, the Mark Benevolent Fund, ShareGift, the Sir Jules Thorn Charitable Trust, the Albert Hunt Trust, Redbrik Foundation and the Masonic Charitable Foundation to name a few. We are truly grateful to all trusts and foundations who have shown their support throughout the year.

Gifts in kind

Not all the support we receive is monetary; many companies and organisations choose to support us by donating their goods or services. This support is just as invaluable, and in 2021/22 gifts in kind totaled £97,000. Some of those gifts include:

1. Central Technology, Ashgate Hospice's IT supplier, donated Netflix and Smart TVs for some of the rooms at our Inpatient Unit. This was supplemented by Smart TVs from other companies, such as BRM Solicitors, Morgan Sindall, Wilkins Vardy and S3 ID. This meant our patients and their families could enjoy their favourite shows together from the comfort of their rooms.
2. Montcalm lent the hospice a specialist falls bed and kindly gifted the hospice this to keep.
3. Penny Hydraulics donated a pallet truck to the hospice to help us manage our PPE stock.
4. Arnold Clark and The Van Yard both kindly lease vehicles to the hospice.
5. Staff, volunteers, patients and their families were helped to celebrate Easter with generous donations of chocolate eggs from Spar, Proact, Lindt, Tesco Extra and Morrisons Staveley and Chesterfield.
6. Fresh Ideas Florists donated bunches of flowers to patients on our Inpatient Unit for Mother's Day.
7. Harold Lilleker Funeral Directors provided all the outdoor screens and projectors so we could show images of loved ones that our Sparkle Night Walkers were remembering. We were also able to generate funds by local businesses advertising on the screens.



Every penny really does make a difference.

In fact, last year we received **15,794 donations of £10 or less**. Together, this raised

£111,677

Jacksons The Bakers Ltd have been supporting Ashgate Hospice by providing beautiful fresh bread and cakes free of charge for many years. When Emma Jane and Phil took over the company, they didn't think twice about continuing this incredibly generous donation. Since 2017, they have provided over £19,000 worth of freshly baked produce.

Emma Jane said: "We are really proud to support the hospice, the care they provide is outstanding and we are so pleased to play our part in helping them to continue to be there for our community.

"It is important to us at Jacksons that the team at Ashgate feel supported. Sending extra treats during the pandemic was our way of letting them know we were thinking of them during the toughest of times.

"We were also thrilled to support the Sparkle Night Walk, donating sausage rolls and flapjacks to all of the wonderful volunteers."



Since 2017, Jacksons The Bakers Ltd have provided over £19,000 worth of freshly baked produce.

In partnership

Chairman of North East Derbyshire District Council, Councillor Martin Thacker MBE, supported the hospice after choosing us as his charity of the year.

Councillor Thacker, who is also Vice-Chairman of Chesterfield Football Club and Director of Chesterfield Football Community Trust, and his consort, Jean Spencer, raised a record-breaking total of £79,500. From a Peaky Blinders-themed party to a festively fun Christmas market – Councillor Thacker and his team, with the support of Ashgate's fundraisers, organised a total of 30 different events.

Councillor Thacker said: "We are delighted to present Ashgate Hospice with this record-breaking amount of money. Everyone is aware of the tremendous difference the hospice makes in the community.

"We know the funds will be used to help continue their fantastic work. I am very grateful to all those who have supported our appeal and helped us to support the hospice."

Councillor Thacker has organised a total of 30 different events.



How we're governed

Governance and Trusteeship at Ashgate

Our Board of Trustees consists of volunteers who bring a range of professional expertise and life experiences to shape the direction of our strategic approach. Trustees are not involved in the day-to-day management of the charity. They delegate this responsibility to the Chief Executive and the Leadership Team. They hold the Leadership Team to account, ensuring that the hospice is managed effectively and in line with the highest standards of quality and customer service.

Trustees undertake a full induction and take part in the role-specific essential training provided by the hospice for all staff and volunteers. Trustees also take part in Quality Visits to clinical services. They shadow both clinical and non-clinical teams to gain assurances about performance and quality, to introduce themselves to staff and volunteers and to increase their knowledge of our services.

Our Ashgate Governance Framework sets out a robust hospice-wide governance and assurance structure. This has fully developed operational alignment and an emphasis on the 'golden thread' from frontline to Board. There are three committees which report directly to the Board. Their membership is drawn from the Trustees and senior leaders. The Healthcare Quality Committee includes clinical quality and safety, evidence-based care and patient experience in its portfolio. The People, Engagement and Performance Committee has a focus on our staff and volunteer workforce, on information governance, IT and digital development and community engagement. The Finance and Strategy Committee is charged with governance of our income generation, our reserves and investments, procurement and estate management.

This framework enables the Board meetings and development days to focus on long-term strategy, oversight of the charity's performance, risk management and sustainability. The Board and the Committees meet on a quarterly basis.

Public benefit

The Trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the hospice's objectives and in planning its future activities. In particular, the Board of Trustees considers how planned activities will contribute to the objectives they have set. The Trustees are confident that this report appropriately reflects public benefit in some detail when describing the purpose, objectives and strategic plans, services, service developments and future plans for continued or enhanced service delivery.

Fundraising standards

Ashgate Hospice's approach to fundraising is focused on supporter care through extensive and regular training of staff and volunteers. Ashgate Hospice is registered with the Fundraising Regulator and ensures its fundraising is legal, open, honest and respectful. We monitor third parties who fundraise for us by asking supporters for feedback, providing training and following up any complaints. The charity received no complaints during the year.

As part of our approach, policies and standards, we ensure that we protect vulnerable people and other members of the public from inappropriate behaviour. We train everyone involved in fundraising and clear processes are in place to monitor and manage every interaction. In the past year, we have not uncovered any failure by staff, volunteers, professional fundraisers or commercial participators to comply with our policies and standards.

Continually learning and improving

Ashgate Hospice tracks and publishes its quality data, to ensure we are continually learning and improving. Our aim is to give all our patients and their loved ones the best possible experience.

We are currently working to review our patient feedback questionnaires. This is so that we can improve how we capture their experiences. We are also looking at alternative methods to enable service users to become more involved in providing constructive feedback.

Where we can do better, we strive to learn from that experience for next time. A data workstream involving all departments has continued to review and develop our data and business intelligence capabilities. This is so that we can improve our quality improvement and governance practice. Quality Improvement Bronze Level training has been rolled out across all teams and is continuing.

Every three months, we collate quarterly reports that are shared with our NHS commissioners. We look at patient trends and feedback, areas for improvement and ways we could work differently to enhance the services we provide.





Financial review

Fragility and resilience

The hospice has a largely fixed and predictable cost base, but it faces significant uncertainties around the timing and scale of its income. Only 28% of our funds comes from our contract with the local NHS and a further 10% is dependent on very unpredictable but very gratefully received legacies. The rest is dependent on the goodwill of our local community in supporting our fundraising events and in providing high quality donations of stock for sale in our shops. This is a fragile funding model for an ever more important cornerstone of the healthcare system.

For the financial year 2021/22, the hospice Board approved a net deficit budget for combined hospice and retail operations of £2m. Our previous annual report explained that the hospice had an underlying structural deficit of £1m (a shortfall in statutory funding). Meanwhile the continued impacts of COVID-19 were expected to reduce income by £0.2m while an increase in costs of around £0.8m was necessary and unavoidable to maintain a high quality and integrated range of clinical services. This included maintaining competitive salaries, bolstering our IT and other infrastructure and growing digital and other fundraising for the future.

In practice the hospice has returned a smaller deficit of £0.5m but, as in the previous year, the main mitigating factors were specific and non-recurring, which do not remove the ongoing deficit challenge for future years. For 2021/22, the key factor was £0.9m of unbudgeted emergency hospice funding from NHS England and NHS Improvement (NHS EI) via Hospice UK for the period December 2021 to March 2022.



28% NHS funding

62% Fundraising and Retail

10% Legacies

Our finances looking forwards

Looking ahead, the opportunities and requirements for supporting patients and families in North Derbyshire are vast. The financial challenge to do so is, however, immense.

Through our 33 years of service, the hospice has developed a finely balanced portfolio of inpatient facilities and palliative care at home. Removing any part of that portfolio to save money would be hugely damaging to the patient experience and would result in the NHS having to step in with beds and nurses, but without the subsidy of charitable donations that Ashgate Hospice generates. Cuts would therefore destabilise the hospice and cost the NHS significant multiples of what it pays the hospice.

In this context the hospice Board has approved a £2.1m deficit budget for 2022/23 to maintain its integrated services and the local NHS Derby & Derbyshire Integrated Care Board has agreed to provide up to £0.9m extra one-off funds for 2022/23 to reduce that deficit, so that the hospice will not fall below its risk-based reserves target by year end. Implicit in this is that the hospice will draw down its own reserves during 2022/23 which is manageable in the year ahead but is not sustainable in future years. The Hospice Budget Committee meets quarterly to review the latest results and forecasts and would initiate remedial actions if felt necessary.

A longer term, sustainable funding model is required, and positive joint work is under way to achieve this.

Government support

In 2021/22, NHS England (NHSE) awarded funding to allow the hospice to make available bed capacity and community support from December 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

As the cost-of-living crisis escalates in 2022/23, the hospice and the wider hospice and charity sector will continue to advocate for sustainable funding to maintain this vital community service.



In 2021/22, the NHSE awarded funding to allow the hospice to provide support to people with complex needs in the context of the COVID-19 situation.

Reference and Administrative Information

Charity Name: Ashgate Hospicecare
Charity Registration Number: 700636
Company Registration Number: 02263980

Registered Office and Operational address: Ashgate Road, Old Brampton, Chesterfield, S42 7JD

This Trustees' Report also meets the requirements of a Directors' Report for Companies Act purposes.

Directors and Trustees

Andrew Archibald (resigned 17/12/2021)
Dr Steve Bradder (resigned 09/12/2021)
Penny Brooks, Vice Chair
Ruth Cooper (appointed 29/09/2022)
Andrew Dukelow (sadly died 21/07/21)
Nicholas Jeffrey, Chair
Kirsty Mcmillan
Nigel Myhill
Claire Pilsworth (appointed 01/07/2022)
Malcolm Pope, Vice Chair
Daniel Ratchford, Vice Chair
Tim Robinson (appointed 29/09/2022)
Dermot Toberty

Secretary: Heidi Golden

Leadership Team

Matt Corbishley
Helen Furnivall (Resigned 06/05/2022)
Rod Ismay
Dr Sarah Parnacott
Peter Stone
Barbara-Anne Walker
Hayley Wardle

Auditors

Azets Audit Services Limited, Triune Court, Monks Cross Drive, York, YO32 9GZ

Bankers

Barclays, 1 St. Paul's Place, 121 Norfolk Street, Sheffield, S1 2JW

Governing Document

Ashgate Hospicecare is a charitable company limited by guarantee, incorporated on 2 June 1988 and registered as a charity in England and Wales on 14 September 1988.

The charity's objects are specifically restricted to the relief of sickness and the preservation of health among people residing permanently, or temporarily, in North Derbyshire.

The company was established under a Memorandum of Association and is governed under its Articles of Association which were revised and amended in 2016, to ensure that appropriate consideration was given to tenures and succession planning for the Chair and Trustees.

Related Parties

Ashgate Hospicecare Shops Limited is a subsidiary of Ashgate Hospicecare. During 2021/22, it operated fifteen shops and three coffee shops, the profits of which are spent wholly supporting the work of Ashgate Hospicecare.

Ashgate Hospicecare is a partner and shareholder in Hospice Quality Partnership (HQP). HQP was set up to support independent hospices with procurement, benchmarking and collaboration regarding the improvement of value and reduction of cost, as well as the potential to generate new income through dividends in the future. The hospice sees significant benefits in being a Partner/Shareholder with HQP and is supportive of the company's aims.

Financial Review

The consolidated net deficit before investment movements for 21/22 is £492k compared to a net surplus of £2,984k in 20/21. The prior year result was unusually high, as explained in last year's annual report. It reflected £3m non-recurring NHSE funding distributed via Hospice UK plus a fantastic response from donors to crisis appeals as well as exceptionally high legacy income recognition adjustments under charity accounting principles.

21/22 was then budgeted to have a £2m deficit. The actual result of £492k deficit reflects an unexpected third round of £880k of NHSE funding distributed via Hospice UK and a faster recovery of charity shop sales after Covid retail restrictions ceased.

Longer term, the Hospice continues to experience a shortfall in statutory funding which is reflected in a budgeted deficit of £2.1m for 22/23. The Hospice plays an active role in the Joined Up Care Derbyshire End of Life Programme Board for North Derbyshire, including the development of a new Derbyshire End of Life strategy. This is expected to shape commissioning decisions and clarity about future NHS funding. In light of this system wide review, plus the ongoing national shortage of hospital bed space, the Trustees have approved this continued deficit plan in order to support the wider system while the funding review continues. The Trustees recognised that the Hospice had sufficient reserves to absorb such a deficit in 22/23 but that appropriate interventions would be made beyond that should a step change in funding not materialise.

Total expenditure of £11,567k (20/21 - £10,983k) has risen due to a full year of new goods purchases for retail sale whereas lockdowns meant a limited sales period in the prior year. Salaries and other costs also rose but were partly offset by vacancies and recruitment challenges.

Total income of £11,075k (20/21 - £13,967k) is significantly down due to the scale of one-off funding during Covid, but is partly offset by a full year's retail trade which included sales of donated goods and new goods. In particular, participation in events and community based activities were impacted with fewer participants taking part in these activities resulting in lower income levels than planned.

Total funds have decreased from £9,843k to £9,371k due to the deficit above, partly offset by a modest increase in investment valuations of £20k.

Investment Policy

The hospice has a portfolio of long-term investments, deposit accounts and an interest bearing current account, to ensure appropriate liquidity of funds. Investments were £1,027k at 31 March 2022, an increase of 2%. With regard to the ethical investment element of the Policy, the Trustees do not wish to adopt an exclusionary policy when considering prospective investments, or potential donation receipts. However, individual investment proposals, and donations, may be rejected if they are perceived to be in conflict with the purpose of the Charity.

Reserves Policy

Reserves are held to give the hospice a financial buffer against shocks to income and expenditure. They are necessary for protecting services in the event of a short-term disruption to normal income streams and they ensure the hospice has funds available to cater for capital works.

The Hospice implemented a risk based reserves policy in 19/20. This has supported in subsequent years strategic decision making and has been subject to regular review in the Finance & Strategy Committee.

Whilst total funds have decreased by 5% from £9,843k to £9,371k, free reserves have increased from £2,680k to £4,505k. This reflects the designation of funds in 20/21 to accommodate the budgeted deficit of the Hospice for 21/22 whereas no such designation has been made in 21/22 based on the expectation of a change in funding during the year or interventions to reduce costs if a step change in funding does not materialise.

Financial Review continued

The risk based target for free reserves at 31 March 2022 was £2,797k (20/21 – £2,374k) meaning that the Hospice was at 161% of its target (20/21 – 96%).Free reserves are net of restricted funds and designated funds. The purpose of such funds is narrated further in Note 25 of the accounts.

Senior Management Remuneration

Pay awards for the workforce are recommended to the Board by the Chief Executive with supporting evidence and rationale from the Leadership Team. No recommendations are made by the Chief Executive or Leadership Team for setting their own pay or remuneration, other than where an explicit recommendation or offer is made by them to forfeit any award. Instead, the Board of Trustees take responsibility for making any such decisions for key senior management personnel based on organisational performance, affordability and taking account of sector benchmarks. The HR team undertake regular pay benchmarking exercises for the workforce in general and this activity is outsourced to an external HR consultant in the case of benchmarks for Chief Executive and Leadership Team salaries.

Principal Risks and Uncertainties

The Board of Trustees has established processes to assess business and corporate risk. This involves identifying the types of risk the charity faces, prioritising them in terms of potential impact and the likelihood of occurrence, and identifying means of mitigating the risks. This assessment is monitored and updated on a regular basis.

The corporate risk register and the operational risk registers are monitored by the Risk Review Group which meets quarterly to ensure effective operational management of risk. Operational risk registers are, in turn, reported to the three Board Committees to ensure effective oversight and escalation. The corporate risk register is reported to the Board to ensure that Trustees are fully appraised of any strategic risks and the actions being taken to mitigate them.

A wide range of policies and procedures have been introduced to minimise risk and ensure compliance with legislation and CQC standards. Specific policies relating to risk include management guidelines, standing financial instructions, health and safety, information governance, clinical issues and employment.

Going Concern and Cashflow

The Trustees have considered the impact of COVID-19 and the global economic situation on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2024 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Statement of Trustees' Responsibilities

The trustees (who are also directors of Ashgate Hospicecare for the purposes of company law) are responsible for preparing the Trustees' Annual 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 trustees 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 trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2019 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees 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.

In so far as the trustees are aware:

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

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Auditors

Azets Audit Services Limited were appointed auditor to the charitable company following their acquisition of the trade of Garbutt & Elliott Audit Limited on 1 December 2021. Azets Audit Services Limited have indicated their willingness to stand for reappointment at the Annual General Meeting.
By Order of the Board

Malcolm Pope

Malcom Pope
Vice Chair of Trustees
1st December 2022
Chesterfield

Independent Auditor's Report to the Members of Ashgate Hospicecare

Opinion

We have audited the financial statements of Ashgate Hospicecare (the "parent charitable company") and its subsidiary (the "group") for the year ended 31 March 2022 which comprise the consolidated statement of financial activities, the company and consolidated balance sheets, the consolidated cash flow statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 March 2022 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on both the group's and the parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

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

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' report (incorporating the strategic report and the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Trustees' report (incorporating the strategic report and the directors' report) has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

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

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of trustees

As explained more fully in the Trustees' responsibilities statement, the Trustees 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 they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Independent Auditor's Report to the Members of Ashgate Hospicecare

Our responsibilities for the audit of the financial statements

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

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

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

Extent to which the audit was considered capable of identifying irregularities, including fraud

We identified areas of laws and regulations that could reasonably be expected to have a material effect on the financial statements from our general commercial and sector experience, through discussion with the Trustees and other management, and from inspection of the charity's regulatory and legal correspondence. We discussed with the Trustees and other management the policies and procedures regarding compliance with laws and regulations. We communicated identified laws and regulations throughout our team and remained alert to any indications of non-compliance during the audit.

The group and parent charitable company are subject to laws and regulations that directly affect the financial statements including company law, charity law, financial reporting legislation, pensions legislation, taxation legislation and further laws and regulations that could indirectly affect the financial statements, including safeguarding, medicines regulation, environmental, health and safety and employment legislation. We assessed the extent of compliance with these laws and regulations as part of our procedures on the related financial statement items. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any. These procedures did not identify any potentially material actual or suspected non-compliance.

To identify risks of material misstatement due to fraud we considered the opportunities and incentives and pressures that may exist within the group and the parent charitable company to commit fraud. Our risk assessment procedures included: enquiry of Trustees and other management to understand the high level policies and procedures in place to prevent and detect fraud, reading Board minutes and considering performance targets and incentive schemes in place for management. We communicated identified fraud risks throughout our team and remained alert to any indications of fraud during the audit.

As a result of these procedures we identified the greatest potential for fraud in the following areas:

- income recognition and in particular completeness, the risk that income is recognised in the wrong reporting period;
  and
- subjective accounting estimates.

Fraud risks arise due to a potential desire to present the results in a differing light to suit management objectives. As required by auditing standards we also identified and addressed the risk of management override of controls.

We performed the following procedures to address the risks of fraud identified:

- identifying and testing high risk journal entries through vouching the entries to supporting documentation;
- assessing significant accounting estimates for bias;
- testing the recognition of income and in particular that it was recognised in the correct period; and
- testing the control environment around cash takings, including segregation of duties and cash reconciliations.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it.

In addition, as with any audit, there remained a higher risk of non-detection of fraud, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. Our audit procedures are designed to detect material misstatement. We are not responsible for preventing non-compliance or fraud and cannot be expected to detect non-compliance with all laws and regulations.

Using our report

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

Azets Audit Services Ltd.

01/12/2022

Alan Sidebottom (Senior Statutory Auditor)
For and on behalf of Azets Audit Services Limited
Chartered Accountants
Statutory Auditor

Triune Court
Monks Cross Drive
York
YO32 9GZ

Consolidated Statement of Financial Activities

Incorporating a Consolidated Income and Expenditure Account

For the year ended 31 March 2022

		Unrestricted Funds	Designated Funds	Restricted Funds	**2022 Total**	2021 Total
Income:		£	£	£	**£**	£
Donation and legacies						
Donations	(2)	2,004,491	-	212,573	**2,217,064**	2,886,244
Legacies	(3)	562,381	-	1,500	**563,881**	1,704,114
		2,566,872	-	214,073	**2,780,945**	4,590,358
Income from other trading activities:						
Shops	(4)	3,251,641	-	-	**3,251,641**	1,374,196
Fundraising	(5)	1,020,660	-	-	**1,020,660**	826,037
Other	(6)	114,105	-	-	**114,105**	122,022
		4,386,406	-	-	**4,386,406**	2,322,255
Investment income	(7)	1,372	-	-	**1,372**	1,041
Income from charitable activities	(8)	3,012,897	-	-	**3,012,897**	3,491,398
Income from COVID-19 Grants	(9)	-	-	880,154	**880,154**	3,077,114
Income from furlough	(10)	13,350	-	-	**13,350**	485,011
Total income		9,980,897	-	1,094,227	**11,075,124**	13,967,177
Expenditure:						
Costs of raising voluntary income	(11)	579,404	-	-	**579,404**	570,407
Fundraising & other trading costs	(11)	3,652,729	-	-	**3,652,729**	3,231,594
Costs of charitable activities	(11)	6,420,426	-	914,640	**7,335,066**	7,180,880
Total expenditure		10,652,559	-	914,640	**11,567,199**	10,982,881
Net (expenditure)/income before investment gains		(671,662)	-	179,587	**(492,075)**	2,984,296
Gains on investments	(16b)	19,941	-	-	**19,941**	140,476
Corporation tax	(24)	-	-	-	**-**	19,727
Net (expenditure)/income		(651,721)	-	179,587	**(472,134)**	3,144,499
Funds transfer	(25)	106,497	-	(106,497)	-	-
Designated funds transfer		2,279,085	(2,279,085)	-	-	-
Net movement in funds		1,733,861	(2,279,085)	73,090	**(472,134)**	3,144,499
Reconciliation of funds						
Total funds brought forward		7,292,645	2,379,085	171,721	**9,843,451**	6,698,952
Total funds carried forward	(25)	9,026,506	100,000	244,811	**9,371,317**	9,843,451

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. A fully detailed Consolidated Statement of Financial Activities for the year ended 31 March 2021 is shown in note 30. The Statement of Financial Activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

Balance Sheets

At 31 March 2022

		2022 Group	2021 Group	2022 Charity	2021 Charity
Fixed assets		**£**	£	**£**	£
Tangible assets	(15)	**4,876,608**	4,974,394	**4,746,443**	4,884,437
Investments	(16 a&b)	**1,026,780**	1,006,840	**1,026,784**	1,006,844
		5,903,388	5,981,234	**5,773,227**	5,891,281
Current assets					
Stock of finished goods		**43,859**	35,232	**2,572**	3,215
Debtors	(17)	**2,194,386**	3,159,745	**3,241,983**	3,925,981
Cash at bank and in hand		**2,408,861**	1,888,709	**1,709,015**	1,457,259
		4,647,106	5,083,686	**4,953,570**	5,386,455
Creditors: Amounts falling due within one year	(18)	**(824,177)**	(859,872)	**(620,035)**	(700,415)
Net current assets		**3,822,929**	4,223,814	**4,333,535**	4,686,040
Total assets less current liabilities		**9,726,317**	10,205,048	**10,106,762**	10,577,321
Creditors: Amounts falling due after more than a year	(19)	**(355,000)**	(361,597)	**(355,000)**	(361,597)
Net assets		**9,371,317**	9,843,451	**9,751,762**	10,215,724
Unrestricted charity funds					
General		**9,026,506**	7,292,645	**9,406,951**	7,664,918
Designated funds		**100,000**	2,379,085	**100,000**	2,379,085
Restricted funds		**244,811**	171,721	**244,811**	171,721
Total funds	(25 & 26)	**9,371,317**	9,843,451	**9,751,762**	10,215,724

The financial statements were approved by the Board of Directors on 1st December 2022 and are signed on its behalf by:-

Malcolm Pope

Malcom Pope Director

Company Registration No. 02263980

The notes on pages 63 to 83 form part of these financial statements.

Statement of Cash Flows

For the year ended 31 March 2022

		2022 £	2021 £
Cash generated by operating activities	(28)	**787,807**	1,442,226
Cash flows from investing activities			
Interest received		**1,372**	1,041
Purchase of tangible fixed assets		**(249,237)**	(233,172)
Cash used in investing activities		**(247,865)**	(232,131)
Cash flows from financing activities			
Repayment of finance leases		**(19,790)**	(19,790)
Cash used in financing activites		**(19,790)**	(19,790)
Increase in cash and cash equivalents in the year		**520,152**	1,190,305
Cash and cash equivalents at the beginning of the year		**1,888,709**	698,404
Cash and cash equivalents at the end of the year		**2,408,861**	1,888,709

Notes to the financial statements

For the year ended 31 March 2022

1. Accounting policies

a. Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Accounting Practice.

Ashgate Hospicecare 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.

The financial statements are presented in sterling which is the functional currency of the charity and rounded to the nearest £1.

b. Company status

The charity is a company limited by guarantee and has no share capital. The charity is registered in England and Wales. The members of the company are the Trustees named on page 52. 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.

c. Basis of consolidation

The consolidated financial statements include the results of Ashgate Hospicecare and its wholly owned subsidiary Ashgate Hospicecare Shops Limited on a line by line basis.

A separate Statement of Financial Activities for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

The deficit for the year for the charitable company was £(463,961) (2021 surplus £3,289,401).

d. Going concern

The Trustees have considered the impact of COVID-19 and the global economic situation on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2024 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Notes to the financial statements

For the year ended 31 March 2022

e. Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees 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 Trustees 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.

f. Critical accounting estimates and areas of judgment

Estimates and judgments are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Critical accounting estimates and assumptions: The company makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. There are no estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year.

Depreciation of tangible assets

Depreciation policies have been set according to management's experience of the useful lives of the assets in each category, something which is reviewed annually.

The charity incurs expenditure on creating tangible fixed assets for use in the charity with costs being incurred over a number of months. The Trustees believe it is possible to segregate these costs into identifiable projects, and as such no depreciation is charged on that project until it is brought into use.

Legacies

Legacies are recognised as income when probate has been granted, the charity has established its entitlement to the funds and where sufficient information is available to allow it to measure its entitlement.

Notes to the financial statements

For the year ended 31 March 2022

g. Income

All income is recognised when 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.

Donated services are recognised when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and the economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised. Please refer to the Trustees' report for more information about their contribution.

Donations and gifts towards the running cost of the hospice are treated as income when received. Gifts in kind and donated goods are valued where the item is specifically identified and some reliable form of valuation is available. Goods donated for sale are not accounted for until the point of sale. On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Grants are included in the SOFA in the year in which they are receivable and allocated to the necessary funds accordingly, and would be deferred if relating to services in a future period.

Lottery income is accounted for in respect of those draws that have taken place in the year. Income received from draws after the balance sheet date is deferred to the relevant accounting period.

Trading income is recognised at point of sale for both donated and purchased goods.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

Retail grants received after the first national lockdown have been recognised in the period in which they relate to.

h. Expenditure

Expenditure is recognised on an accruals basis inclusive of any irrecoverable VAT. Costs of generating funds comprise the costs associated with attracting voluntary income. Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them, which have been apportioned based on headcount and activity.

Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include executive costs, HR & IT costs, other support functions, depreciation and governance costs which support the services providing care to patients and families.

These costs have been allocated between the costs of raising funds and expenditure on charitable activities on the basis set out in notes 11 and 12.

Notes to the financial statements

For the year ended 31 March 2022

i. Tangible fixed assets and depreciation

All fixed assets are included at cost, net of depreciation and any provision for impairment. Depreciation is calculated to write down the cost of fixed assets by equal annual instalments over the following periods:-

Freehold buildings	2% straight line per annum
Fixtures and fittings	25% straight line per annum
Motor vehicles	25% straight line per annum
Buildings extension	2% straight line per annum
IT hardware	33% straight line per annum
Plant	10% straight line per annum

All assets costing more than £1,000 are capitalised, except for computer equipment where all items with a value of £100 or more are capitalised.

j. Fixed asset investments

Investments are a form of basic financial instruments and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing market price, except for shares in the trading subsidiary which are carried at cost. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

All gains and losses are taken to the Statement of Financial Activities as they arise.

k. Stock

Stocks of retail goods are included at the lower of cost and net realisable value. Donated items of stock for resale or distribution are not included in the financial statements until they are sold or distributed because the Trustees consider it impracticable to be able to assess the amount of donated stocks as there are no systems in place which record these items until they are sold and undertaking a stock take would incur undue cost for the charity which would far outweigh the benefits. Additionally, due to the agent arrangements present for the purposes of retail gift-aid, some donated items of stock held at the year end are not technically an asset of the charity and therefore no value can be assigned to them.

Notes to the financial statements

For the year ended 31 March 2022

l. 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.

m. 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.

n. Creditors and provisions

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

o. Operating leases

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred.

p. Pensions

The pension costs charged in the financial statements represent the contributions payable by the charity during the year in accordance with FRS 102. Employees who joined the hospice before February 2020 and who were already active members of the NHS Pension Scheme are permitted to continue contributing to the Scheme. Rates are set by the NHS Pensions Agency. The scheme is a multi-employer scheme not designed to identify the assets and liabilities attributable to the Charity, so in accordance with FRS102 the scheme is accounted for as a defined contribution scheme.

Notes to the financial statements

For the year ended 31 March 2022

2. Donations

	Unrestricted	Restricted	2022 Total	Unrestricted	Restricted	2021 Total
	£	£	£	£	£	£
General donations	**933,767**	**17,765**	**951,532**	1,438,716	37,463	1,476,179
In memory	**319,809**	**2,375**	**322,184**	342,959	9,547	352,506
Gift aid income from individuals	**172,692**	**622**	**173,314**	226,984	906	227,890
Community	**356,156**	**5,664**	**361,820**	371,749	1,370	373,119
Gifts in kind (see below)	**96,892**	**-**	**96,892**	116,057	-	116,057
Trusts and grants	**125,175**	**186,147**	**311,322**	128,953	211,540	340,493
	2,004,491	**212,573**	**2,217,064**	2,625,418	260,826	2,886,244

Gifts in kind	Unrestricted	Restricted	2022 Total	Unrestricted	Restricted	2021 Total
	£	£	£	£	£	£
Donated food & drink	**2,704**	**-**	**2,704**	8,376	-	8,376
Capital items	**13,280**	**-**	**13,280**	10,000	-	10,000
Other items	**80,908**	**-**	**80,908**	97,681	-	97,681
	96,892	**-**	**96,892**	116,057	-	116,057

3. Legacies

	Unrestricted	Restricted	2022 Total	Unrestricted	Restricted	2021 Total
	£	£	£	£	£	£
Legacies	**562,381**	**1,500**	**563,881**	1,704,114	-	1,704,114

4. Shops

	2022 Unrestricted	2021 Unrestricted
	£	£
Trading activities	**2,500,559**	953,703
Donation of sale proceeds for goods sold as agent	**553,877**	184,128
Gift aid on donations of sale proceeds to charity	**139,868**	46,497
COVID-19 Retail Grant	**57,337**	189,868
	3,251,641	1,374,196

Notes to the financial statements

For the year ended 31 March 2022

5. Fundraising

	2022 Unrestricted	2021 Unrestricted
	£	£
Lottery	**745,304**	725,065
Events	**275,356**	100,972
	1,020,660	826,037

6. Other income

	2022 Unrestricted	2021 Unrestricted
	£	£
Training and Education	**2,842**	3,850
Catering and vending machine	**30,461**	20,791
Other	**80,802**	97,381
	114,105	122,022

7. Investment income

	2022 Unrestricted	2021 Unrestricted
	£	£
Gross interest receivable	**1,372**	1,041

8. Income from charitable activities

	2022 Unrestricted	2021 Unrestricted
	£	£
NHS Derby and Derbyshire Clinical Commissioning Group	**2,946,714**	3,162,947
University of Sheffield – Student training	**39,200**	36,400
Chesterfield Royal Hospital – Medical secretarial support	**16,590**	16,590
Other	**10,393**	275,461
	3,012,897	3,491,398

Notes to the financial statements

For the year ended 31 March 2022

9. Income from COVID-19 grants

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from December 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

10. Income from furlough

The hospice received funding through the COVID-19 Furlough Scheme for staff who were furloughed due to Government restrictions. In accordance with the guidance on gov.uk, 'furlough' refers to employees who have been asked to stop working for at least 3 weeks, but who are still being kept on their employer's payroll.

11. (a) Analysis of group expenditure current year

	Direct staff costs	Other direct costs	Support costs	**Total costs**
	£	£	£	**£**
Donations	303,108	160,504	45,356	**508,968**
Legacies	43,197	6,399	20,840	**70,436**
Costs of raising voluntary income	346,305	166,903	66,196	**579,404**
Lottery	101,108	223,405	43,641	**368,154**
Events	129,826	139,655	53,567	**323,048**
Community	92,104	32,007	36,685	**160,796**
Shops	1,550,237	972,571	277,923	**2,800,731**
Fundraising and other trading costs	1,873,275	1,367,638	411,816	**3,652,729**
Patient care – hospice	2,823,221	421,039	1,377,470	**4,621,730**
Patient care – community	1,097,510	45,618	241,691	**1,384,819**
Therapies & rehabilitation	1,095,541	65,663	167,313	**1,328,517**
Cost of charitable activities	5,016,272	532,320	1,786,474	**7,335,066**
Total	7,235,852	2,066,861	2,264,486	**11,567,199**

Notes to the financial statements

For the year ended 31 March 2022

11. (b) Analysis of group expenditure prior year

	Direct staff costs	Other direct costs	Support costs	**Total costs**
	£	£	£	**£**
Donations	258,912	207,773	49,672	**516,357**
Legacies	26,427	12,730	14,893	**54,050**
Costs of raising voluntary income	285,339	220,503	64,565	**570,407**
Lottery	83,259	249,019	36,521	**368,799**
Events	100,789	113,534	44,134	**258,457**
Community	90,784	50,873	32,909	**174,566**
Shops	1,370,908	690,995	367,869	**2,429,772**
Fundraising and other trading costs	1,645,740	1,104,421	481,433	**3,231,594**
Patient care – hospice	2,821,517	487,281	1,152,220	**4,461,018**
Patient care – community	1,275,414	44,193	216,406	**1,536,013**
Therapies & rehabilitation	983,226	51,616	149,007	**1,183,849**
Cost of charitable activities	5,080,157	583,090	1,517,633	**7,180,880**
Total	7,011,236	1,908,014	2,063,631	**10,982,881**

All costs for raising voluntary income and for fundraising and other trading costs, in both years, related to unrestricted funds.

Patient care within the hospice includes the activities of the Inpatient, Outpatient and Day Services teams.

Patient care within the community includes the activities of the Palliative Care Nurse Specialists, Palliative Care Community Nurses, Support Workers and End of Life Care Facilitators.

Therapy and rehabilitation includes the activities of teams within Supportive Care Services, Lymphoedema, Occupational Therapy and Physiotherapy teams.

The patient facing functions above are all directly supported by a Clinical Administration Team, Quality Improvement Team, Catering, Housekeeping and other Estates functions. The costs of these functions are included within the direct costs above.

All patient facing functions, direct support teams and fundraising functions are then supported by the wider management structure of the organisation including HR, Learning & Development, Executive Team, Finance, Procurement, IT and Governance. The costs of these functions and costs of depreciation are all included in Support Costs.

Support costs include £150,132 (20/21 £152,261) of governance costs incurred in connection with the compliance with constitutional and statutory requirements of the charity.

Notes to the financial statements

For the year ended 31 March 2022

12. (a) Analysis of support costs current year

	Executive costs	HR & IT costs	Other support function costs	Depreciation	**Total costs**
	£	£	£	£	**£**
Donations	11,999	17,844	12,916	2,597	**45,356**
Legacies	5,731	8,522	6,168	419	**20,840**
Costs of raising voluntary income	17,730	26,366	19,804	3,016	**66,196**
Lottery	11,865	17,644	12,771	1,361	**43,641**
Events	14,609	21,725	15,725	1,508	**53,567**
Community	9,605	14,283	10,339	2,458	**36,685**
Shops	64,571	96,021	69,504	47,827	**277,923**
Fundraising and other trading costs	100,650	149,673	108,339	53,154	**411,816**
Patient care – hospice	312,091	464,102	335,935	265,342	**1,377,470**
Patient care – community	64,571	96,021	69,504	11,595	**241,691**
Therapies & rehabilitation	43,047	64,014	46,336	13,916	**167,313**
Cost of charitable activities	419,709	624,137	451,775	290,853	**1,786,474**
Total	538,089	800,176	579,198	347,023	**2,264,486**

Notes to the financial statements

For the year ended 31 March 2022

12. (b) Analysis of support costs prior year

	Executive costs	HR & IT costs	Other support function costs	Depreciation	**Total costs**
	£	£	£	£	**£**
Donations	13,319	20,341	13,657	2,355	**49,672**
Legacies	4,085	6,239	4,189	380	**14,893**
Costs of raising voluntary income	17,404	26,580	17,846	2,735	**64,565**
Lottery	9,932	15,169	10,185	1,235	**36,521**
Events	12,038	18,385	12,344	1,368	**44,135**
Community	8,720	13,318	8,942	1,929	**32,909**
Shops	86,569	132,213	88,770	60,316	**367,868**
Fundraising and other trading costs	117,259	179,085	120,241	64,848	**481,433**
Patient care – hospice	250,088	381,949	256,451	263,732	**1,152,220**
Patient care – community	57,713	88,142	59,181	11,370	**216,406**
Therapies & rehabilitation	38,475	58,761	39,454	12,317	**149,007**
Cost of charitable activities	346,276	528,852	355,086	287,419	**1,517,633**
Total	480,939	734,517	493,173	355,002	**2,063,631**

13. Net movement in funds is stated after charging:

	2022 Group	2021 Group
	£	£
Auditors' remuneration – audit	**13,385**	12,750
Auditors' remuneration – tax	**840**	800
Auditors' remuneration – other	**4,575**	-
Depreciation – owned assets	**327,149**	355,129
Depreciation – assets held on hire purchase	**19,874**	19,874
Payments made under operating leases	**317,626**	288,926

Notes to the financial statements

For the year ended 31 March 2022

14. Wages and staff costs

	2022 Group	2021 Group
	£	£
Gross salaries	**7,111,858**	6,778,369
Social security costs	**612,537**	568,857
Pension costs	**495,474**	525,239
	8,219,869	7,872,465

Average number of employees and full time equivalents for the group and analysis of employees in the year were:

	2022		2021	
	No.	FTE	No.	FTE
Clinical	**165**	**115**	160	116
Retail	**96**	**65**	96	64
Finance & IT	**6**	**6**	6	5
HR & Executive	**14**	**13**	13	12
Estate	**27**	**18**	33	21
Fundraising/Marketing	**31**	**27**	29	25
Total	**339**	**244**	337	243

Employees earning over £60,000 are summarised below (excluding pension costs):

	2022 No.	2021 No.
£60,001 – £70,000	**2**	3
£70,001 – £80,000	**3**	2

Pension contributions relating to the staff earning over £60,000 totalled £30,028 (2021: £28,217).

The total amount of employee benefits received by key management personnel is £477,188 (2021: £432,157). The charity considers these to be the staff who comprise the senior management team on the hospice payroll: Chief Executive Officer, Director of Income Generation, Director of Quality & Patient Care, Director of People & Performance, Director of Finance & Estates and Director of Marketing & Communications.

Included within gross salaries are redundancy payments totalling £nil (2021 – £43,970).

Notes to the financial statements

For the year ended 31 March 2022

15. Tangible fixed assets

The group	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2021	355,000	4,903,727	1,017,007	1,069,389	188,644	7,533,767
Additions	-	-	120,510	128,727	-	249,237
Disposals	-	-	(35,233)	(4,941)	-	(40,174)
At 31 March 2022	**355,000**	**4,903,727**	**1,102,284**	**1,193,175**	**188,644**	**7,742,830**
Depreciation						
At 1 April 2021	149,100	962,808	815,485	443,336	188,644	2,559,373
Charge for the year	7,100	98,075	104,160	137,688	-	347,023
Disposals	-	-	(35,233)	(4,941)	-	(40,174)
At 31 March 2022	**156,200**	**1,060,883**	**884,412**	**576,083**	**188,644**	**2,866,222**
Net Book Value						
At 1 April 2021	205,900	3,940,919	201,522	626,053	-	4,974,394
At 31 March 2022	**198,800**	**3,842,844**	**217,872**	**617,092**	**-**	**4,876,608**

The charity	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2021	355,000	4,903,727	438,666	1,025,062	80,350	6,802,805
Additions	-	-	54,293	106,909	-	161,202
At 31 March 2022	**355,000**	**4,903,727**	**492,959**	**1,131,971**	**80,350**	**6,964,007**
Depreciation						
At 1 April 2021	149,100	962,808	320,550	405,560	80,350	1,918,368
Charge for the year	7,100	98,075	61,102	132,919	-	299,196
At 31 March 2022	**156,200**	**1,060,883**	**381,652**	**538,479**	**80,350**	**2,217,564**
Net Book Value						
At 1 April 2021	205,900	3,940,919	118,116	619,502	-	4,884,437
At 31 March 2022	**198,800**	**3,842,844**	**111,307**	**593,492**	**-**	**4,746,443**

The value of fixed assets held under finance leases is £9,937 (2021: £29,810) in both the group and the charity.

Notes to the financial statements

For the year ended 31 March 2022

16. (a) Investments – charity

	Shares in group undertakings and participating interests
	£
Cost at 1 April 2021 and 31 March 2022	4
Net book value at 1 April 2021 and 31 March 2022	4

Holding of more than 20%

The charity holds more than 20% of the share capital of the following company:

Company	Company number	County of registration or incorporation	Shares held class %
Ashgate Hospicecare Shops Limited	02577401	England & Wales	Ordinary 100%

The aggregate amount of capital and reserves and the results of the subsidiary for the financial year are as follows:

	Principal Activity	Capital and reserves	(Loss) for the year
		£	£
Ashgate Hospicecare Shops Limited	Charity shop	(380,442)	(8,173)

(b) Fixed asset investments

	Group		Charity	
	2022	2021	**2022**	2021
Listed investments	**£**	£	**£**	£
Fair value at 1 April 2021	**1,006,839**	866,364	**1,006,839**	866,364
Additions	**-**	-	**-**	-
Adjustment	**-**	-	**-**	-
Investment gains	**19,941**	140,476	**19,941**	140,476
Fair value at 31 March 2022	**1,026,780**	1,006,840	**1,026,780**	1,006,840

The historical cost of the investment is £900,000 (2021: £900,000).

Notes to the financial statements

For the year ended 31 March 2022

17. Debtors

	Group		Charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Trade debtors	**89,249**	270,906	**79,891**	268,742
Other debtors	**260,225**	687,689	**229,169**	603,016
Value added tax	**686,098**	521,501	**668,434**	507,929
Prepayments and accrued income	**1,158,814**	1,679,649	**1,085,490**	1,613,318
Amounts owed by group undertakings	**-**	-	**1,178,999**	932,976
	2,194,386	3,159,745	**3,241,983**	3,925,981

The Charity's intercompany debtor balance includes an intercompany loan of £543,093 repayable to the charity, and due after more than one year.

18. Creditors

	Group		Charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Amounts falling due within one year				
Trade creditors	**210,407**	142,835	**145,537**	125,318
Tax and social security	**191,270**	181,073	**170,525**	161,884
Accruals and deferred income	**415,903**	516,174	**297,376**	393,423
Finance lease creditor	**6,597**	19,790	**6,597**	19,790
	824,177	859,872	**620,035**	700,415

Deferred income includes lottery money received in advance for future draws. At 31 March 2022 this totalled £100,790 (2021: £96,931). All deferred income from 2020/21 was released in the year.

19. Creditors: amounts falling due after more than one year

	Group		Charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Other creditors	**355,000**	355,000	**355,000**	355,000
Finance lease creditors	**-**	6,597	**-**	6,597
	355,000	361,597	**355,000**	361,597

Notes to the financial statements

For the year ended 31 March 2022

20. Operating lease commitments

At 31 March 2022 the charity had future minimum lease payments under non cancellable operating leases as follows:

	Group		Charity	
	2022	2021	**2022**	2021
	£	£	**£**	£
Within one year	**277,709**	277,063	**12,743**	3,189
Within two to five years	**365,622**	396,421	**3,634**	1,499
In more than five years	**-**	-	**-**	-
	643,331	673,484	16,377	4,688

21. Pension costs

The pension costs relate to the amounts contributed by the Group and paid over to the Health Service pension scheme or to eligible employees' pension schemes. The pension costs amounted to £495,474 (2021: £525,239). The amount owed to the pension providers at the year-end was £39,688 (2021: £42,876). All schemes are treated as defined contribution and payments are charged to the SOFA in the year they are payable.

22. Capital commitments

There were no capital commitments at 31 March 2022 (2021:£nil).

23. Related party transactions and trustee renumeration

No Trustee received or waived any remuneration during either year.
There were no other transactions with Trustees during either year.

The only related party transactions were between the parent charity and the trading subsidiary. These were routine items, primarily where shops in the subsidiary receive donations of the sale proceeds of donated goods but then transfer such donations, net of commission, into the parent charity accounts. Also, payroll costs where the parent charity administers payroll for the group but transfers the relevant costs to the subsidiary. Year end balances are shown in the charity columns of Note 17 Debtors. Net recharges in the year were £2,238k (2021: £1,600k).

24. Taxation

As a charity, Ashgate Hospicecare is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or s256 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objectives. No tax charges have arisen in the Charity. The tax charge arises from the trading results of the subsidiary.

		Group
	2022	2021
	£	£
Corporation Tax current year	**-**	(21,431)
Adjustments in respect of prior years	**-**	1,704
	-	(19,727)

Notes to the financial statements

For the year ended 31 March 2022

25. (a) Statement of funds current year

	Balance at 1 April 2021	Income	Expenditure	Transfers in/out	Designated	Gains	Corporation Tax	**Balance at 31 March 2022**
Unrestricted Funds	£	£	£	£	£	£	£	**£**
General Funds	7,292,645	9,980,897	(10,652,559)	106,497	2,279,085	19,941	-	**9,026,506**
Designated Funds	2,379,085	-	-	-	(2,279,085)	-	-	**100,000**
	9,671,730	9,980,897	(10,652,559)	106,497	-	19,941	-	**9,126,506**
Restricted Funds								
Earmarked Donations	171,721	214,073	(34,486)	(106,497)	-	-	-	**244,811**
HUK/NHSE COVID-19	-	880,154	(880,154)	-	-	-	-	**-**
	171,721	1,094,227	(914,640)	(106,497)	-	-	-	**244,811**
Total of Funds	9,843,451	11,075,124	(11,567,199)	-	-	19,941	-	**9,371,317**

(b) Statement of funds prior year

	Balance at 1 April 2020	Income	Expenditure	Transfers in/out	Designated	Gains	Corporation Tax	**Balance at 31 March 2021**
Unrestricted Funds	£	£	£	£	£	£	£	£
General Funds	6,554,801	10,629,237	(7,882,690)	210,179	(2,379,085)	140,476	19,727	**7,292,645**
Designated funds	-	-	-	-	2,379,085	-	-	**2,379,085**
	6,554,801	10,629,237	(7,882,690)	210,179	-	140,476	19,727	**9,671,730**
Restricted Funds								
Earmarked Donations	144,151	260,826	(23,077)	(210,179)	-	-	-	**171,721**
HUK/NHSE COVID-19	-	3,077,114	(3,077,114)	-	-	-	-	**-**
	144,151	3,337,940	(3,100,191)	(210,179)	-	-	-	**171,721**
Total of Funds	6,698,952	13,967,177	(10,982,881)	-	-	140,476	19,727	**9,843,451**

Notes to the financial statements

For the year ended 31 March 2022

Transfer of Funds

The transfer of £106,497 relates to expenditure on restricted projects which has been disclosed as unrestricted expenditure on the face of the SOFA. This predominantly relates to staff costs which are reported within the costs of charitable activities.

Designation of Funds

The Trustees have designated £100,000 to support the pilot of new income generation initiatives.

Restricted Funds

These are funds restricted by the donors for items of expenditure as follows:

Earmarked Donations

These are donations contributed by the general public to help fund specific clinical activities. At the end of the year £244,811 remained unspent and this will be expended in 2022/2023 onwards.

Hospice UK/NHSE

Non recurring funding of a restricted nature was received from NHSE as explained in Note 9.
The cost of charitable activities (Note 11) is greater than the combination of this NHSE funding and other income from charitable activities (Note 8) and therefore the Trustees consider that this restricted funding has been fully utilised within the year.

Notes to the financial statements

For the year ended 31 March 2022

26. (a) Analysis of net assets between funds current year

	Restricted Funds	Unrestricted Funds	Total Funds
	£	£	£
Fixed assets	2,500	5,900,888	5,903,388
Current assets	242,311	4,404,795	4,647,106
Current liabilities	-	(824,177)	(824,177)
Liabilities due after one year	-	(355,000)	(355,000)
	244,811	9,126,506	9,371,317

(b) Analysis of net assets between funds prior year

	Restricted Funds	Unrestricted Funds	Total Funds
	£	£	£
Fixed assets	2,500	5,978,734	5,981,234
Current assets	169,221	4,914,465	5,083,686
Current liabilities	-	(859,872)	(859,872)
Liabilities due after one year	-	(361,597)	(361,597)
	171,721	9,671,730	9,843,451

27. Ashgate Hospicecare Shops Limited: Profit and loss account for the year ended 31 March 2022

	2022	2021
	£	£
Turnover	**2,500,559**	953,703
Furlough	**12,659**	423,967
Retail Grant	**57,337**	189,868
Total income	**2,570,555**	1,567,538
Cost of sales	**(1,898,882)**	(1,526,557)
Gross Profit	**671,673**	40,981
Administrative expenses	**(671,754)**	(595,661)
Other interest payable	**(8,258)**	-
Other interest relievable	**166**	50
Tax on profit	**-**	19,727
Retained (loss) for the year	**(8,173)**	(534,903)
Number of shops and coffee shops	**18**	18

Notes to the financial statements

For the year ended 31 March 2022

28. Reconciliation of net movement in funds to net cash flow from operating activities

	2022	2021
	£	£
Net movement in funds	**(472,134)**	3,144,499
Depreciation charges	**347,023**	355,001
(Decrease) in creditors	**(22,502)**	(124,091)
Decrease / (Increase) in debtors	**965,359**	(1,788,587)
(Increase) in stocks	**(8,626)**	(3,079)
(Gain) on investments	**(19,941)**	(140,476)
Interest received	**(1,372)**	(1,041)
Net cash generated by operating activities	**787,807**	1,442,226

There were no changes in net debt other than the cashflows above.

29. Contingent assets – legacy income

As at the reporting date, it is probable that additional legacies totalling £0.5m (20/21 £0.5m) are to be received. These have not been included within accrued income, as although the income is probable, the amounts have not yet been confirmed.

Notes to the financial statements

For the year ended 31 March 2022

30. Consolidated statement of financial activities – prior year

	Unrestricted Funds	Designated Funds	Restricted Funds	2021 Total
Income:	£	£	£	**£**
Donation and legacies				
Donations	2,625,418	-	260,826	**2,886,244**
Legacies	1,704,114	-	-	**1,704,114**
	4,329,532	-	260,826	**4,590,358**
Income from other trading activities:				
Shops	1,374,196	-	-	**1,374,196**
Fundraising	826,037	-	-	**826,037**
Other	122,022	-	-	**122,022**
	2,322,255	-	-	**2,322,255**
Investment income	1,041	-	-	**1,041**
Income from charitable activities	3,491,398	-	-	**3,491,398**
Income from COVID-19 Grants	-	-	3,077,114	**3,077,114**
Income from furlough	485,011	-	-	**485,011**
Total income	10,629,237	-	3,337,940	**13,967,177**
Expenditure:				
Costs of raising voluntary income	570,407	-	-	**570,407**
Fundraising & other trading costs	3,231,594	-	-	**3,231,594**
Costs of charitable activities	4,080,689	-	3,100,191	**7,180,880**
Total expenditure	7,882,690	-	3,100,191	**10,982,881**
Net income/(expenditure) before investment gains	2,746,547	-	237,749	**2,984,296**
Gains/(Losses) on investments	140,476	-	-	**140,476**
Corporation tax	19,727	-	-	**19,727**
Net income/(expenditure)	2,906,750	-	237,749	**3,144,499**
Reserves transfer	210,179	-	(210,179)	**-**
Designated funds transfer	(2,379,085)	2,379,085	-	**-**
Net movement in funds	737,844	2,379,085	27,570	**3,144,499**
Reconciliation of funds				
Total funds brought forward	6,554,801	-	144,151	**6,698,952**
Total funds carried forward	7,292,645	2,379,085	171,721	**9,843,451**

Thank you to everyone who supports us and helps us to be there when it matters most.

For more information

If you would like to know more about how you can help us to care for people living with a life-limiting illness, please contact us:

Call us on **01246 567 250**

Or email us at **fundraising@ashgatehospice.org.uk**

Looking for support?

Call us on **01246 568 801**

Or email us at **clinicalenquiries@ashgatehospice.org.uk**

Or visit **www.ashgatehospice.org.uk**

Registered with FUNDRAISING REGULATOR

disability confident EMPLOYER

MINDFUL EMPLOYER

Ashgate Hospice

Registered Charity No. 700636

ASHGATE HOSPICECARE

England & Wales - Charity number 700636

Accounts

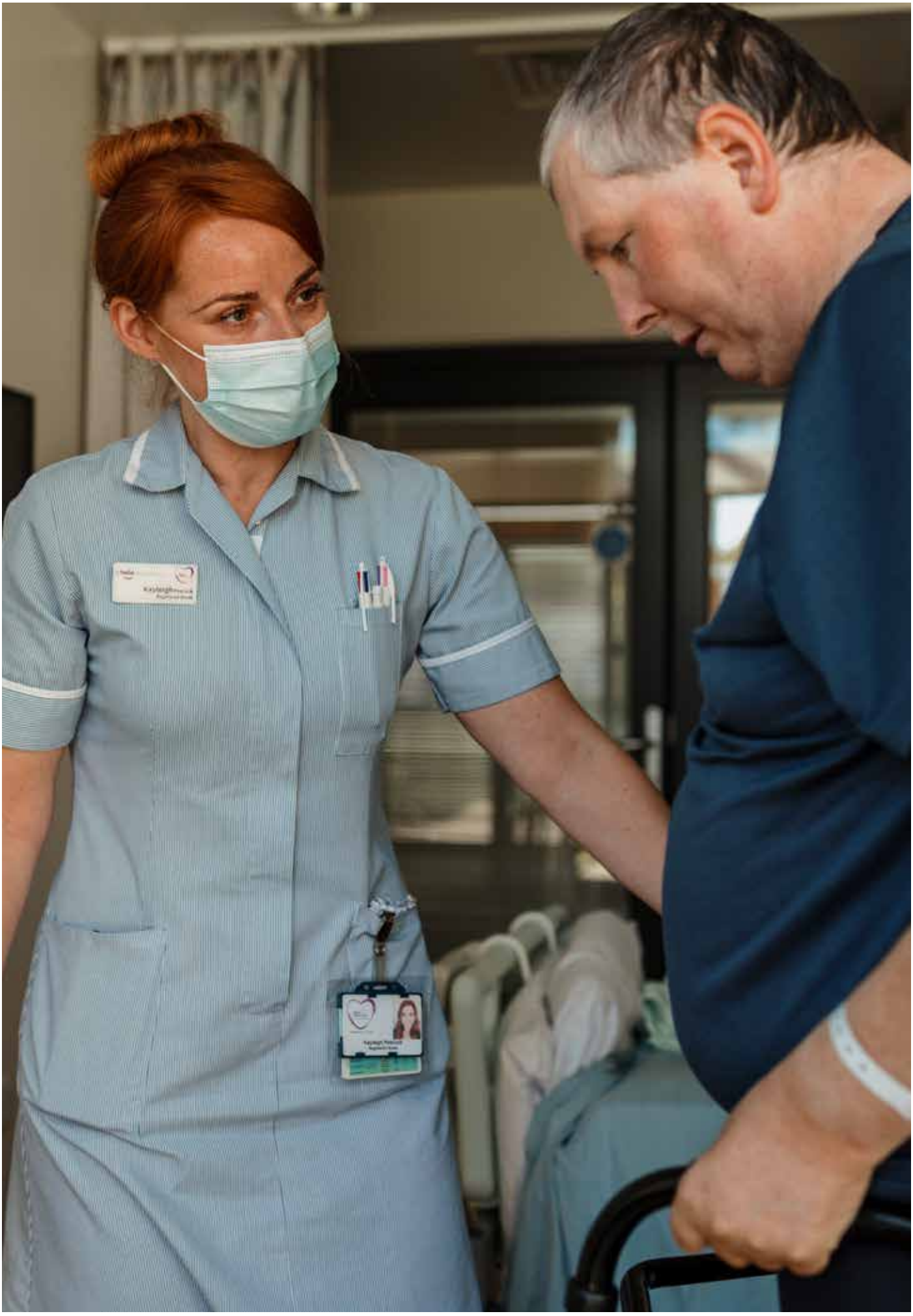
Ashgate Hospice

Working together as One Ashgate: Our COVID-19 Story

Annual Report April 2020 to March 2021
Ashgate Hospicecare trading as Ashgate Hospice

Contents

1.	Our strategy	4 - 5
2.	Strategic priorities	6 - 7
3.	A timeline of our COVID-19 response	8 - 13
4.	Statement from the Chief Executive	14
5.	Tribute to Trustee Andy Dukelow	15
6.	Paul and Kim's story	16 - 17
7.	About Ashgate Hospice	18 - 25
8.	The services we offer	26 - 29
9.	Our COVID-19 response	30 - 43
10.	One Ashgate	44 - 49
11.	Our 2021 People Survey results	50 - 51
12.	Our finances	52 - 63
13.	Reference and administrative information	64
14.	Financial review	65 - 66
15.	Statement of Trustees responsibilities	67
16.	Independent auditors report	68 - 71
17.	Financial statements and notes to the accounts	72 - 92



Our strategy

Our vision

That everyone in North Derbyshire with a life-limiting illness is supported to make the most of every moment and can die with dignity and comfort.

Our purpose

To provide specialist palliative and end of life care for those in need and to work in partnership with others to ensure that everyone in North Derbyshire has access to appropriate, high-quality palliative care.

Our values

Our values are at the heart of everything we do at Ashgate Hospice. They are grounded in our commitment to being the best we can be for our patients and the people who are important to them, for our customers and supporters, and for each other.

We are compassionate. We work as team. We are respectful, open and inclusive.




Welcome to
Ashgate
Hospice
MAIN ENTRANCE

Strategic priorities

Excellence in everything we do

We will ensure that everyone for whom we care, and every customer or supporter, receives the highest quality service that we are able to provide.

We will embed an ethos and practice of continuous quality improvement across Ashgate and aim for excellence in everything we do.

We will have a workforce who are committed to delivering specialist care and who have the skills to do so.

High-quality and sustainable palliative care

We will continue to be the leading specialist provider of palliative and end of life care in North Derbyshire.

We will advocate for compassionate and high-quality palliative and end of life care for everyone who needs it.

We will work in partnership with other local and national providers and commissioners to improve the palliative and end of life care and support available in North Derbyshire.

We will work to ensure equity of access for everyone who needs our care.

One Ashgate

We will continue to build our 'One Ashgate' culture.

We will build a shared understanding of our values and the behaviours that underpin them.

We will create the conditions to inspire learning and innovation and to support our staff and volunteers to work together with trust and respect.

Reaching our target audiences and telling our Ashgate story

We will support our diversity targets by intentionally reaching out and marketing our services to people and communities in North Derbyshire who are under-represented among our staff, volunteers and patients.

We will advocate for change in how end of life care is funded so that more end of life patients in North Derbyshire get the compassionate support they need.

We will continue to innovate and increase our use of digital marketing, so that we can more easily track return on investment (ROI) and ensure we are spending charity money wisely and well.

Generating the income we need

We will generate the income we need to provide our services by continuing to invest in our fundraising, retail and hospitality activities.

We will explore new opportunities to raise additional funds by investing in new business opportunities and diversifying our income streams.

A timeline of our COVID-19 response

We are hugely proud of the difference we have made and the quality of the care we have provided during the year 2020/21, including to end of life patients with COVID-19.

Thank you to all our staff, volunteers, funders, supporters and donors who have helped us achieve so much towards our aims and objectives (see above on page 6-7), not least helping us to secure the funding we so urgently needed to continue providing our care.

Here is a snapshot of how we responded to COVID-19.

February 2020

- We reviewed our high-level business continuity plans and developed COVID-19 specific plans for every service, team and department.
- We established a business continuity framework to ensure a rapid response and ensure we could keep the hospice functioning safely and effectively.



March 2020

- We implemented emergency plans and moved all non-inpatient and back-office staff to remote working.
- Visitor numbers at our Inpatient Unit were reduced to one named visitor so that patients could still see their loved ones, while we reduced the risk of infection.
- We put restrictions on external visitors to reduce the risk of infection to our patients.
- The Lavender Wing – a designated section of our Inpatient Unit - was created for patients with suspected and confirmed COVID-19.
- We started daily briefings to staff on the latest changes due to COVID-19, so that they had the latest information at all times.
- Our fundraising and procurement teams worked together to secure supplies and donations of PPE, including from the community.
- The decision was made to postpone our main fundraising event, the Sparkle Night Walk.
- Our charity shops and coffee shops closed and the majority of our retail and hospitality staff were furloughed.

April 2020

- We had our first patient with COVID-19 on the Inpatient Unit.
- An Urgent Appeal was launched to help us raise funds to enable us to continue to respond to the pandemic. This was the first time we had launched a digitally-led fundraising campaign.
- A supportive Wobble Room on the Inpatient Unit was created for staff to be listened to by our Supportive Care Team, with virtual support available for our teams working remotely.
- We secured extra funding for our step-up and step-down bed capacity at the hospice, to help take pressure off the local Chesterfield Royal Hospital NHS Foundation Trust.
- Our response to COVID-19 was the headline news on regional news programme BBC Look North.
- Ashgate's Supportive Care Team started providing emotional support in group sessions to clinical staff at Chesterfield Royal Hospital to help mitigate the trauma that comes from dealing with frequent and multiple deaths, particularly in the critical care environments.

May 2020

- Wobble box care packages sent to Ashgate Hospice's frontline community teams, thanks to the generous support of local businesses and individuals.
- Virtual group support sessions for care homes in North Derbyshire began using ECHO project technology.
- Work began on Ashgate's Learning History to capture personal experiences in real-time during the pandemic.
- We facilitated evening online learning sessions on Post Traumatic Stress Disorder (PTSD) and the impact of COVID-19 on patients, relatives and our health and social care colleagues. The sessions were open to all staff working in health and social care in North Derbyshire. The sessions were very well attended with the first having 90 attendees and 68 people attending the second.
- A display of brightly coloured stars was installed in our main reception by a local company in recognition of the amazing work of Ashgate frontline staff and volunteers.





We installed screens at our retail till-points as part of extensive COVID safety measures in our shops.

June 2020

- Our shops and Donation Centre reopened in a phased way with social distancing measures in place. Our retail teams were unfurloughed.
- Patient numbers were increased from one to two named visitors, an important step forward while still being mindful of infection controls.
- All visitors were asked to wear face masks on entry to the Inpatient Unit.
- Staff COVID-19 testing began.
- The decision was made to make this year's Sparkle Night Walk a virtual, rather than a physical, event.

July 2020

- Huddles were introduced by our Supportive Care Team to offer our staff and volunteers the chance to reflect on their experiences and support one another.
- A 'Working Safely Through COVID-19' project group was created to support our people to be able to work safely and effectively.
- Some patient-facing teams, such as Social Workers and Complementary Therapists, were brought back to the main hospice site.
- Ashgate was shortlisted for the Charity Times Awards for Fundraising Team of the Year.

August 2020

- Our coffee shops reopened.
- The many donations we had received while our shops were closed were distributed to shops, ahead of reopening at the end of the month.



COVID measures in place in our coffee shops.

September 2020

- Our first ever Markovitz Virtual Sparkle Night took place. It raised £97,000. This was about half of the physical event, but still a significant fundraising achievement.
- All our staff and volunteers were asked to wear face coverings in all hospice settings, in line with NHS guidance.
- We made the announcement that the hospice would have to seek voluntary redundancies and other savings, including working hour reductions, and that compulsory job losses might be unavoidable.

October 2020

- Our Winter Crisis Appeal launched, building on what had worked so well during our Urgent Appeal earlier in the year.
- Ashgate was the lead item on ITV Calendar News with a report filmed at the hospice about the precariousness of our funding.
- We launched our podcast – 'The Life and Death Podcast' – which has proved hugely popular with a second series now launched.
- We sent a supporter newsletter to over 18,000 homes giving more detail about the care we provide and our response to COVID-19.

November 2020

- We limited visitor numbers even further at our Inpatient Unit at Old Brampton to one named visitor per patient, but remained more flexible for those at the end of their lives.
- A second national lockdown forced retail and coffee shops to close and teams to be furloughed again.
- The decision was made to cancel our annual Christmas Market.

February 2021

- Staff from Ashgate Hospice talked to national ITV News about the integral role they were playing in the COVID-19 response.
- Retail staff were redeployed as frontline workers, freeing up clinical teams for frontline duties during the height of pandemic.
- Trustees Penny Brooks and Kirsty Macmillan volunteered on the Inpatient Unit and on reception.



An ITV interview on our Inpatient Unit.

March 2021

- A minute's silence was observed on the National Day of Reflection by staff and volunteers.
- Our retail staff and volunteers continued to provide support for people receiving their COVID-19 vaccinations at the Winding Wheel centre in Chesterfield.



Providing support at vaccination hubs.

December 2020

- Shops reopened for the second time, although our coffee shops remained closed. The shops closed again later in the month when lockdown was reimposed.
- We held a virtual 'Light up a Life' ceremony to remember loved ones.



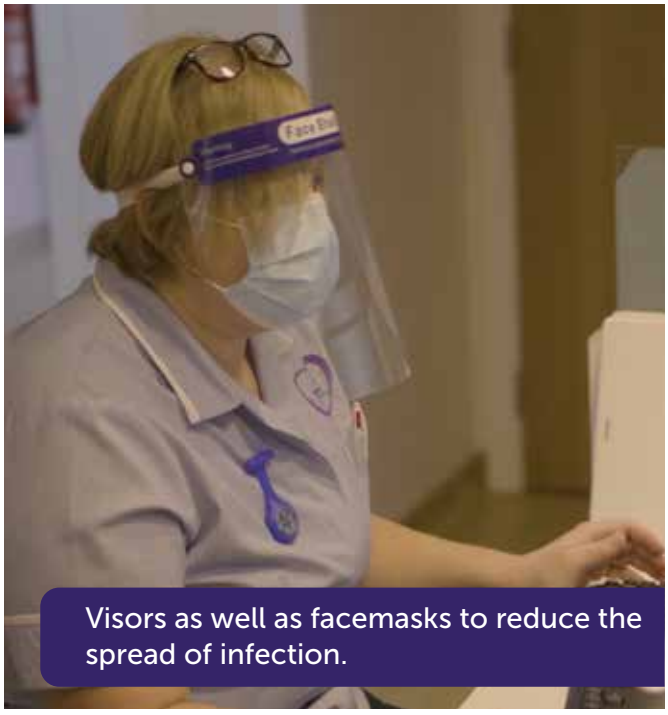
- We were delighted to receive an interim financial settlement from NHS Derby and Derbyshire CCG to safeguard jobs and end of life care pending a system wide review of End of Life Strategy for Joined Up Care Derbyshire.
- Our staff and volunteers began to receive COVID-19 vaccines.
- Fabric hearts were introduced to help keep families connected during the pandemic. The hand sewn hearts were made in matching fabric, with one kept by the patient and the other given to the family member.



Fabric hearts to keep people connected.

January 2021

- COVID-19 vaccines were offered to all patient-facing staff and volunteers before being offered more widely across the hospice workforce.
- Furloughed staff from Ashgate Hospice supported the NHS vaccine rollout.
- All available clinical staff were deployed to our busy Inpatient Unit to help relieve pressure on hospitals. This meant that we had to temporarily reduce some services such as Lymphoedema.
- All patient-facing staff and volunteers began taking part in weekly COVID-19 testing.
- All patient-facing staff and volunteers were required to wear a face visor, in addition to other PPE requirements, to protect against a new COVID-19 variant.
- Wobble Box wellbeing packs were sent to all Ashgate staff and frontline volunteers.



Visors as well as facemasks to reduce the spread of infection.

Statement from the Chief Executive



This has been one of the most challenging and rewarding years in Ashgate's history and a period that I shall reflect on for years to come. It is a huge privilege for me to be Chief Executive. This has never been more so than this year when, with the help and support of the Leadership Team and Board of Trustees, we led our one Ashgate team through the huge challenges of the COVID-19 pandemic.

I am extremely proud that we were one of the few UK hospices that decided from the outset of the pandemic – right back in March 2020 – to accept end of life COVID-19 patients on our Inpatient Unit and to care for them in the community.

This presented us with major challenges in all sorts of ways – from introducing new procedures to reduce the risk of infection to securing PPE and making sure our staff and volunteers were properly supported all the way though. However, we rose to the challenge and proved our worth to the wider health system in North Derbyshire. So much so that early in 2021, we had to open a second COVID-19 wing on our Inpatient Unit at Old Brampton.

Already operating a budget deficit before COVID, we were presented with some huge financial challenges when the pandemic hit. Through much of the 2021/ financial year our staff facing the threat of us having to make compulsory redundancies, just when our care was needed most.

We captured the thoughts and worries of our teams through a real-time learning history, and we give snapshots from the history in this report. The news agenda quickly moves on, but it is a compelling testament to an unprecedented time. It shows just how challenging the last year has been, but also importantly how our staff and volunteers rose to the challenge and pulled together as one team in an unprecedented response. On many significant measurements, our People Survey results improved significantly despite, or perhaps even because of, the pandemic, as we detail on pages 50 to 51.

As this report will detail, an outstanding community engagement and fundraising campaign, for which we have been shortlisted for a number of high-profile charity awards, secured us the funding we needed. We could not have achieved this without the extraordinary support we received from our local community and our supporters in the wider health system. We are extremely grateful for how they helped support Ashgate at a crucial time.

In December 2020, I was delighted to be able to tell our staff that we did not have to make the redundancies in the New Year that we had feared. Last year, we found the value of using our voice to make things better for our patients. We shall continue to raise our voice nationally and locally for end of life care to be better and properly funded. As I have repeatedly said, we would not fund maternity care this way. We can and must do better.

Barbara-Anne Walker

Chief Executive

Shortlisted for Charity Leader of the Year in the 2021 Charity Times Awards

www.charitytimes.com/awards/shortlist21.php

Ashgate Hospice pays tribute to trustee Andy Dukelow

One of our trustees, Andy Dukelow, died from cancer on 21st July 2021.

Andy joined as a trustee in 2011, and during his time with Ashgate, he played a key role in many improvements including the renovation of the Harry Fisher building and the refurbishment of the three bedded bays into individual bedrooms on our inpatient unit.

He understood very clearly why our care matters and he brought a very practical compassion to his role. His business and commercial expertise, as well as his lived experience of having a cancer diagnosis and experiencing our care, had a powerful impact on the hospice and he was a real champion for our work. His memory will always remain at the heart of the hospice.



Paul and Kim's story

In the weeks before Christmas 2020, Paul Clayton, 57, from Dronfield was wrapping presents for his family that his wife of 33 years had bought and in the paper she had chosen. He was meticulously following the instructions she had written for him before she died of ovarian cancer on 2nd December 2020.

Kim was just 56 when she died, after first being diagnosed in 2014 and undergoing four rounds of chemotherapy and a hysterectomy.

Tragically the cancer returned and during the midst of the COVID-19 pandemic she was admitted twice to Ashgate's Inpatient Unit.

Paul said: "From the moment I walked through the doors at Ashgate, I knew that Kim was in safe hands. She'd been suffering from severe pain for some time and Ashgate was able to get a handle on that almost immediately. It brought her great relief and meant that she was able to make the most of the time she had left.

"Throughout her stay, Kim was always well looked after, and everyone involved in her care took the time to explain what was happening and what to expect. In fact, everybody who works there deserves a special mention, from the volunteers to the doctors.

"They all took the time to know your name and to talk to you, it really feels like you are part of one big family. They were incredible and offered support in every way."

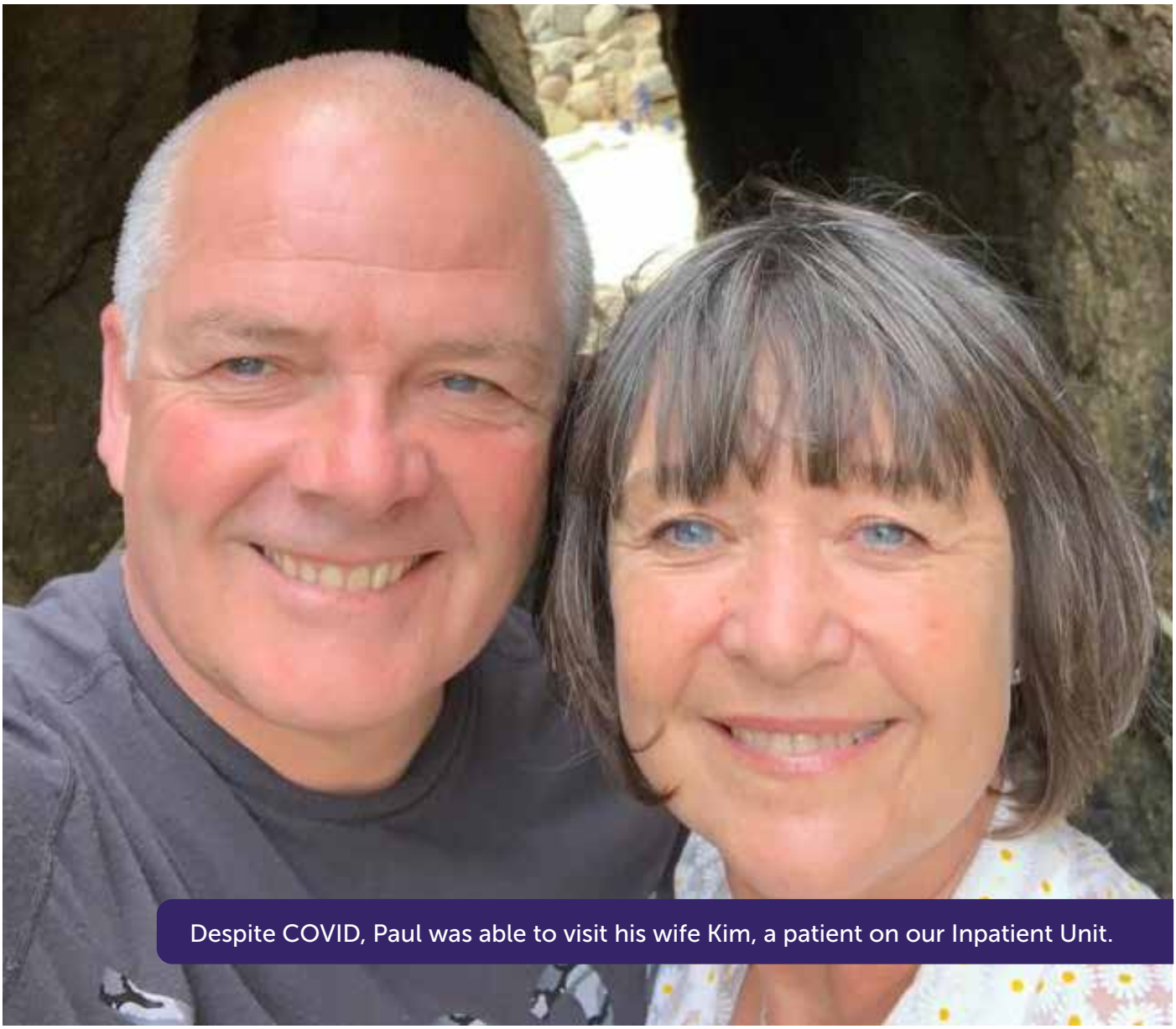
During her time in hospital Kim had been unable to have any visitors, because of restrictions caused by COVID-19. However, following her move to Ashgate, Paul was able to visit daily, because patients had private rooms.

He said: "We used to say that staying at Ashgate was like being at home - with all your home comforts, but with expert medical care when you needed it. Kim had her own room that looked out over a patio with a bird feeder. It sounds like such a small thing, but Kim liked to sit and watch the birds, just as she had done at home.

"Being able to visit as often as I liked made the world of difference to Kim and me. Phone calls are great for keeping in touch, but nothing beats physically being together. Even if we sat doing our own thing, we found great comfort in just being close to one another. That is especially true when you know that time is against you."

Paul says that he will be forever grateful for the support he received during the hardest time of his life.

Speaking after Kim's funeral, he said: "We decided not to have flowers at the funeral and instead asked for donations to Ashgate, as a way of giving something back. Incredibly, we have raised over £3,300, and I hope this goes some way in allowing another family to access this vital support."



Despite COVID, Paul was able to visit his wife Kim, a patient on our Inpatient Unit.

"We used to say that staying at Ashgate was like being at home."

About Ashgate Hospice

We are

- a registered charity (no. 700636)
- a leading hospice in North Derbyshire (and the UK), shortlisted for numerous awards for our work in 2020/21
- here to provide outstanding, specialist end of life care and support, free of charge, to adult patients with a life-limiting illness, and to support their loved ones
- caring for people in their own homes across North Derbyshire, as well as in our hospice
- recognised as experts in providing specialist palliative and end of life care and our provision is rated as Outstanding by the Care Quality Commission (CQC)
- more than 70% funded by our supporters.

We are not

- an NHS hospice. Less than 30% of our total income comes from local NHS budgets.



Governance and Trusteeship at Ashgate

Our Board of Trustees consists of volunteers who bring a range of professional expertise and life experiences to shape the direction of our strategic approach. Trustees are not involved in the day-to-day management of the charity. They delegate this responsibility to the Chief Executive and the Leadership Team. They hold the Leadership Team to account, ensuring that the hospice is managed effectively and in line with the highest standards of quality and customer service.

Trustees undertake a full induction and take part in the role-specific essential training provided by the hospice for all staff and volunteers. Trustees also take part in Quality Visits to clinical services. They shadow both clinical and non-clinical teams to gain assurances about performance and quality, to introduce themselves to staff and volunteers and to increase their knowledge of our services.

Our Ashgate Governance Framework sets out a robust hospice-wide governance and assurance structure. This has fully developed operational alignment and an emphasis on the 'golden thread' from frontline to Board. There are three committees which report directly to the Board. Their membership is drawn from the Trustees and senior leaders. The Healthcare Quality Committee includes clinical quality and safety, evidence-based care and patient experience in its portfolio. The People, Engagement and Performance Committee has a focus on our staff and volunteer workforce, on information governance, IT and digital development and community engagement. The Finance and Strategy Committee is charged with governance of our income generation, our reserves and investments, procurement and estate management.

This framework enables the Board meetings and development days to focus on long-term strategy, oversight of the charity's performance, risk management and sustainability. The Board and the Committees meet on a quarterly basis.

Public benefit

The Trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the hospice's objectives and in planning its future activities. In particular, the Board of Trustees considers how planned activities will contribute to the objectives they have set. The Trustees are confident that this report appropriately reflects public benefit in some detail when describing the purpose, objectives and strategic plans, services, service developments and future plans for continued or enhanced service delivery.

Accessing our support

When someone living in North Derbyshire is diagnosed with a life-limiting illness, they can access Ashgate Hospice's services through a referral. This normally comes from their GP, hospital team or community nurse.

At that point, we provide specialist care and support for our patients in their own homes or at our Inpatient Unit in Old Brampton, or sometimes both. For example, patients can come to the hospice for a few days to control their pain, before returning home, if able to do so. We also provide practical, emotional and bereavement support for the families of our patients.

The type of care and level of intervention we provide depend on the degree to which a patient's disease has advanced. We also consider other factors, such as their support network, home environment and pain levels.

Our COVID-19 referrals work in the same way. End of life patients with COVID-19 are referred to us by their GP, hospital team or community nurse and we then provide our care either at our Inpatient Unit or in the community.

"We are very proud that, during the financial year, 11 patients with COVID-19 whom we cared for were able to be discharged home. This is a huge testament to the care we provide."

Throughout 2020/21, due to the pandemic, we provided more virtual services than ever before, including through virtual day hospice and counselling services.

Crucially during 2020/21 when we were responding to the COVID-19 pandemic, our specialist end of life care helped relieve pressure on the wider health service in North Derbyshire. Importantly for families and loved ones, visitors were permitted throughout the pandemic. This was something that most NHS Trusts, including Chesterfield Royal Hospital, were not able to do. This meant patients had precious time with loved ones when it mattered most.



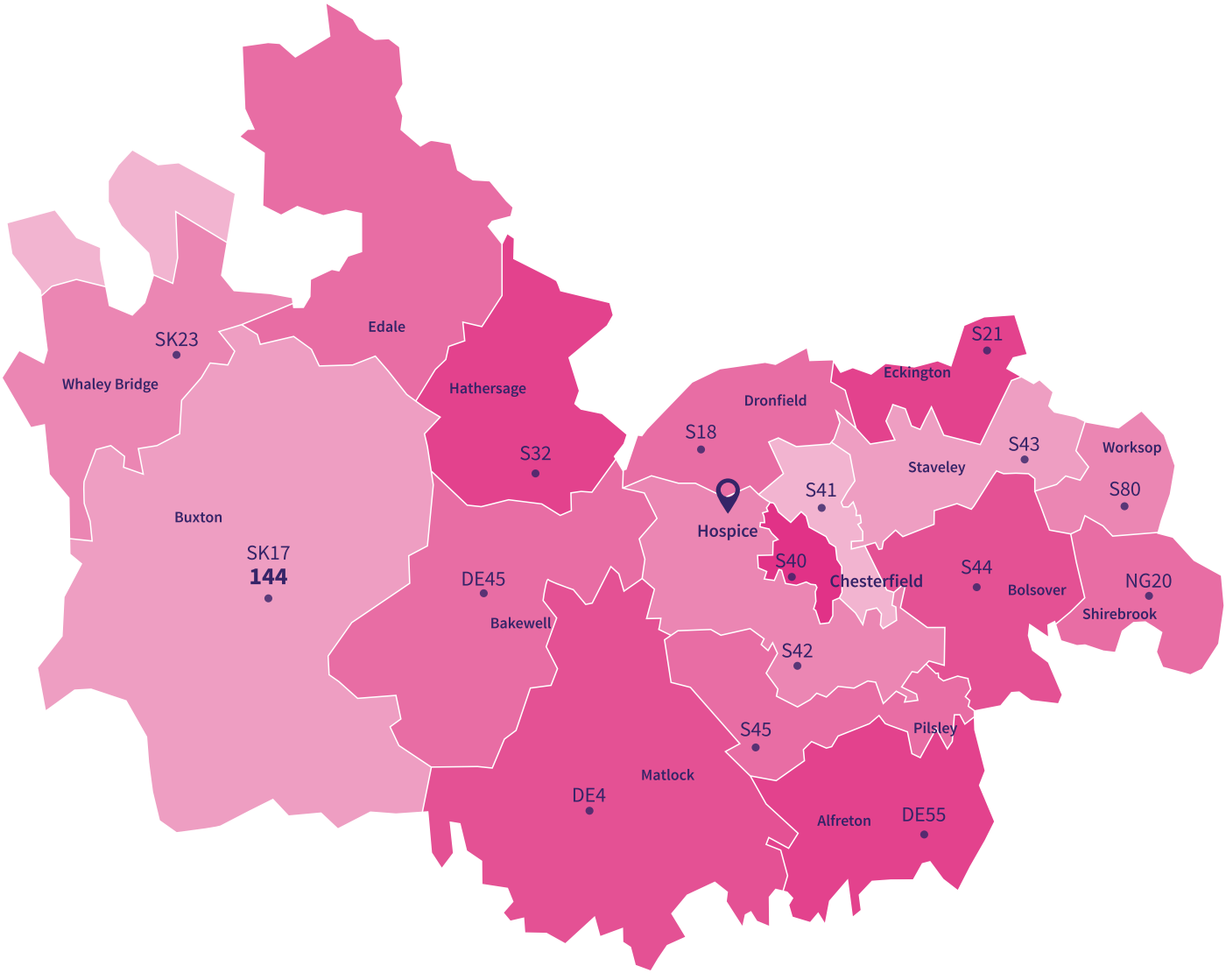
Where we provide our care

Care is not only provided at our hospice site in Old Brampton, but also across the North Derbyshire area. From our Old Brampton site, we provide inpatient bedded care, day care and outpatient services, physiotherapy, a specialist lymphoedema service, counselling, spiritual care and a range of other creative therapies.

We work collaboratively with other community health and social care teams and members of the Primary Health Care Teams attached to general practices within Chesterfield, North East Derbyshire, North Dales and High Peak (excluding Glossop).

We work as a specialist multidisciplinary team, visiting people in their homes, care homes and community venues. This is to ensure that, wherever and whenever possible, people are cared for in the place of their choice.

We also provide support, advice and education for our colleagues in external organisations seven days a week to ensure that our impact reaches as far as possible.



How our care is funded

We are not an NHS hospice. In recent years, funding from local NHS budgets has been less than 30% of our total income. We have, therefore, been dependent on our fundraising activities, including our retail and coffee shops, to generate the remaining income to deliver our services. We are blessed with a wonderful community of supporters and have typically generated around £3m sales in our shops and around £4m income from other fundraising activities.

While Ashgate has been able to leverage this fantastic support to deliver outstanding care through specialist staff and modern infrastructure, it is a precarious funding model. We have a significant and largely fixed cost base, but considerable uncertainty around the scale and timing of our income.

The financial year April 2020 to March 2021 was difficult and unusual. We experienced restrictions on all our normal income generation activities, but ever more demand for our services. This brought the funding model to a head. We had entered the year with a shortfall of reserves and a planned deficit, but with the pandemic and lockdown we had no alternative but to plan for redundancies, if there was no step change in NHS funding commitments.

Consequently, we launched a major communications campaign to reinforce our essential and cost-effective role in the wider healthcare system and to set a clear case for more funding. This involved our local community, colleagues across the system, MPs and media. Ultimately, this led to additional funding in the year from NHS Derby and Derbyshire CCG and an arrangement of support into the subsequent year pending a review of the End of Life Strategy for Joined Up Care Derbyshire. As a result of this reassurance, we did not have to proceed with the redundancies which we had so feared.

Later in this report (pages 52-62), we explain more about how, with the support of our community, we secured this vital funding lifeline at the end of 2020. We are taking forward this constructive dialogue with commissioners in 2021. We shall continue to support efforts across the UK for hospices and end of life care to receive a greater proportion of the funding they need from health budgets.

Fundraising support from our community

The period 2020/21 was a fundraising year like no other. We had the huge challenge of some of our biggest fundraising events, including the annual Sparkle Night Walk in Chesterfield, not being able to take place in the same way due to COVID-19 restrictions and lockdowns. Consequently, we innovated with a Markovitz Virtual Sparkle Night event. Much of our community fundraising simply could not take place. The pandemic gave us no choice but to innovate and our community responded as never before to our two emergency appeals. These were the Urgent Appeal which we launched in April 2020, just as COVID-19 was appearing in our communities and the Winter Crisis Appeal. This was when we continued to care for COVID-19 patients and were facing the very real prospect of having to make compulsory redundancies.



Sarah took part in our Step into Spring event, with her dog Poppy, to fundraise in memory of her Dad.

Some highlights of the year included:

- the Urgent Appeal, launched in response to the challenges presented by COVID-19, which raised £461,000
- acquiring 324 new regular givers, raising £45,000 per year
- 1,156 supporters remembering their loved ones by Lighting up a Life, raising £40,000
- the charity's first virtual mass participation event, Markovitz Virtual Sparkle Night, raising £97,000
- the launch of our Winter Crisis Appeal to address the continued challenges presented by the pandemic, raising £630,000 - the charity's most successful appeal to date
- the setting up of 42 online tribute funds in memory of loved ones, raising £33,000
- support from local businesses included £115,725 worth of Gifts in Kind and £258,000 in donations
- trusts and grants which supplied £340,000 of funding during the year, £140,000 of which was emergency funding in response to COVID-19
- a virtual Step into Spring event, raising £11,000.

Our charity shops and coffee shops

We had to close the doors to our Donation Centre, shops and coffee shops three times during the financial year, amounting to 205 days' lost sales. This meant furloughing our retail staff and losing a significant stream of funding. In total, our retail income fell by almost £2m compared with the previous year.

Retail and hospitality highlights included:

- our eBay team started to list and sell donated furniture on the eBay page with great success. The most expensive furniture item sold was a McIntosh sideboard at £450
- eight retail staff members supported the wider hospice during the Government lockdowns, in frontline roles including ward assistants, hospice reception assistants and PPE stock assistants
- in the weeks following the first Government lockdown, our Donation Centre received, sorted and processed over 40,000 bags of donations from donors within the local community
- our first reopening day, Monday 12th April 2021 was a record-breaking day with over £18,000 of income taken. This was about 177% more income than we would usually see on a typical day.



Volunteer, Jan, from our Clowne coffee shop.


Our Donation Centre staff and volunteers worked tirelessly to sort the thousands of bags of donations we received after Government lockdowns.



We had to close our shops and coffee shops three times during the year due to the pandemic.

The services we offer

At Ashgate Hospice, we offer a holistic range of services to help our patients and their loved ones manage both their physical and emotional needs. Some of these services had to stop temporarily during the height of the pandemic. This enabled all the available teams to provide care at our Inpatient Unit at Old Brampton when we opened a second COVID-19 ward early in 2021.

During the year our services included:



Physiotherapy – our physiotherapists assist patients with a variety of needs including breathlessness, fatigue, discomfort, weakness, mobility and pain, by providing a realistic and appropriate treatment regime to help improve quality of life.



Lymphoedema specialist support - our small team of highly specialist lymphoedema nurses provides support and care to patients who have lymphoedema. We help them by carrying out a thorough assessment and providing an individual treatment plan. The plan may consist of skincare, massage, exercise and compression. It aims to manage the symptoms of lymphoedema and improve quality of life



Counselling & therapies - the Counselling Team is part of the Ashgate Hospice Supportive Care Team and is based in the Harry Fisher Building at the hospice. Our service is available to patients with palliative care needs, their families, friends and carers. We offer a safe space for our patients to be heard and supported, as they explore their concerns and any issues they wish to resolve



Inpatient Unit - our Inpatient Unit at Old Brampton in Chesterfield offers the reassurance of round-the-clock, expert care and support.



Day Services - to reduce the spread of infection our day hospice moved to offering virtual support. This worked really well and included telephone and online support packages so that we were keeping in touch with patients and able to see how they were doing.

Complementary therapy – our Complementary Therapists specialise in palliative care. They form part of the Supportive Care Team at Ashgate Hospice and are based in the main hospice building. This service is available to inpatients, Day Services attendees and to participants in the recently bereaved groups. The complementary therapy treatments that we provide can be used alongside conventional medicine or on their own



Occupational therapy - occupational therapists promote independence and quality of life when a patient's illness has restricted their normal activities of daily living. Our team works very closely with other members of the care team, carers and community agencies, but the patient's choice is central to any decisions made. The team can see patients in a variety of settings, including their own homes and at Ashgate Hospice's Inpatient Unit and Day Services. They can also provide an advisory role to nursing and residential homes



Spiritual care - our team of spiritual care practitioners works as part of the supportive Supportive Care Team. They are all specially trained and experienced in providing person-centred spiritual care in a healthcare setting and provide support to patients, their relatives, friends, carers, staff members and volunteers. The team seeks to listen, with compassion, helping people to explore their own sources of strength, comfort and hope



Social work - the Social Work Team is based at the hospice and out in the community. They work alongside other professionals and agencies to understand the needs of patients, their families, friends and carers. They help people to understand what help and support are available and what wider needs must be met (for example, the needs of children and young people when an important adult in their lives has died). They help to arrange and manage practical support for daily tasks



Outpatient care - we continued to provide important services including lymphoedema treatment, counselling, consulting, medical assistance, physiotherapy, psychology, consultation with the Ashgate Hospice Community Nurse Specialists.
and bereavement services.



Continually learning and improving

Ashgate Hospice tracks and publishes its quality data, to ensure we are continually learning and improving. Our aim is to give all our patients the best possible experience. We are currently working with Quality Health to review our patient feedback questionnaires. This is so that we can improve how we capture their experiences. We are also looking at alternative methods to enable service users to become more involved in providing constructive feedback.

Where we can do better, we strive to learn from that experience for next time. A data workstream involving all departments has continued to review and develop our data and Business Intelligence capabilities. This is so that we can improve our quality improvement and governance practice. Quality Improvement Bronze Level training has been rolled out across all teams and is continuing.

Every three months, we collate quarterly reports that are shared with NHS Derby and Derbyshire CCG. We look at patient trends, areas for improvement and ways we could work differently to enhance the services we provide. For example, during this year we focused on falls. We introduced an Enhanced Nursing Support Policy. This provides additional guidance for nursing staff caring for patients on the IPU who are at increased risk of falls. This enables staff to identify which patients may need more frequent or 1-1 observation on admission, or as their condition changes. This has helped us to reduce our rate of falls, and in particular the number of falls an individual patient may have.

Clinical training and education

Our role at Ashgate is to care for patients who have specialist needs. We are also committed to ensuring that all local healthcare professionals are able to provide the best end of life care for everyone. This is for patients who may be in the hospital, in a nursing home, in a residential home or being cared for in their own home. That's why we have continued to provide a varied programme of training and education, including evening seminars, as an educational resource to upskill the healthcare community of North Derbyshire.



Our COVID-19 response

Ashgate responded early to the pandemic. All staff who didn't need to be at the hospice to give or directly support patient care were told to work from home from 16th March, and were furloughed from 30th March. Our coffee shops were shut on 20th March, and the retail shops from the 23rd March.

The Lavender Wing, our specialist wing for COVID-19 patients, opened on 31st March.

At first staff did not expect the pandemic to have such an impact on the hospice, as our Learning History shows.

> "I'll be honest, when it first started, I just thought it was the media going overboard as usual, like they quite often do... I wasn't concerned at all... it was only when we got to February, that I started to realise what was happening... this is real... this is really happening..."
>
> **Anonymous Learning History participant**



> "... I didn't take too much notice of it really, until we started to talk about it at the hospice... then it became pretty real, and I realised how serious it actually was... and from there, things happened very, very quickly..."
>
> **Anonymous Learning History participant**

> "Furlough was interesting because it happened so quickly... one minute we were open, the next minute we were closed... it took a couple of weeks... to sink in, that you weren't going to work... that you couldn't be involved... I think that was the big thing"
>
> **Anonymous Learning History participant**



Easy to read name badges with full-face photos, so our patients and visitors know there is a friendly face behind the mask.

Continually learning and improving

We commissioned a Learning History to capture the real-time thoughts and feelings of staff and volunteers as we went through the pandemic, and it offers an insight into how people were feeling at the time.

The purpose of a Learning History is to reflect on, and learn from, experiences in order to shape what we do in the future. It is a proven methodology to present the experiences and understandings of people involved in a collaborative learning event, telling the story in their own words.

Our Learning History has been developed from the voices and stories of 49 people from all parts of the hospice, through 64 learning conversations in two phases. The first was between May and early July 2020, and the second was between August and October 2020.

49

people's views were heard in the Learning History

Of those interviewed, nearly two thirds were mainly working from home, about a quarter were mostly still working at the hospice, and the remainder were either furloughed or in other circumstances. Emerging learning from these conversations was shared with a Learning Group throughout the process. In December the emerging themes and learning were shared and discussed with participants in the Learning History, with the Leadership Team and with the Leadership Forum.

Care in the community during COVID-19

Our community teams cover Chesterfield, North East Derbyshire and a large part of the Derbyshire Dales and High Peak area. They help people living in these communities access the services Ashgate Hospice has to offer so they can have the best possible quality of life.

Our Palliative Care Nurses and Doctors are continually providing a higher level of care in people's homes to prevent the need to admit a patient to a hospice bed.

While the camera crews were often busy filming our COVID-19 response on the Inpatient Unit, our response to the pandemic in the community was just as vital, although not as much in the public eye.

Teams had to learn how to put on and take off PPE safely before entering and when leaving our patients' homes. They provided compassionate care in the months before vaccines were available. This is when the risks of infection for themselves, and in turn for their loved ones, were very real.

1,647

patients were supported at home during 2020/21 by our Specialist Palliative Care Nurses and Support Workers

In addition to this, our Medical staff provided care for 118 individual patients, while our Physiotherapists and Occupational Therapists provided care and equipment for 273 and 236 patients respectively, to enable them to be cared for at home.

When necessary, our team of nurses also provided advice and guidance remotely through phone and video calls.

Because we provide essential end of life care at home, our patients are able to stay where they feel most comfortable, surrounded by the people they love, for as long as possible. If their condition deteriorates or their symptoms worsen, we can provide closer monitoring and care at our Inpatient Unit. We provide out-of-hours telephone advice and support to patients, their carers and other health professionals.

All the patients whom we cared for at home, who completed our patient experience questionnaires, said that they would recommend us to friends or family.



Amanda Hall, a Palliative Care Specialist Nurse at Ashgate Hospice, speaks of the challenges of caring for patients and their families in the community.

Her account was written in February 2021, during the COVID-19 crisis.

"Caring for patients and families in the community has been a real challenge over the past year for the community team and for me.

We've had to adapt to a new way of working from home while continuing to visit people in their homes, some of whom have tested posited for COVID-19.

We are limiting visits as much as possible, but still responding to the needs of our patients and families with the aim to provide the best possible care to people in their own homes. Trying to do the job in full PPE is problematic for us, particularly when we're trying to have those difficult conversations with patients and their family members.

It is instinctive to offer grieving families a hug and that would be something we would have done before the pandemic but we just can't now.

I'm a very tactile person so that's hard for me; when the love of someone's life is dying and you just want to comfort them. It is incredibly difficult.

Understandably, some people are uneasy about us visiting their homes and ask us not to visit. Others are desperate to see us because they haven't received specialist care from a professional for a long time.

Wearing the PPE is obviously uncomfortable but protecting our patients and their families is the biggest priority. It can get very hot, and that's even worse in the summer, but it means we're still able to do our jobs. For me, palliative care is about making sure we do the best we can. You've got one chance to get it right. You can't go back and change anything or do it differently afterwards. It is our mission to ensure that those being cared for are as comfortable and pain free as possible.

Often, it's about listening to someone and just giving them time to talk about their problems. It's about giving that reassurance to people that they're not alone. I just want people to have the best experience of it they can. That's what motivates me to get up to go to work in the morning.

I went to visit a relatively young man recently. He had been keeping all support available to him at arm's reach because he's tried to come across as strong as he possibly can to his family. He ended up having financial troubles, was in pain and needed help supporting his children and his wife. I just listened and offered all the advice and support that I could. By the end of the visit, he said he felt so much happier because his family now had a plan in place.

I'm immensely proud to be representing Ashgate throughout this time. As hard as it is at times, I still love my job. I'm very proud to be part of a team doing everything it can to support people at the end of their life in the best possible way. And despite the numerous challenges the community team has faced, we have all demonstrated huge dedication and professionalism throughout."

The importance of visitors to our patients throughout the pandemic and how we enable visits to happen

When our patients have complex needs, or multiple conditions that need careful management, we care for them in our Inpatient Unit at our hospice in Old Brampton. Our team of specialist doctors and nurses aim to make our patients comfortable and improve their quality of life. Most patients who come to our Inpatient Unit arrive for a period of assessment and are often able to return home after receiving treatment.

When the pandemic hit, it was crucial to implement new procedures quickly to care for end of life COVID-19 patients and non-COVID-19 patients, while keeping everyone safe.

Ashgate is one of the few hospices in the UK which cared for end of life COVID-19 patients throughout the pandemic.

1 in 3

beds were used by COVID-19 patients as we opened up a second COVID-19 wing during the second wave.

In addition, when many healthcare providers stopped patients receiving visitors, we worked extremely hard to maintain some visitors to our patients. This included for end of life COVID-19 patients and was something many NHS Trusts were unable to do. Our team was passionate about giving families the precious time together that is so important.

We were able to do this through rigorous infection control procedures that we adhered to scrupulously. This included donning and doffing PPE after every patient bedroom visit, and strict hand hygiene. We restricted clinical teams to certain areas of the Inpatient Unit to prevent cross infection. The hospice invested in two respirators so that staff who could not tolerate wearing FFP3 masks would be comfortable while caring for patients. Patients benefited too, because they could see the full face of the individual. This was particularly important if patients were deaf and relied on lip reading. Our housekeepers also ensured, by their thorough cleaning routines, that the unit was safe for patients their loved ones, staff and volunteers.



One Ashgate: how our Housekeeping Team were at the heart of our response to COVID-19

Jane Woodhouse, Housekeeper Supervisor at Ashgate, is responsible for ensuring the hospice is a clean and safe space for everyone. This is something that has been even more important during the pandemic.

"Our roles as housekeepers are more important now than they have ever been.

It's up to us to make sure that the hospice is a clean and safe environment for everyone who works, visits or is cared for here.

With COVID-19 patients receiving care in our Inpatient Unit, it is our responsibility to stop the spread of the virus and prevent people from being infected.

We have introduced many new processes to keep everyone safe. This included intensive cleaning of patients' rooms, routinely changing the curtains and wiping down door handles and surfaces. The list is very comprehensive, and we do most things three times a day. It's a physical job, especially when wearing PPE, but essential to ensure that we can continue to provide our care and services.

One of the most challenging parts of the job is not being able to make that human connection with a patient, since PPE can act as a barrier. It makes having conversations difficult, particularly when we try to be in and out of a room as quickly as possible.

Every day was different throughout the pandemic. There can be days that seem particularly tough, but everyone working on the ward is there for one another. We look out for each other and do our best to help one another out; that's what keeps you going.

I've been working at Ashgate since 2006 and I'm so proud to be part of this team. Everything we do is for the benefit of the hospice.

My team and I go above and beyond the basic necessities; and it's all to make sure patients receive the best end of life care that's possible."



Jane Woodhouse, Housekeeper Supervisor.

We are proud of our infection control record

We are proud to report that our stringent infection control procedures have avoided any COVID-19 outbreaks and there has been no cross infection of patients, staff, volunteers or visitors to the hospice.

This has enabled staff to continue caring for end of life COVID-19 patients and ensured that family visits could still go ahead.

Ashgate's Inpatient Unit played its most important role to date by supporting the wider healthcare system at a crucial time, relieving the pressure on acute beds.

We continued to provide high-quality care, despite all the strains that our team was under and we are exceptionally proud of this.

On average, 56% of patients admitted to the hospice were discharged home. Eleven patients recovered from COVID-19 on our Inpatient Unit and were discharged home.

During 2020/21, the Inpatient Unit cared for 363 patients and their loved ones. Some of the patients were admitted on more than one occasion, resulting in a total of 428 admissions.

The average length of stay on the Inpatient Unit during the year was

11.5 days

During 2020/21, our average bed occupancy was 10% lower than in the previous year. This was due to the impact of COVID-19 and people being more cautious about visiting their GP and being reluctant to be admitted into inpatient facilities. At the beginning of the year, there was also a reduction in the number of referrals to the Inpatient Unit from the acute trusts, with 81% of admissions on average between April to October coming from the community.

Our average bed occupancy was 82%, with 95% of referred patients being admitted within two days of referral.



Thorough cleaning while wearing appropriate PPE to reduce the risk of infection.

Hannah Botsford is a Healthcare Assistant working on Ashgate Hospice's Inpatient Unit. Here she tells us how life has changed for her since the pandemic unfolded.

"It has been a challenging journey so far, but I'm proud to be representing Ashgate during the pandemic. The impact that COVID-19 has on my day-to-day job has been huge. There have been lots of new policies and procedures to follow to ensure everyone is safe.

In fact, I feel safer coming in to work at Ashgate than I do visiting a supermarket! However, it can feel daunting at times because I am constantly checking that I am following all the procedures to ensure that the risk is reduced. Ultimately, we're still doing our best to make sure everyone gets the best care possible, regardless of COVID-19.

Personally, I have suffered with anxiety and depression myself for years and the pandemic has had a huge impact on this. However, there is a lot of support at Ashgate. We are encouraged to take time out to gather our thoughts.

My colleagues are the best source of support, because we can understand what each other is feeling and support one another. Some shifts are stressful and sometimes we shed tears. We're only human, but we carry on with a smile on our faces. We all pull together as a team and we couldn't do it all without each other.

I work 12 and a half hour shifts, sometimes during the day and sometimes a nightshift. It's hard work, but I start each shift thinking about the patients' families and how they would want their loved ones to be cared for. That's what I strive to do. I take care of them like I would my own family.

For some people, it's a tough decision to come to the hospice because there's a stigma behind it. And the end of someone's life is always a tough time. This was true even before the pandemic. However, the hospice is such a lovely place; one filled with laughter, smiles and a chance to make special memories.

The biggest challenge for me since the COVID-19 outbreak is not being able to hug! I love to give my patients a cuddle when they're upset or scared. A cuddle between staff goes a long way too. Sometimes we need that support and comfort throughout a tough shift.

Ashgate has a special place in my heart, since the hospice cared for my grandad. It means the world to me! My family motivate me. They are so supportive and if I have a bad day, they always manage to cheer me up.

When I first applied to work at the hospice, I was very scared. I thought it would be all doom and gloom. How wrong could I be?! It's a much happier place than I expected. We can offer care that isn't accessible to patients in a hospital. We get more time to spend with patients to talk and create lasting memories. Each patient has access to be outside even if they are bedbound, which I think is lovely!"



Hannah Botsford, Healthcare Assistant.

New ways of working due to COVID-19 that have improved patients' outcomes

Throughout the pandemic, we continued to deliver care and support to patients with a life-limiting illness.

Our teams cared for patients in their own homes offering complex symptom management and emotional support. To reduce face-to-face visits, they also supported patients by phone calls and via video calls.

Similarly, the Day Services nurses offered much of their support virtually, since patients were no longer able to access support on site at the main hospice in Chesterfield, due to infection control restrictions.

The Community Nurse Specialists found that referrals to their service were rising, but not all the patients needed their specialist care. Many of the patients referred were at an earlier stage of their diagnosis and needed less intensive support, something the Day Services nurses could facilitate.

Recognising the opportunities for improved patient outcomes, the two teams joined together to form a cohesive Community Services Team. They now meet daily via Microsoft Teams to discuss patient referrals and the best way to support them.

The move to remote working meant that the two teams could meet regularly and that they were able to support each other and their patients in better ways. Virtual meetings allowed them to work together in a way that had not been possible before COVID-19 and which will now continue.

Further improving our virtual IT systems to respond to COVID-19 challenges

As the likelihood of a national lockdown in March grew, we knew we would need to move over 150 clinical and non-clinical staff off-site and support them in working from home.

We were well positioned, however, for cloud-based working, having deployed Office 365 a year earlier. Now, we also needed to accelerate our plans for hardware and infrastructure developments.

Adding more users placed a huge burden on the existing solution system, which had not been designed to cope with the volume we now needed. It critically impacted on the clinical team's ability to remotely access SystmOne, our electronic patient records system. This meant they had to be based at the hospice to access the system to review and upload information to patients' records. This wasted valuable time and so needed resolving.

It was vital we had a remote-working solution that offered accessibility, reliability and speed. It also needed to meet the highest levels of security and stringent industry compliance standards. These are, critical when handling confidential healthcare and financial information.

Alongside increasing our number of leased laptops and other hardware required for remote working, we responded quickly to ensure the health and safety needs of our remote working staff were met. We focused on developing our IT infrastructure to enable us to migrate to a hosted remote working platform.

The new, faster solution was implemented with enhanced security measures and placed in a cloud environment on multiple servers to ensure that there were no single points of failure. This meant we should never experience any downtime or critical data loss.

The cloud solution also reduced our capital expenditure, because it is paid for on a monthly basis, providing flexibility to scale up easily and to increase capacity, when more users look to utilise the new platform for remote working.

There were further challenges as COVID-19 regulations meant we could not allow on-site technical work. However, our IT provider worked closely with our in-house team and with clinical colleagues to ensure most of the work was completed remotely within eight weeks.

> "The remote working solution has made an incredible difference to so many of us. Before the new solution, we were getting up early or working late in attempt to access the system at times we thought wouldn't be as busy. Not knowing whether we would get logged on or if we'd have to make several trips a day to the hospice was causing a great deal of anxiety. Without a doubt, the new system has resulted in an increase in the amount of time we are able to spend caring for patients and their families across the region."

Helen Cooper,
Community Nurse Specialist

> "As the pandemic took effect, our ability to visit our most vulnerable and ill people in their own homes, or bring them in for day care or clinics, began to diminish. This project allowed our community teams to be able to continue to provide essential palliative end of life care and support for patients and their carers, during the pandemic. The new safe and secure system meant that patients could continue to be cared for by the Ashgate teams without the need for a traumatic hospital admission away from their loved ones, and to die in a place of their choice"

Hayley Wardle
Director of Quality and Patient Care



Staying in touch with our patients during the pandemic: David's story

In 2013, David Lawton's life changed dramatically when he suffered a cardiac arrest during a ceremony in which his son was being recognised for his service in Afghanistan.

Army medics rushed to his aid and resuscitated him before using a defibrillator to keep his heart pumping. He was placed into an induced coma for two weeks and now relies on an implantable cardioverter defibrillator (ICD) to keep him alive.

Lucky to survive the terrifying ordeal, he has lived with heart failure ever since. He is now adjusting to a different challenge following the outbreak of the pandemic.

It's been a difficult year for the 73-year-old, but being invited to Ashgate Hospice's Virtual Day Services has certainly been a highlight.

He'd never accessed the hospice's services before the lockdown started, but has enjoyed making friends at the weekly coffee and quiz events and testing out his art abilities at the activity sessions.

David, from Hayfield in High Peak, said: "A local heart specialist nurse put me in touch with Ashgate via my doctor. She asked me if I'd like to try out the Virtual Day Services, so I thought I'd give it a go.

"It's nice to have friendly people to speak with. They're people who are on the same level as I am, with regards to their ailments. We can have a laugh and a joke, doing the art and that.

"I've enjoyed the coffee and quiz and art sessions too. There's lots of useful information you pick up on and everyone shares their experiences.

"It's all helped and given me something to do which isn't too strenuous at this moment."

Like many of those who use Ashgate's services, David is at increased risk of developing severe symptoms, should he be infected by COVID-19.

To reduce his chances of catching the virus, he has rarely left his house since the start of the pandemic in March 2020. This, meant he was unable to give his beloved grandchildren a hug for many months.

But Ashgate's Virtual Day Services give him something to look forward to each week and allow him to stay connected with other people in a similar situation to his own.

He adds: "I've found it to be interesting and very entertaining. It's stopped me from going round the bend because I've had something to look forward to!

"To be honest I thought a hospice was somewhere where people just went to die, but it's not the case, it's much more than that.

"I would recommend the services of Ashgate to anyone because it is a big help. You can find out so much useful information with the people and services that are made available to you.

"You can always ring them up and ask them about something. It really is a great thing and I'm grateful to have had the opportunity to be involved with it."

The Virtual Day Services initiative was made possible thanks to a £78,606 grant from the Coronavirus Community Support Fund in partnership with the National Lottery Community Fund.



David Lawton (centre) from High Peak benefited from our Virtual Day Services.

"To be honest I thought a hospice was somewhere people just went to die, but it's not the case, it's much more than that."

Wellbeing focus: preventing stress and trauma

Ashgate Hospice was quick to identify the potential harm that COVID-19 posed to the mental health and wellbeing of our staff and volunteers, in particular to our frontline teams. Just three weeks after the country was plunged into a national lockdown, the Supportive Care Team at Ashgate introduced our 'wobble room' support at the main hospice at Old Brampton.

Our Learning History captures how some of our clinical staff were feeling at the time:

> "...not being able to give a hug... it's extremely difficult... because we are around people all the time that are upset... and your automatic reaction... is for you to give them a hug... it is hard... I've struggled with it... and shed tears... it's not what we are... as a hospice..."
>
> **Anonymous Learning History participant**

> "I find... wearing scrubs and a mask... I don't feel that very, very clinical... disguise... is something... we should be doing here... I totally accept we're in different circumstances now, but that is not how I like to identify myself..."
>
> **Anonymous Learning History participant**

The support is also available to non-clinical teams. Many other people, including retail staff who had been furloughed, or staff missing the interaction of working in the offices, also needed to access the support.

The 'wobble room' service, which is continuing, is staffed by trained counsellors, social workers and spiritual care practitioners. They provide staff and volunteers with an opportunity to offload their concerns of the day and share their worries and anxieties.

It is set up as a physical space within the hospice, but support is also available over the phone or via Microsoft Teams.
The aim is to help mitigate trauma in staff both right now, and in the years to come, as they process their COVID-19 experiences. The 'wobble room' offers confidential group sessions or 1:1 support, in which staff and volunteers can talk openly about their anxieties, concerns, and experiences in a supportive way.

It is known that if loss of control, guilt, constant stress and isolation are not addressed, then anxiety increases. This can manifest itself as panic attacks and cause ongoing issues for a person's wellbeing. It is a destructive and distressing cycle and would likely lead to an individual needing to take time off work.

However, with the 'wobble room' support, healthcare staff and volunteers have been able to build their resilience, develop coping techniques and continue caring for those who need their support.

The support provided by the 'wobble room' helped ensure our Inpatient Unit remained fully operational. This was particularly so during the second wave when demand for their support and services was so great that we needed to open a second COVID-19 wing. During this time, 1 in 3 beds were used by COVID-19 patients.



By helping caring staff talk about their worries and experiences during COVID, our supportive care team helped reduce stress and burn-out.

Ashgate was also quick to acknowledge the pressure that their NHS colleagues were facing at the nearby Chesterfield Royal Hospital. That's why we also offered our support to their frontline staff.

Staff at Chesterfield Royal Hospital have hugely appreciated the support they received, with almost 200 members of staff accessing the service.

Susan Hawkins, Ward Sister at Chesterfield Royal has been receiving supportive care from Ashgate along with a lot of her team. She said: "Both me and members of the team feel the support service provided by Ashgate Hospice has been brilliant. We have been, being able to express ourselves about the issues we've been facing in a calm environment and not be judged. We have all felt relieved that we're able to unload our thoughts and anxieties during this extremely difficult time."

"Ashgate has played a key role in the Trust's response to support staff health and wellbeing by providing a flexible and rapid access mental health support service to run alongside exisiting staff provision"

Andy Picken
Workforce Health and Wellbeing Lead at Chesterfield Royal Hospital NHS Foundation Trust

One Ashgate

We have over 340 staff working across departments including clinical, fundraising and retail, marketing, finance, HR and estates.

They are supported by over 600 volunteers who carry out a whole range of roles to support our services. Their contribution across the entire organisation is immeasurable. There would be so much we would struggle to do without the time, skills and commitment of our volunteers. They add a great amount to our care and the operation of our hospice.

During 2020/21 we developed the concept of 'One Ashgate'. It's important for our staff to know that whatever department they work in, they are contributing to the high quality care that we provide. This idea gained real traction during our COVID-19 response. We had a real sense that the organisation was pulling together to respond to the vast challenge of the COVID-19 pandemic.

We immediately identified staff and volunteers who would need to shield or could no longer perform frontline duties due to the risk of COVID-19 infection.

It was important that all our teams knew that their work was immensely valued and appreciated and was all helping us to provide our much-needed care.

We are One Ashgate and all our staff and volunteers work to deliver the best possible care for our patients. This applies just as much to the staff in our retail and coffee shops, our donation centre, eBay, fundraising, marketing, finance, administration teams and elsewhere.

Our volunteers

Our volunteers work tirelessly in a number of roles, including the following:

Volunteer Gardeners

Our team of volunteer gardeners helps keep the beautiful grounds at our main hospice in Old Brampton looking wonderful all year round, supporting our gardener Steve (and hospice dog Shep!)



Retail Volunteers

From selling donations in our retail shops, on eBay and online, to helping distribute donations to our shops around North Derbyshire and sorting stock and serving customers in our busy coffee shops, our volunteers pull out all the stops to help us raise much-needed funds.

Volunteer Ward Companions

This role enhances our inpatient services by reassuring patients, their families and loved ones that someone will be there to provide companionship when it is needed. Our Volunteer Ward Companions allow family and friends the opportunity to take a break, knowing their loved one is not alone.

They provide companionship and emotional support to patients. They are well trained and are able to escalate any concerns, including any perceived changes in the condition of the patient, to nursing staff.

Volunteer Inpatient Unit Assistant

Our team of Volunteer Inpatient Unit Assistants serve refreshments and meals to patients on the ward. They present a friend face and listening ear to those who need it



Fundraising Volunteers

Our fundraising volunteers play an essentia role in helping us provide our care. Many o our community fundraising events during t year had to be cancelled, but we are please that so many of our volunteers still rallied t our cause including helping make our two COVID appeals such a huge success. Our fundraising volunteers are essential in help our community raise funds for the hospice

In 2020/21 we had 76 new volunteers join us. They support us in 18 different types of volunteering roles across Ashgate. Our volunteers contribute to every department

Our Inpatient Unit volunteers served over 14,000 meals to the patients on our ward.

Reception volunteers spent 1,680 hours welcoming visitors to the hospice.

We have 14 volunteers who have been with Ashgate for over 20 years. Of these, seven have been with us for an incredible 30 years.

If we were to pay for the contributions our volunteers gave us, we estimate it would cost us at least an additional £561,000 per year.

We would like to thank every one of our dedicated volunteers for their outstanding contributions to Ashgate Hospice in 2020/21.

For more information about opportunities to volunteer with Ashgate Hospice, please visit www.ashgatehospice.org.uk/volunteering



One Ashgate: How we secured the PPE we needed, including from community donations sourced by our fundraising team

Alice Round, Procurement Manager

"At Ashgate we've been really privileged not to have had any major issues with PPE. It's been challenging at times, but we have had amazing support from the local community. This includes the dentists and the vets who have so generously donated their supplies to us from really early on in the outbreak. Later on, we received support from NHS England, Hospice UK and from our local NHS Derby and Derbyshire CCG. Consequently, we've not really had any problems at all.

We've created a dedicated PPE storeroom. Our estates team works diligently to keep the contents well recorded and stocked correctly. This means that my team can then order what we need when we need it. The clinical teams can access it 24 hours a day, seven days a week and have what they need to hand.

I would not have imagined the role that I would play during this pandemic and that PPE would be such a focus of what we do. But it's been a good opportunity for procurement professionals across the country to demonstrate and show the work that we do.

The work that we're doing at the moment with PPE is the work we do day in, day out. We make sure that our colleagues have everything they need, when they need it. We ensure, that we are spending everybody's kind donations appropriately and we are making the money go as far as possible."



Events fundraiser, Dave, with a generous donation of PPE and sanitiser from Glendair Dental.



We have been rigorous in our approach to infection control – with no outbreaks at the hospice.

One Ashgate: How we unfurloughed retail staff to support the frontline

At the beginning of 2021, staff from across the hospice were redeployed to support those working on the frontline. This included eight members of the retail team who were furloughed at the end of 2020, after shops were forced to close in line with the Government's lockdown restrictions.

The retail staff took on several roles, including Ward Assistant and Ward Receptionist. Their responsibilities include ensuring PPE is available, delivering COVID-19 test samples to Chesterfield Royal Hospital and welcoming families of patients to the ward.

Jane Jones, Head of Clinical Services at Ashgate Hospice, said: "Their support made a huge difference. Doing jobs like putting disposable items away and topping up PPE meant our nurses and healthcare assistants could focus on spending their time in caring for patients.

"They're all so passionate about doing whatever they can to support the hospice so that we can be there for the patients and families in our care. They have the spirit and dedication which embodies everything that being part of One Ashgate is about."

Among those who put themselves forward to take on a new role is Paul Street, a furniture van driver, who would usually be based at the Hasland Furniture Store.

Paul helped out as a Ward Assistant and says it's been an eye-opening experience to see how the money his team helps to raise is used directly to support families.

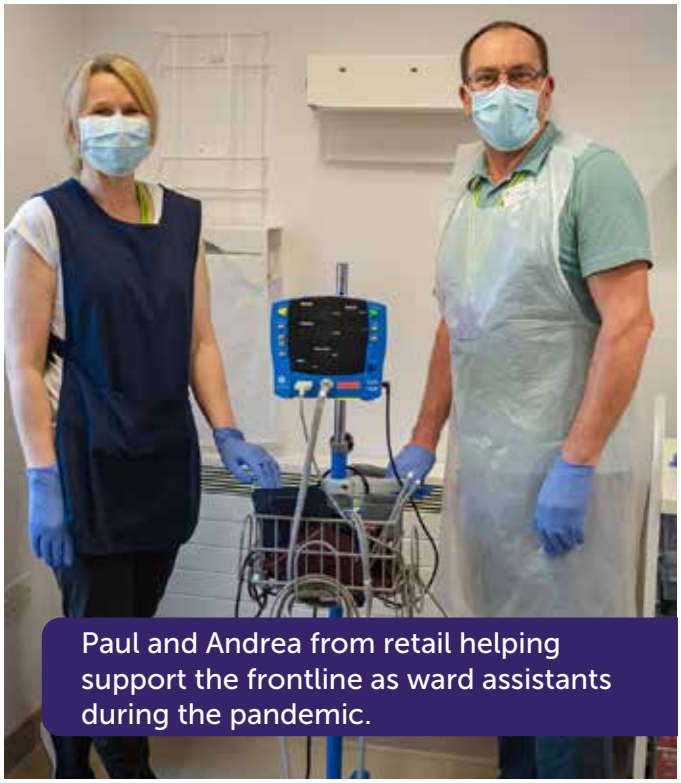
"I was furloughed at the start of the lockdown when non-essential retail outlets had to close," he said. "So, the opportunity to come and help on the Inpatient Unit at Ashgate was one I couldn't turn down.

"I've certainly been out of my comfort zone. I haven't really done anything like this before. I think my role now is the most rewarding job I've ever had. I really am honoured to be part of the Ashgate family."

Another retail worker who was redeployed to the ward is Andrea Farmery, who would usually work as the Deputy Store Manager at the Hasland Furniture Store.

She said: "I'm very proud to work for Ashgate Hospice and I'm so grateful to have been given the opportunity to help my colleagues at the hospice during the pandemic. It's lovely to be able to do a job that helps people when they need it most.

"The transition has been a learning curve to say the least, but I enjoyed the challenge. I'm pleased I was able to do my bit to support my hospice colleagues during these difficult times."



Paul and Andrea from retail helping support the frontline as ward assistants during the pandemic.

Inclusion and diversity

We recognise there is still work to do to ensure our care is reaching all the communities that need our support. Most of our patients are from a White British background. We have to be proactive in reaching out to other people and communities who may need our support across North Derbyshire. This needs a true One Ashgate approach from across the hospice. It must include recruitment, volunteering, communications and marketing, training and other aspects of our provision.

Improvements we have made during the period include:

- new online learning on Equality, Diversity and Inclusion which has received 100% positive feedback from learners and helped bring staff and volunteers up-to-date with the current approaches, terms and legislation
- all new learning content is created with accessibility in mind, using Plain English and an accessible e-learning platform
- the addition of new software to our website so information can easily be translated into different languages
- all marketing materials now clearly state they are available in different formats if needed, depending on communications requirements
- we follow best practice on accessibility on our social media and digital platforms. We make sure photographs are labelled correctly and that we do not unnecessarily use bold type.

Our 2021 People Survey results

The results reveal that more staff and volunteers than ever before would recommend Ashgate Hospice as a place to receive care, work and volunteer.

Ashgate Hospice's biannual staff and volunteer surveys included some exceptional results, of which we are very proud. Our staff and volunteers responded to the survey in January 2021. This was at the height of the pandemic, when we were at our busiest supporting COVID-19 patients and had two COVID-19 wings on our Inpatient Unit.

96%

of staff and volunteers would recommend the hospice to their friends and family as a place to receive care. This is a positive result which reflects

our current outstanding CQC rating.



Nine out of ten

people would recommend the hospice as a place to work or volunteer.



Three in four

people feel their mental health and wellbeing are looked after, despite the huge challenges that the pandemic has posed.

85%

of staff feel their role is purposeful and fulfilling.



88%

of people are satisfied with their job or volunteering experience.

Further key findings from the staff and volunteer surveys revealed:

- the majority of staff and volunteers (86%) feel they are treated with fairness and respect
- 83% of staff and volunteers feel the hospice's values are demonstrated in the work they do
- there is a strong sense of teamwork and camaraderie with 87% feeling part of a team
- 71% of all staff and volunteers and 59% of paid staff feel their views are listened to and valued, up from 60% and 50% in 2019.

The confidential surveys were completed by 208 (69%) members of staff and 290 (49%) volunteers. The results from the surveys are used to improve working conditions for staff and volunteers and, ultimately, improve patient care.

"Despite the challenges of the pandemic, I was delighted to learn that our staff and our volunteers feel so strongly about recommending Ashgate. I think that this speaks volumes about the work we have been doing to support staff and volunteers throughout the pandemic. This has included confidential counselling support for those on the frontline, increased paid carers' leave and family-friendly policies.

There are of course areas where we haven't scored as highly as we would like. Remote working has meant that staff feel communications between departments needs improvement.

Overall, I would say these results show the lengths we have gone to in order to maintain our fantastic results from 2019, and in some cases, improve in many areas. However, we will not rest on our laurels but will aim to be better still. We want Ashgate Hospice to be an even better place in which to work and an even better place in which to receive care."

Barbara-Anne Walker
Chief Executive at Ashgate Hospice

"These results tell me how positively everyone at Ashgate has united behind the shared response to COVID-19. In many ways, it's actually helped bring people together with a common cause. Rather than fragmenting under such a sustained and huge demand, the hospice has come out stronger. I'm hugely impressed by, and grateful for, the sustained, passionate and empathetic leadership that Barbara-Anne and the Leadership Team have demonstrated to make this happen. The strength of their leadership is reflected in the survey results."

Daniel Ratchford
Ashgate Hospice Trustee and Head of Quality Health

Our finances

Like most charities, our finances have been severely impacted by the pandemic, because our shops temporarily closed and fundraising events were scaled back or cancelled. However, we took swift action, including investing in digital fundraising, which worked well for us. We also engaged proactively in all relevant emergency funding schemes, including retail grants, furlough and, most significantly, NHS England COVID-19 support via Hospice UK.

We ended the year in a much stronger financial position than we entered it, but this is in a longer-term context of significant funding issues. We entered the year with free reserves well below our risk-based target and we are heavily dependent on the boost from the 2020/21 surplus to see us through the challenging times ahead. The combined results of the charity and its trading subsidiary for 2020/21 are a surplus of £3.0m. before investment revaluations. This is a dramatic turnaround from a budgeted deficit of £0.8m.

Our original approach to reducing the deficit

The original deficit had been approved in a context of a longer-term strategy to resolve it (our 'Here For The Future' work programme) and with the following assumptions and understanding:

- an underlying structural deficit (a shortfall in statutory funding estimated at £1m)
- a belief that this structural deficit had been masked in 2019/20 by the scale of restricted donations for the three-bedded bay capital appeal and in 2018/19 by the scale of legacies
- an early assessment of the impact of COVID-19 with just one lockdown largely offset by the significant value of emergency funds announced by the Government in March and April 2020
- optimism that our fundraising, retail and event income would pick up later in the year.

In reality, Ashgate received an abundance of funding support by the year end, but much of this was unpredictable and last minute. Consequently, even eight months into the year we still believed that we faced a large deficit for 2020/21, over and above the longer-term underlying shortfall. We therefore explained to staff and the wider community that we might have no choice but to make compulsory redundancies unless we secured more funding. Thankfully, we were able to agree liquidity support with NHS Derby and Derbyshire CCG. For further details on how we did this, see more on our community engagement campaign on pages 55-58.

How the funding picture changed during the year

The improvement from the deficit budget to the actual surplus reflects an unexpected second tranche of NHS England funding distributed via Hospice UK and two hugely successful digital fundraising appeals, together with technical accounting increases to our legacy income accruals as required under charity SORP accounting rules. The NHS England funding recognised the need for hospices to maintain capacity, reducing pressure on the wider health system.

A further and larger deficit budget was then approved for the following year (2021/22) based on an expectation of rebalancing it for 2022/23 onwards. This was through commissioning decisions to follow on from the system-wide review of End of Life Care Strategy for North Derbyshire.

The improved cash position and the initial one-year agreement of liquidity support from the NHS Derby and Derbyshire CCG, have been essential to creating the headroom to absorb such a deficit during the negotiation period.

A thank you to our staff, volunteers and community

Thanks are due to many groups for their support during the financial rollercoaster of 2020/21. The fundraising and messages of support from our community have been amazing, the proactivity of all our local councils has been hugely reassuring and the development of new ways of looking at funding with NHS Derby and Derbyshire CCG opens a very positive door for the future.

Perhaps most significantly though we should acknowledge the commitment, agility and resilience of our volunteers and our staff through this period. Our staff have had to endure all the challenges of working through COVID-19 whilst also facing a very real risk of compulsory redundancy due to what, for most of the year, was expected to be a large deficit. The learning history (pages 30-31) captures some of these very real fears.

We also owe a huge debt of thanks and gratitude to our Board of Trustees who worked with the Leadership Team every step of the way as we navigated the challenges of the pandemic, including the broad reaching community advocacy campaign to secure an interim funding agreement with NHS Derby and Derbyshire CCG.

Our finances looking forward

In simple terms, the deficit budget for 2021/22 can be attributed to:

- the underlying shortfall in statutory funding
- continued drag on income generation activities due to COVID-19
- a residue of inflationary impacts
- additional resourcing required to be prepared for higher demand for end of life care post COVID-19.

These issues obviously require further funding discussions and this is recognised in the regular commissioning meetings between Ashgate and NHS Derby and Derbyshire CCG.

We have reviewed our reserve targets and entered 2021/22 with much stronger free reserves than before. We are also well positioned operationally to support future demand due to the decisions made in 2018 to transform our former three-bedded bays into individual patient bedrooms on the Inpatient Unit. Resolution of our longer-term statutory funding challenge will, however, be required.

Reflections on an unprecedented year from our trustee Malcolm Pope, partner at Shorts Chartered Accountants, Chesterfield

"I have been a trustee for almost six years, and I can confidently say that the 12 months to March 2021 have been the most challenging. The impact of COVID-19 on every single team and every single team member at Ashgate cannot be underestimated. However, despite this, our patients have continued to receive the very best of care, and so all of our teams should be proud.

Having been part of this wonderful charity for several years, it was no surprise to me how calm, clear and 'as one' the Ashgate response was. At all times, whether during the weekly board meetings at the height of the pandemic, or through the learning history work undertaken afterwards, we, as trustees, felt connected to the challenges being faced.

Ashgate has been with us for over 30 years, and my view is that it is our job as trustees to make sure it is here for at least 30 more. Unfortunately, there have been points where this has been challenged financially and, in my opinion, these are borne from the recurrent statutory funding we receive simply not being high enough. However, once again, the level of support from our community and supporters has been overwhelming and we will continue to fight for the very best of end of life care for years to come."

Government support

NHS England awarded crisis funding to allow Ashgate to make available bed capacity and community support from April 2020 to July 2020. This was to provide support to people with complex needs in the context of the COVID-19 situation. It was also given to provide bed capacity and community support from November 2020 to March 2021 for the same purpose.

Advocacy in action: How the North Derbyshire community responded when we needed them as never before

Faced with a severe drop in income due to COVID-19 and lockdown restrictions, we mobilised the support of our local community behind a public advocacy campaign. This was to get the hospice the increased end of life funding from local health budgets that we needed to avoid job cuts at the worst possible time.

Our Board of Trustees and Leadership Team quickly recognised that the pandemic, while making compassionate end of life care more important than ever before, was also going to make the hospice's already serious funding situation much worse.

Unbelievably, at a time when our compassionate end of life care had never been more needed by the North Derbyshire community, the funding situation was at its most dire with job losses a real possibility.

Therefore, the advocacy brief was simple. We had to mobilise community support behind a campaign to persuade NHS Derby and Derbyshire CCG to award the hospice an increase in funding from local health budgets. This was so that compulsory job cuts during a pandemic could be avoided.

Many of our patient stories went viral, such as the story of a 14-year-old boy, Billy Devine, who sang to his mum one final time through her hospice room window.



Billy and his mum Jane.



Billy being interviewed by the press. His song to his mum went viral and even appeared in overseas media.

Viral video supports advocacy campaign

The video became our most watched with more than 53,000 views. The story was also shared across LadBible, Daily Mail, The Mirror, BBC News and more.

Billy Devine, 14, from Newbold in Chesterfield, along with his friend Ellie Marie Scott, sang a rendition of Lady Gaga and Bradley Cooper's Shallow to his mother through the window of her room.

His mum, Jane Devine, 51, was cared for by the team at Ashgate for four weeks after being diagnosed with breast cancer in July 2019.

Billy said: "I love to sing, and my mum always loved to hear me sing, so I thought it would be the perfect surprise to sing her favourite song while she was staying at Ashgate. I am incredibly grateful to the hospice for helping us organise this special moment, truly one none of us will ever forget."

"It felt like the performance of a lifetime," said Billy. "I'll never forget the look on my mum's face as she watched from the window of her room. Just remembering it now gives me goosebumps."

Jane died at the hospice on 7th September 2020, just a few days after the poignant performance.

Billy said: "Mum was such a caring person. She spent much of her life looking after other people and spending time with her family. She was such a strong and positive person to be around. Even after she was diagnosed, she was determined to face the cancer head-on.

"Unfortunately, no matter how hard Mum fought, this wasn't going to be a battle she could win. That's when she went to Ashgate and I can honestly say that the care she received was amazing. It is a very welcoming and comforting place, not just for Mum but for the whole family."

We also spoke to national media, highlighting that a hospice might have no choice but to make job cuts in the middle of a pandemic, when end of life care had never been more important.

Radio 4's Chris Vallance visited the hospice to visit our retail operations and speak to patients on the Inpatient Unit about the difference our care was making. He heard how it was helping to control their pain and improve their quality of life. Separately, an interview with our Chief Executive Barbara-Anne Walker on BBC Radio 5 Live led directly to a question on hospice funding being asked in the House of Lords.

We used all available channels to urge local people to write to their local MP. We also had meetings with all the North Derbyshire MPs, many of whom, including Labour's Toby Perkins MP and Conservative Lee Rowley MP, rallied to our cause and advocated on our behalf.

We launched a daily COVID-19 internal update to tell our staff the latest and ensure they did not receive information third hand. This was particularly important when the hospice had to ask for voluntary redundancies in September, something which highlighted the urgency of our campaign.

Funding lifeline is secured

In November 2020, we finally heard we had secured an interim funding agreement from the NHS Derby and Derbyshire CCG.

Our communications team produced a statement with the local NHS Derby and Derbyshire CCG that was issued to the press and the good news was covered extensively in the media. We will continue to campaign for a greater proportion of end of life funding to come from health budgets. We will continue to highlight how, as our Chief Executive Barbara-Anne Walker repeatedly explained to the media, "we wouldn't fund maternity and baby units in this way, so why is it acceptable for end of life care?"

Urgent Appeal

Soon after the outbreak of the pandemic, we decided to launch an Urgent Appeal to try to mitigate some of the losses we knew were coming our way.

The Urgent Appeal was launched on 8th April 2020. This required our fundraising and communications teams to collaborate and plan, design and launch a campaign in four weeks. They used social media and media relations to spearhead activity while the printed appeal was being produced. The timing of our appeal worked well. It launched on the same day that hospice care was all over the news with warnings that many hospices were in danger of going bust.

For the first time, we embraced the use of digital and programmatic advertising to reach out to new audiences within, and beyond, North Derbyshire.

We made extensive use of videos, of staff and volunteers explaining how they were helping during the crisis and urging people to support the campaign. Our digital agency helped to amplify these stories. The levels of engagement with our posts have been phenomenal, including over 23,317 engagements on our initial campaign video.

Our media activity complemented this work, with coverage shared on social media and in internal newsletters. We achieved extensive media coverage across print, radio, online and TV, with the campaign being mentioned on BBC Radio 5 Live and multiple interviews on BBC Radio Sheffield. We also had extensive coverage in local media, including the Derbyshire Times, the Derby Telegraph, Peak FM and Spire FM. We secured a lead item on BBC Look North evening news on 18th April. This reached an audience of 825,000. We then repurposed the TV footage for our digital campaign.

Due to the extraordinary level of engagement from the local community, we then encouraged our community to fundraise at home for the hospice. Our teams created virtual fundraising packs and resources to support this. We also put out requests when we needed specific items. These included when we were faced with shortages of PPE, or needed baby monitors so that relatives could talk to their loved ones in spite of the visiting restrictions in place at the hospice.

The appeal raised a total of:

£415,546

far surpassing our initial target of £150,000.

Our digital marketing activity has been instrumental in helping us achieve these figures, delivering 14.28 million impressions and 1,020 donations.

The appeal also helped to increase our number of regular givers by nearly 6%, helping to secure future income. We also recruited over 1,200 new donors to our supporter database.



Chief Executive Barbara-Anne Walker being interviewed on the hospice's funding challenges.

Winter Crisis Appeal

As COVID-19 cases started to rise again and government restrictions came back into force, it became apparent that the challenges presented earlier in the year were going to impact on planned fundraising once again.

It was decided that a second public plea for support was needed to help Ashgate continue to respond to the pandemic and to raise much needed funds, while our shops were closed and events could not take place. As a result, our teams worked together to develop the Winter Crisis Appeal which launched on 6th October 2020.

The objective of the Winter Crisis Appeal was to raise £60,000 from individual supporters. This would be the highest amount ever raised from a winter fundraising campaign at Ashgate. However, the predicted response was uncertain, since our Urgent Appeal had only been a few months before.

The Marketing and Communications team developed a brand identity for the digital fundraising campaign that stood out from previous campaigns. This reinforced the urgent need for support and highlighted the new challenges we faced.

We produced a series of emotional videos that put our community at the heart of the campaign. Lynn and Andy Gibson from Brimington featured in our campaign. Lynn's mum and dad were cared for at home by Ashgate's Palliative Care Specialist Nurses and Andy's mum was cared for in the Inpatient Unit.

Lynn said, "We realise now that if people didn't support the hospice through donations, my mum wouldn't have been able to stay at home where she wanted to be. It's thanks to everyone who has donated in the past that she was so well looked after. And we know that what we donate now will enable the hospice to carry on delivering this care for future generations. We were so fortunate to have such amazing care and I couldn't criticise a single thing about Ashgate."



Lynn and Andy Gibson, whose parents were cared for by Ashgate.

"We were so fortunate to have such amazing care and I couldn't criticise a single thing about Ashgate."

Between 6th October 2020 and 20th January 2021, we raised £566,256 from online donations, regular giving, cash donations and Gift Aid. An additional £63,500 was raised through Trusts and Grants and we predict that we'll receive a further £112,320 from regular gifts in future years.

The overall total raised was therefore

£742,076

This is £682,076 more than our target.

Of those who responded to the Urgent Appeal earlier in the year, 33% donated again to the Winter Crisis Appeal, demonstrating a deep loyalty to the charity. We also saw a significant increase in the average donation, compared with previous appeals, from £25 to £81 for the Winter Crisis Appeal.

Average donation of

£81

for this appeal.



Our digital marketing delivered 5.1 million impressions across North Derbyshire and 1,338 online donations. The levels of engagement have been phenomenal.

Our initial campaign video achieved over

21,119

engagements on Facebook.



Following on from the digital campaign, we decided to target both Urgent Appeal and Winter Crisis Appeal donors with a regular giving ask.

We recruited an additional

118

regular givers



Which was a 4% response rate making it a very successful ask. The combined value of these regular givers is £1,637 per month and £19,644 per year.

Fundraising standards

Ashgate Hospice's approach to fundraising is focused on supporter care through extensive and regular training of staff and volunteers. Ashgate Hospice is registered with the Fundraising Regulator and ensures its fundraising is legal, open, honest and respectful. We monitor third parties who fundraise for us by asking supporters for feedback, providing training and following up any complaints. The charity received no complaints during the year.

As part of our approach, policies and standards, we ensure that we protect vulnerable people and other members of the public from inappropriate behaviour. We train everyone involved in fundraising and clear processes are in place to monitor and manage every interaction. In the past year, we have not uncovered any failure by staff, volunteers, professional fundraisers or commercial participators to comply with our policies and standards.

More about the shops and the various lockdowns

Our shops, coffee shops and online selling platforms were faced with three government lockdowns during the 2020/21 financial year. Non-essential retail shops were closed from 24th March 2020, re-opening from the 21st June 2020. They closed again from the 5th November 2020 until the 5th December 2020. The final lockdown ran from the 31st December 2020 until the 12th April 2021. A total of 205 trading days were lost within the 2019/20 financial year due to the various lockdowns.

Coffee shops were required to close for much longer periods of time and a total of 314 trading days were lost.

After each lockdown, our retail teams worked extremely hard to prepare our shops and coffee shops for reopening. Record sales have been made after each Government lockdown. Great feedback was given to teams in relation to the social distancing measures put in place in our shops and coffee shops.

Despite the Government lockdowns, the retail teams explored and trialled new ways to generate income through online selling platforms and click and collect options.

The Hasland Furniture Store team continued to raise income through donated item sales by advertising on social media and running a "Click and Collect" service. The Furniture Store team was also able to continue to supply furniture to the Derbyshire Discretionary Fund. This is a council run initiative which supports those in emergency or crisis situations.

Our Ashgate Furniture Co online website continued to operate throughout all three lockdowns. Mary Gill, Online Sales Support, created a virtual "Pop up" Christmas gift site selling our ever-popular Christmas cards and gifts.

Anna Bartram, our Bakewell Shop Manager, also explored a new online initiative, working with Daniel Stothard, Online Sales Manager and the eBay team to create a new Clothing and Gift eBay shop. This proved to be so successful that it has continued to remain live after the lockdowns have ceased.

During the second and third lockdowns we were also able to open to some extent our Donation Centre. The Donation Centre team worked really hard to sort and prepare lots of great stock to be ready for our shops once we were able to trade again.

An incredible year in Ashgate's proud history

The year covered in this report has been nothing short of astounding. It has been a roller-coaster ride for everyone at Ashgate and we applaud the way they navigated the pandemic and responded to the huge challenges of COVID-19.

It has not been easy or straightforward to accept COVID-19 patients whilst we were unsure of funding and wary of the threat of compulsory job cuts. We took a brave decision to rally the community behind Ashgate to secure the funding that was so urgently required and I personally am delighted that the fundraising campaign resulted in increased support above and beyond our expectations. This indicates the massive affection and regard which the hospice generates locally. However, we must remain vigilant about the funding challenges that Ashgate will continue to face in future years.

I have nothing but praise for the Ashgate staff and volunteers who did their best work while facing the very real threat of redundancy. Many were working long days in full PPE with many worries for their own safety, and the safety of their loved ones, before the first vaccines arrived. And a special mention is due to my fellow trustees whose wise advice helped the Leadership Team to navigate some very difficult choices as the hospice worked so hard to support the community during this most challenging of times.

I would like to say a heartfelt thank you to everyone who helped Ashgate to get the funding it sorely needed. Thanks to you the hospice will continue to be here for the people of North Derbyshire in years to come.

Nicholas Jeffrey
Chair, Ashgate Hospice



"It has been a roller-coaster ride for everyone at Ashgate and we applaud the way they navigated the pandemic and responded to the huge challenges of COVID-19."

Reference and Administrative Information

Charity Name: Ashgate Hospicecare
Charity Registration Number: 700636
Company Registration Number: 02263980

Registered Office and Operational address: Ashgate Road, Old Brampton, Chesterfield, S42 7JD

This Trustees' Report also meets the requirements of a Directors' Report.

Directors and Trustees

Andrew Archibald
Dr Steve Bradder
Penny Brooks, Vice Chair
Andrew Dukelow (Andy sadly died on 21st July 2021. Please see page 15.)
Nicholas Jeffrey, Chair
Kirsty Mcmillan (appointed 18/03/2021)
Nigel Myhill
Malcolm Pope, Vice Chair
Daniel Ratchford, Vice Chair
Dermot Toberty (appointed 18/03/2021)

Secretary: Heidi Golden

Leadership Team

Matt Corbishley
Helen Furnivall (appointed 04/05/2021)
Rod Ismay
Dr Sarah Parnacott
Peter Stone
Barbara-Anne Walker
Hayley Wardle

Auditors

Azets Audit Services Limited, Chartered Accountants, Triune Court, Monks Cross Drive, York, YO32 9GZ

Bankers

Barclays, 1 St. Paul's Place, 121 Norfolk Street, Sheffield, S1 2JW

Governing Document

Ashgate Hospicecare is a charitable company limited by guarantee, incorporated on 2 June 1988 and registered as a charity in England and Wales on 14 September 1988.

The charity's objects are specifically restricted to the relief of sickness and the preservation of health among people residing permanently, or temporarily, in North Derbyshire.

The company was established under a Memorandum of Association and is governed under its Articles of Association which were revised and amended in 2016, to ensure that appropriate consideration was given to tenures and succession planning for the Chair and Trustees.

Related Parties

Ashgate Hospicecare Shops Limited is a subsidiary of Ashgate Hospicecare. During 2020/21, it operated fifteen shops and three coffee shops, the profits of which are spent wholly supporting the work of Ashgate Hospicecare.

Ashgate Hospice is a partner and shareholder in Hospice Quality Partnership (HQP). HQP was set up to support independent hospices with procurement, benchmarking and collaboration regarding the improvement of value and reduction of cost, as well as the potential to generate new income through dividends in the future. The hospice sees significant benefits in being a Partner/Shareholder with HQP and is supportive of the company's aims.

Financial Review

The consolidated net surplus before investment movements for 20/21 is £2,984k compared to a net deficit of £187k in 19/20. The magnitude of this surplus is a one off consequence of three significant factors in 20/21 and it has to be considered in the longer term context of a deficit budget for 21/22 and a long-standing shortfall in charitable funding. This is manifested in the designation of funds of £2,379k at 31 March 2021 to absorb the 21/22 budgeted deficit.

20/21 was a challenging and complex year with Covid-19, to such an extent that voluntary redundancies were made early in the third quarter of the year and with a very real possibility of compulsory redundancies to follow them due to the financial uncertainties at that time. NHS Derby and Derbyshire CCG then agreed liquidity support for the year ahead, after which an unexpected second tranche of NHS England (NHSE) funding was distributed via Hospice UK. This coupled with the generous response of our supporters to our Winter Appeal transformed the results for 20/21. The legacy income accrual has then been increased due to cash receipts from legacies post year end. This is a routine adjustment in line with charity accounting principles but the legacy adjustment, winter appeal and NHSE funding have in total turned 20/21 from a deficit into a surplus.

Longer term, the shortfall in statutory funding means that the Hospice is budgeting for a deficit in 21/22. This is closely linked to an ongoing review of end of life care strategy for Joined up Care Derbyshire, which is expected to lead to new commissioning decisions and clarity about the funding for such commissioning for 22/23 onwards. The Trustees agreed that in the context of the Derbyshire wide strategic review and the system pressures for bed space as a result of Covid, the Hospice should maintain its resourcing to maximise beds and services in 21/22 despite the deficit that would cause. The Trustees have therefore designated £2,379k of unrestricted funds at 31 March 2021 to accommodate the budgeted deficit of the Hospice in 21/22.

Usual sources of income in Retail and Fundraising were severely impacted during Covid, however, the Hospice successfully migrated to digital campaigns and had award winning success with its Crisis Appeal in May 2020 followed by its Winter Appeal. Lost income in Retail was partially offset by retail grants and furlough, but £305k of retail grants received in 20/21 were accrued back into the 19/20 results under income recognition principles advised by the accounting professional bodies.

Total funds have increased from £6,699k to £9,843k based on the surplus above plus a recovery of investment valuations of £141k.

Investment Policy

The hospice has a portfolio of long-term investments, deposit accounts and an interest bearing current account, to ensure appropriate liquidity of funds. Investments were £1,007k at 31 March 2021, an increase of 16% reversing the early losses of Covid which impacted on the prior year results. With regard to the ethical investment element of the Policy, the Trustees do not wish to adopt an exclusionary policy when considering prospective investments, or potential donation receipts. However, individual investment proposals, and donations, may be rejected if they are perceived to be in conflict with the purpose of the Charity.

Reserves Policy

Reserves are held to give the hospice a financial buffer against shocks to income and expenditure. They are necessary for protecting services in the event of a short-term disruption to normal income streams and they ensure the hospice has funds available to cater for capital works.

The Hospice implemented a risk based reserves policy in 19/20. This has supported strategic decision making in 20/21 and has been subject to regular review in the Finance & Strategy Committee.

Financial Review continued

Whilst total funds have increased by 41% from £6,699k to £9,843k, free reserves have increased to a lesser extent of 24% from £1,840k to £2,680k. This reflects the designation of funds to accommodate the budgeted deficit of the Hospice for 21/22.

The risk based target for free reserves at 31 March 2021 was £2,374k (19/20 - £2,311k) meaning that the Hospice was at 113% of its target (19/20 – 80%). Free reserves are net of restricted funds and designated funds. The purpose of such funds is narrated further in Note 26 of the accounts.

Senior Management Remuneration

Pay awards for the workforce are recommended to the Board by the Chief Executive with supporting evidence and rationale from the Leadership Team. No recommendations are made by the Chief Executive or Leadership Team for setting their own pay or remuneration, other than where an explicit recommendation or offer is made by them to forfeit any award. Instead, the Board of Trustees take responsibility for making any such decisions for key senior management personnel based on organisational performance, affordability and taking account of sector benchmarks. The HR team undertake regular pay benchmarking exercises for the workforce in general and this activity is outsourced to an external HR consultant in the case of benchmarks for Chief Executive and Leadership Team salaries.

Principal Risks and Uncertainties

The Board of Trustees has established processes to assess business and corporate risk. This involves identifying the types of risk the charity faces, prioritising them in terms of potential impact and the likelihood of occurrence, and identifying means of mitigating the risks. This assessment is monitored and updated on a regular basis.

The corporate risk register and the operational risk registers are monitored by the Risk Review Group which meets quarterly to ensure effective operational management of risk. Operational risk registers are, in turn, reported to the three Board Committees to ensure effective oversight and escalation. The corporate risk register is reported to the Board to ensure that Trustees are fully appraised of any strategic risks and the actions being taken to mitigate them.

A wide range of policies and procedures have been introduced to minimise risk and ensure compliance with legislation and CQC standards. Specific policies relating to risk include management guidelines, standing financial instructions, health and safety, information governance, clinical issues and employment.

Going Concern and Cashflow

The Trustees have considered the impact of COVID-19 on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2023 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists surrounding the duration and impact of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Statement of Trustees' Responsibilities

The trustees (who are also directors of Ashgate Hospicecare for the purposes of company law) are responsible for preparing the Trustees' Annual 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 trustees 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 trustees are required to:

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2019 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

The trustees 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.

In so far as the trustees are aware:

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

The trustees are responsible for the maintenance and integrity of the corporate and financial information included on the charitable company's website. Legislation in the United Kingdom governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.

Auditors

Garbutt & Elliott Audit Limited were appointed as auditor to the charitable company. Subsequently Azets Audit Services Limited were appointed auditor to the charitable company following their acquisition of the trade of Garbutt & Elliott Audit Limited on 1 December 2021. Azets Audit Services Limited have indicated their willingness to stand for reappointment at the Annual General Meeting.
By Order of the Board



N Jeffrey
Chair of Trustees
9 December 2021
Chesterfield

Independent Auditor's Report to the Members of Ashgate Hospicecare

Opinion

We have audited the financial statements of Ashgate Hospicecare (the "parent charitable company") and its subsidiary (the "group") for the year ended 31 March 2021 which comprise the consolidated statement of financial activities, the company and consolidated balance sheets, the consolidated cash flow statement and notes to the financial statements. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 March 2021 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

Based on the work we have performed, we have not identified any material uncertainties relating to events or conditions that, individually or collectively, may cast significant doubt on both the group's and the parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

Other information

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

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' report (incorporating the strategic report and the directors' report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Trustees' report (incorporating the strategic report and the directors' report) has been prepared in accordance with applicable legal requirements.

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report.

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

- adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us;
- the financial statements are not in agreement with the accounting records and returns;
- certain disclosures of Trustees' remuneration specified by law are not made; or
- we have not obtained all the information and explanations necessary for the purposes of our audit.

Responsibilities of trustees

As explained more fully in the Trustees' responsibilities statement, the Trustees 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 they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Independent Auditor's Report to the Members of Ashgate Hospicecare

Our responsibilities for the audit of the financial statements

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

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

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

Extent to which the audit was considered capable of identifying irregularities, including fraud

We identified areas of laws and regulations that could reasonably be expected to have a material effect on the financial statements from our general commercial and sector experience, through discussion with the Trustees and other management, and from inspection of the charity's regulatory and legal correspondence. We discussed with the Trustees and other management the policies and procedures regarding compliance with laws and regulations. We communicated identified laws and regulations throughout our team and remained alert to any indications of non-compliance during the audit.

The group and parent charitable company are subject to laws and regulations that directly affect the financial statements including company law, charity law, financial reporting legislation, pensions legislation, taxation legislation and further laws and regulations that could indirectly affect the financial statements, comprising safeguarding, medicines regulation, environmental, health and safety and employment legislation, and, in the current economic climate, Covid regulations. We assessed the extent of compliance with these laws and regulations as part of our procedures on the related financial statement items. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any. These procedures did not identify any potentially material actual or suspected non-compliance.

To identify risks of material misstatement due to fraud we considered the opportunities and incentives and pressures that may exist within the group and the parent charitable company to commit fraud. Our risk assessment procedures included: enquiry of Trustees and other management to understand the high level policies and procedures in place to prevent and detect fraud, reading Board minutes and considering performance targets and incentive schemes in place for management. We communicated identified fraud risks throughout our team and remained alert to any indications of fraud during the audit.

As a result of these procedures we identified the greatest potential for fraud in the following areas:

- income recognition and in particular completeness, the risk that income is recognised in the wrong reporting period, or that restricted income is incorrectly recognised within unrestricted income; and
- subjective accounting estimates.

Both fraud risks arise due to a potential desire to present the results in a differing light to suit management objectives. As required by auditing standards we also identified and addressed the risk of management override of controls.

We performed the following procedures to address the risks of fraud identified:

- identifying and testing high risk journal entries through vouching the entries to supporting documentation;
- assessing significant accounting estimates for bias;
- testing the recognition of income and in particular that it was recognised in the correct period and any restrictions recognised; and
- testing the control environment around cash takings, including segregation of duties and cash reconciliations.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it.

In addition, as with any audit, there remained a higher risk of non-detection of fraud, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. Our audit procedures are designed to detect material misstatement. We are not responsible for preventing non-compliance or fraud and cannot be expected to detect non-compliance with all laws and regulations.

Using our report

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

16/12/2021

Azets Audit Services Limited

Laura Masheder (Senior Statutory Auditor)
For and on behalf of Azets Audit Services Limited
Chartered Accountants
Statutory Auditor

Triune Court
Monks Cross Drive
York
YO32 9GZ

Consolidated Statement of Financial Activities

Incorporating a Consolidated Income and Expenditure Account
For the year ended 31 March 2021

		Unrestricted Funds	Designated Funds	Restricted Funds	**2021 Total**	2020 Total
Income:		£	£	£	**£**	£
Donation and legacies						
Donations	(2)	2,625,418	-	260,826	**2,886,244**	2,284,109
Legacies	(3)	1,704,114	-	-	**1,704,114**	1,142,200
		4,329,532	-	260,826	**4,590,358**	3,426,309
Income from other trading activities:						
Shops	(4)	1,374,196	-	-	**1,374,196**	3,346,756
Fundraising	(5)	826,037	-	-	**826,037**	1,053,828
Other	(6)	122,022	-	-	**122,022**	117,035
		2,322,255	-	-	**2,322,255**	4,517,619
Investment income	(7)	1,041	-	-	**1,041**	6,730
Income from charitable activities	(8)	3,491,398	-	-	**3,491,398**	2,942,636
Income from Covid-19 Grants	(9)	-	-	3,077,114	**3,077,114**	-
Income from furlough	(10)	485,011	-	-	**485,011**	-
Total income		10,629,237	-	3,337,940	**13,967,177**	10,893,294
Expenditure:						
Costs of raising voluntary income	(11)	395,712	-	-	**395,712**	307,910
Fundraising & other trading costs	(12)	3,488,495	-	-	**3,488,495**	3,870,257
Costs of charitable activities	(13)	3,998,483	-	3,100,191	**7,098,674**	6,901,954
Total expenditure		7,882,690	-	3,100,191	**10,982,881**	11,080,121
Net income/(expenditure) before investment gains		2,746,547	-	237,749	**2,984,296**	(186,827)
Gains/(Losses) on investments	(17b)	140,476	-	-	**140,476**	(166,181)
Corporation tax	(25)	19,727	-	-	**19,727**	(8,818)
Net Income/(expenditure)		2,906,750	-	237,749	**3,144,499**	(361,826)
Reserves transfer	(26)	210,179	-	(210,179)	**-**	-
Designated funds transfer		(2,379,085)	2,379,085	-	**-**	-
Net movement in funds		737,844	2,379,085	27,570	**3,144,499**	(361,826)
Reconciliation of funds						
Total funds brought forward		6,554,801	-	144,151	**6,698,952**	7,060,778
Total funds carried forward		7,292,645	2,379,085	171,721	**9,843,451**	6,698,952

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. A fully detailed Consolidated Statement of Financial Activities for the year ended 31 March 2020 is shown in note 31. The Statement of Financial Activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

Balance Sheets

At 31 March 2021

		2021 Group	2020 Group	2021 Charity	2020 Charity
Fixed assets		**£**	£	**£**	£
Tangible assets	(16)	**4,974,394**	5,096,223	**4,884,437**	4,965,485
Investments	(17 a&b)	**1,006,840**	866,364	**1,006,844**	866,368
		5,981,234	5,962,587	**5,891,281**	5,831,853
Current assets					
Stock of finished goods		**35,232**	32,153	**3,215**	9,603
Debtors	(18)	**3,159,745**	1,371,158	**3,925,981**	1,210,106
Cash at bank and in hand		**1,888,709**	698,404	**1,457,259**	578,680
		5,083,686	2,101,715	**5,386,455**	1,798,389
Creditors: Amounts falling due within one year	(19)	**(859,872)**	(983,963)	**(700,415)**	(712,532)
Net current assets		**4,223,814**	1,117,752	**4,686,040**	1,085,857
Total assets less current liabilities		**10,205,048**	7,080,339	**10,577,321**	6,917,710
Creditors: Amounts falling due after more than a year	(20)	**(361,597)**	(381,387)	**(361,597)**	(381,387)
Net assets		**9,843,451**	6,698,952	**10,215,724**	6,536,323
Unrestricted charity funds					
General		**7,292,645**	6,554,801	**7,664,918**	6,392,172
Designated funds		**2,379,085**	-	**2,379,085**	-
Restricted funds		**171,721**	144,151	**171,721**	144,151
Total funds	(26 & 27)	**9,843,451**	6,698,952	**10,215,724**	6,536,323

The financial statements were approved by the Board of Directors on 9th December 2021 and are signed on its behalf by:-



N JEFFREY Director

Company Registration No. 02263980

The notes on pages 75 to 92 form part of these financial statements.

Statement of Cash Flows

For the year ended 31 March 2021

		2021	2020
		£	£
Cash generated by/(used in) operating activities	(29)	**1,422,436**	(373,792)
Cash flows from investing activities			
Interest received		**1,041**	6,730
Purchase of tangible fixed assets		**(233,172)**	(1,630,119)
Cash (used in) investing activities		**(232,131)**	(1,623,389)
Increase/(Decrease) in cash and cash equivalents in the year		**1,190,305**	(1,997,181)
Cash and cash equivalents at the beginning of the year		**698,404**	2,695,585
Cash and cash equivalents at the end of the year		**1,888,709**	698,404

Notes to the financial statements

For the year ended 31 March 2021

1. Accounting policies

a. Basis of preparation

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland issued in October 2019, the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Accounting Practice.

Ashgate Hospicecare 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.

The financial statements are presented in sterling which is the functional currency of the charity and rounded to the nearest £1.

b. Company status

The charity is a company limited by guarantee and has no share capital. The charity is registered in England and Wales. The members of the company are the Trustees named on page 64. 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.

c. Basis of consolidation

The consolidated financial statements include the results of Ashgate Hospicecare and its wholly owned subsidiary Ashgate Hospicecare Shops Limited on a line by line basis.

A separate Statement of Financial Activities for the charity has not been presented because the charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006.

The surplus for the year for the charitable company was £3,289,401 (2020 deficit £531,460).

d. Going concern

The Trustees have considered the impact of COVID-19 on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2023 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists surrounding the duration and impact of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Notes to the financial statements

For the year ended 31 March 2021

e. Fund accounting

General funds are unrestricted funds which are available for use at the discretion of the Trustees 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 Trustees 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.

f. Critical accounting estimates and areas of judgment

Estimates and judgments are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Critical accounting estimates and assumptions: The company makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. There are no estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year.

g. Income

All income is recognised when 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.

Donated services are recognised when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from the use by the charity of the item is probable and the economic benefit can be measured reliably. In accordance with the Charities SORP (FRS 102), general volunteer time is not recognised. Please refer to the Trustees' report for more information about their contribution.

Notes to the financial statements

For the year ended 31 March 2021

Donations and gifts towards the running cost of the hospice are treated as income when received. Gifts in kind and donated goods are valued where the item is specifically identified and some reliable form of valuation is available. Goods donated for sale are not accounted for until the point of sale. On receipt, donated professional services and donated facilities are recognised on the basis of the value of the gift to the charity which is the amount the charity would have been willing to pay to obtain services or facilities of equivalent economic benefit on the open market; a corresponding amount is then recognised in expenditure in the period of receipt.

Grants are included in the SOFA in the year in which they are receivable and allocated to the necessary funds accordingly, and would be deferred if relating to services in a future period.

Lottery income is accounted for in respect of those draws that have taken place in the year. Income received from draws after the balance sheet date is deferred to the relevant accounting period.

Trading income is recognised at point of sale for both donated and purchased goods.

Other income is recognised in the period in which it is receivable and to the extent the goods have been provided or on completion of the service.

Retail grants payable for the first national lockdown were announced in March 2020 and were included in other income in Shops in 2019/20 on the basis that they satisfied the recognition criteria of entitlement, probability and measurability. Retail grants received thereafter have been recognised in the period in which they relate to.

h. Expenditure

Expenditure is recognised on an accruals basis inclusive of any irrecoverable VAT. Costs of generating funds comprise the costs associated with attracting voluntary income. Charitable expenditure comprises those costs incurred by the charity in the delivery of its activities and services for its beneficiaries. It includes both costs that can be allocated directly to such activities and those costs of an indirect nature necessary to support them, which have been apportioned based on headcount and floorspace.

i. Tangible fixed assets and depreciation

All fixed assets are included at cost, net of depreciation and any provision for impairment. Depreciation is calculated to write down the cost of fixed assets by equal annual instalments over the following periods:-

Freehold buildings	2% straight line per annum
Fixtures and fittings	25% straight line per annum
Motor vehicles	25% straight line per annum
Buildings extension	2% straight line per annum
IT hardware	33% straight line per annum
Plant	10% straight line per annum

All assets costing more than £1,000 are capitalised, except for computer equipment where all items with a value of £100 or more are capitalised.

Notes to the financial statements

For the year ended 31 March 2021

j. Fixed asset investments

Investments are a form of basic financial instruments and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing market price, except for shares in the trading subsidiary which are carried at cost. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

All gains and losses are taken to the Statement of Financial Activities as they arise.

k. Stock

Stocks of retail goods are included at the lower of cost and net realisable value. Donated items of stock for resale or distribution are not included in the financial statements until they are sold or distributed because the Trustees consider it impracticable to be able to assess the amount of donated stocks as there are no systems in place which record these items until they are sold and undertaking a stock take would incur undue cost for the charity which would far outweigh the benefits. Additionally, due to the agent arrangements present for the purposes of retail gift-aid, some donated items of stock held at the year end are not technically an asset of the charity and therefore no value can be assigned to them.

l. 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.

m. 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.

n. Creditors and provisions

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

o. Operating leases

Rentals applicable to operating leases are charged to the SOFA over the period in which the cost is incurred.

p. Pensions

The pension costs charged in the financial statements represent the contributions payable by the charity during the year in accordance with FRS 102. Employees who joined the Hospice before February 2020 and who were already active members of the NHS Pension Scheme are permitted to continue contributing to the Scheme. Rates are set by the NHS Pensions Agency. The scheme is a multi-employer scheme not designed to identify the assets and liabilities attributable to the Charity, so in accordance with FRS102 the scheme is accounted for as a defined contribution scheme.

Notes to the financial statements

For the year ended 31 March 2021

2. Donations

	Unrestricted	Restricted	2021 Total	Unrestricted	Restricted	2020 Total
	£	£	£	£	£	£
General donations	**1,438,716**	**37,463**	**1,476,179**	545,560	148,277	693,837
In memory	**342,959**	**9,547**	**352,506**	265,848	49,057	314,905
Gift aid income from individuals	**226,984**	**906**	**227,890**	116,493	764	117,257
Community	**371,749**	**1,370**	**373,119**	379,241	16,916	396,157
Gifts in kind (see below)	**116,057**	**-**	**116,057**	95,485	280,223	375,708
Trusts and grants	**128,953**	**211,540**	**340,493**	7,450	378,795	386,245
	2,625,418	**260,826**	**2,886,244**	1,410,077	874,032	2,284,109

Gifts in kind	Unrestricted	Restricted	2021 Total	Unrestricted	Restricted	2020 Total
	£	£	£	£	£	£
Donated food & drink	**8,376**	**-**	**8,376**	12,020	-	12,020
Capital items	**10,000**	**-**	**10,000**	-	280,223	280,223
Other items	**97,681**	**-**	**97,681**	83,465	-	83,465
	116,057	**-**	**116,057**	95,485	280,223	375,708

3. Legacies

	2021 Unrestricted	2020 Unrestricted
	£	£
Legacies	**1,704,114**	1,142,200

4. Shops

	2021 Unrestricted	2020 Unrestricted
	£	£
Trading activities	**953,703**	2,258,477
Donation of sale proceeds for goods sold as agent	**184,128**	625,349
Gift aid on donations of sale proceeds to charity	**46,497**	157,930
COVID-19 Retail Grant	**189,868**	305,000
	1,374,196	3,346,756

Notes to the financial statements

For the year ended 31 March 2021

5. Fundraising

	2021 Unrestricted	2020 Unrestricted
	£	£
Lottery	725,065	729,630
Events	100,972	324,198
	826,037	1,053,828

6. Other income

	2021 Unrestricted	2020 Unrestricted
	£	£
Training and Education	**3,850**	2,933
Catering and vending machine	**20,791**	86,416
Other	**97,381**	27,686
	122,022	117,035

7. Investment income

	2021 Unrestricted	2020 Unrestricted
	£	£
Gross interest receivable	**1,041**	6,730

8. Income from charitable activities

	2021 Unrestricted	2020 Unrestricted
	£	£
Clinical Support	-	-
NHS Derby and Derbyshire Clinical Commissioning Group	**3,162,947**	2,888,947
University of Sheffield - Student training	**36,400**	33,040
Chesterfield Royal Hospital - Medical secretarial support	**16,590**	16,590
Other	**275,461**	4,059
	3,491,398	2,942,636

Notes to the financial statements

For the year ended 31 March 2021

9. Income from COVID-19 grants

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.

10. Income from furlough

The hospice received funding through the Covid-19 Furlough Scheme for staff who were furloughed due to Government restrictions. In accordance with the guidance on gov.uk, 'furlough' refers to employees who have been asked to stop working for at least 3 weeks, but who are still being kept on their employer's payroll.

11. Cost of raising voluntary income

	Unrestricted 2021 Group	Unrestricted 2020 Group
	£	£
Donations	**362,269**	293,500
Legacies	**33,443**	14,410
	395,712	307,910

12. Fundraising and other trading costs

	2021 Group	2020 Group
	£	£
Lottery	**295,011**	275,212
Events	**151,229**	186,514
Community	**65,293**	40,948
Support costs – Fundraising	**419,469**	532,593
Support costs - Marketing and communication	**138,925**	170,825
Support costs – Retail operation	**296,350**	278,886
Shop expenditure	**2,122,218**	2,385,279
	3,488,495	3,870,257

All costs for fundraising and other trading activities in both years relate to unrestricted funds.

Notes to the financial statements

For the year ended 31 March 2021

13. Cost of charitable activities

	2021 Direct costs	2021 Support Costs	2021 Total costs	2020 Direct costs	2020 Support Costs	2020 Total costs
	£	£	£	£	£	£
Patient Care - Hospice	**3,424,788**	**1,054,705**	**4,479,493**	3,359,544	904,138	4,263,682
Patient Care - Community	**1,246,671**	**214,552**	**1,461,223**	1,284,622	169,095	1,453,717
Therapies & Rehabilitation	**1,013,503**	**144,455**	**1,157,958**	1,061,759	122,796	1,184,555
	5,684,962	**1,413,712**	**7,098,674**	5,705,925	1,196,029	6,901,954

Patient care within the hospice includes the activities of the Inpatient, Outpatient and Day Services teams.

Patient care within the community includes the activities of the Palliative Care Nurse Specialists, Palliative Care Community Nurses, Support Workers and End of Life Care Facilitators.

Therapy and rehabilitation includes the activities of teams within Supportive Care Services, Lymphoedema, Occupational Therapy and Physiotherapy teams.

All of the above are then supported by the management structure and support functions within the Quality and Patient Care team, Catering, Housekeepers and the wider Estates teams.

Support costs totalling £1,413,711 (2020: £1,196,029) have been allocated across activities. These costs include the support services of the Chief Executive Officer, Finance, IT, Procurement, Information Governance, Human Resources, Learning and Development and Clinical Administration teams.

14. Net movement in funds is stated after charging:

	2021 Group	2020 Group
	£	£
Auditors' remuneration - audit	**12,750**	8,000
Auditors' remuneration - tax	**800**	700
Auditors' remuneration - other	**-**	9,000
Depreciation - owned assets	**335,129**	327,673
Depreciation - assets held on hire purchase	**19,874**	9,937
Payments made under operating leases	**288,926**	306,191

Notes to the financial statements

For the year ended 31 March 2021

15. Wages and staff costs

	2021 Group	2020 Group
	£	£
Gross salaries	6,778,369	6,724,215
Social security costs	568,857	572,239
Pension costs	525,239	532,357
	7,872,465	7,828,811

Average number of employees and full time equivalents for the group and analysis of employees in the year were:

	2021		2020	
	No.	FTE	No.	FTE
Clinical	161	117	164	121
Retail	96	64	90	60
Finance & IT	7	6	8	7
HR & Executive	10	9	10	8
Estate	33	21	35	22
Fundraising/Marketing	30	26	31	26
Total	337	243	338	244

Employees earning over £60,000 are summarised below (excluding pension costs):

	2021 No.	2020 No.
£60,001 - £70,000	3	4
£70,001 - £80,000	2	1

Pension contributions relating to the staff earning over £60,000 totalled £28,217 (2020: £32,228).

The total amount of employee benefits received by key management personnel is £432,157 (2020: £482,691). The charity considers these to be the staff who comprise the senior management team on the hospice payroll: Chief Executive Officer, Director of Income Generation, Director of Quality & Patient Care, Director of People & Performance, Director of Finance & Estates and Director of Marketing & Communications.

Included within gross salaries are redundancy payments totalling £43,970 (2020 - £nil).

Notes to the financial statements

For the year ended 31 March 2021

16. Tangible fixed assets

The group	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2020	355,000	4,903,727	997,183	856,041	188,644	7,300,595
Additions	-	-	19,824	213,348	-	233,172
At 31 March 2021	**355,000**	**4,903,727**	**1,017,007**	**1,069,389**	**188,644**	**7,533,767**
Depreciation						
At 1 April 2020	142,000	864,861	685,500	324,532	187,479	2,204,372
Charge for the year	7,100	97,947	129,985	118,804	1,165	355,001
At 31 March 2021	**149,100**	**962,808**	**815,485**	**443,336**	**188,644**	**2,559,373**
Net Book Value						
At 1 April 2020	213,000	4,038,866	311,683	531,509	1,165	5,096,223
At 31 March 2021	**205,900**	**3,940,919**	**201,522**	**626,053**	**-**	**4,974,394**

The charity	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2020	355,000	4,903,727	431,215	818,875	80,350	6,589,167
Additions	-	-	7,451	206,187	-	213,638
At 31 March 2021	**355,000**	**4,903,727**	**438,666**	**1,025,062**	**80,350**	**6,802,805**
Depreciation						
At 1 April 2020	142,000	864,861	243,840	292,631	80,350	1,623,682
Charge for the year	7,100	97,947	76,710	112,929	-	294,686
At 31 March 2021	**149,100**	**962,808**	**320,550**	**405,560**	**80,350**	**1,918,368**
Net Book Value					-	
At 1 April 2020	213,000	4,038,866	187,375	526,244	-	4,965,485
At 31 March 2021	**205,900**	**3,940,919**	**118,116**	**619,502**	**-**	**4,884,437**

The value of fixed assets held under finance leases is £29,810 (2020: £49,683) in both the group and the charity.

Notes to the financial statements

For the year ended 31 March 2021

17. (a) Investments - charity

	Shares in group undertakings and participating interests
	£
Cost at 1 April 2020 and 31 March 2021	4
Net book value at 1 April 2020 and 31 March 2021	4

Holding of more than 20%

The charity holds more than 20% of the share capital of the following company:

Company	Company number	County of registration or incorporation	Shares held class %
Ashgate Hospicecare Shops Limited	02577401	England & Wales	Ordinary 100%

The aggregate amount of capital and reserves and the results of the subsidiary for the financial year are as follows:

	Principal Activity	Capital and reserves	Loss for the year
		£	£
Ashgate Hospicecare Shops Limited	Charity shop	(372,269)	(534,903)

(b) Fixed asset investments

	Group		Charity	
	2021	2020	**2021**	2020
Listed investments	**£**	£	**£**	£
Fair value at 1 April 2020	**866,364**	1,032,545	**866,364**	1,032,545
Additions	**-**	-	**-**	-
Adjustment	**-**	-	**-**	-
Investment gains/ losses	**140,476**	(166,181)	**140,476**	(166,181)
Fair value at 31 March 2021	**1,006,840**	866,364	**1,006,840**	866,364

The historical cost of the investment is £900,000 (2020: £900,000).

Notes to the financial statements

For the year ended 31 March 2021

18. Debtors

	Group		Charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Amounts falling due within one year				
Trade debtors	**270,906**	1,513	**268,742**	1,653
Other debtors	**2,251,262**	944,812	**2,166,589**	586,490
Value added tax	**521,501**	324,614	**507,929**	316,772
Prepayments and accrued income	**116,076**	100,219	**49,745**	40,106
Amounts owed by group undertakings	**-**	-	**932,976**	265,085
	3,159,745	1,371,158	**3,925,981**	1,210,106

In the subsequent year, the company's intercompany debtor balance has been partly cash settled and the remainder formalised into an intercompany loan, bearing interest, which is intended to be settled by way of consideration for the trade of the subsidiary in a business combination with the parent charity.

19. Creditors

	Group		Charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Amounts falling due within one year				
Trade creditors	**142,835**	392,626	**125,318**	238,361
Tax and social security	**181,073**	202,822	**161,884**	176,324
Accruals and deferred income	**516,174**	368,725	**393,423**	278,057
Finance lease creditor	**19,790**	19,790	**19,790**	19,790
	859,872	983,963	**700,415**	712,532

Deferred income includes lottery money received in advance for future draws. At 31 March 2021 this totalled £96,931 (2020: £93,566). All deferred income from 2019/20 was released in the year.

20. Creditors: amounts falling due after more than one year

	Group		Charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Other creditors	**355,000**	355,000	**355,000**	355,000
Finance lease creditors	**6,597**	26,387	**6,597**	26,387
	361,597	381,387	**361,597**	381,387

Notes to the financial statements

For the year ended 31 March 2021

21. Operating lease commitments

At 31 March 2021 the charity had future minimum lease payments under non cancellable operating leases as follows:

	Group		Charity	
	2021	2020	**2021**	2020
	£	£	**£**	£
Within one year	**277,063**	256,491	**3,189**	4,794
Within two to five years	**396,421**	300,683	**1,499**	1,954
In more than five years	**-**	20,000	**-**	-
	673,484	577,174	4,688	6,748

22. Pension costs

The pension costs relate to the amounts contributed by the Group and paid over to the Health Service pension scheme or to eligible employees' pension schemes. The pension costs amounted to £525,239 (2020: £532,357). The amount owed to the pension providers at the year-end was £42,876 (2020: £48,628). All schemes are treated as defined contribution and payments are charged to the SOFA in the year they are payable.

23. Capital commitments

There were no capital commitments at 31 March 2021 (2020:£nil).

24. Related party transactions and trustee renumeration

No Trustee received or waived any remuneration during either year.
There were no other transactions with Trustees during either year.

The only related party transactions were between the parent charity and the trading subsidiary. These were routine items, primarily where shops in the subsidiary receive donations of the sale proceeds of donated goods but then transfer such donations, net of commission, into the parent charity accounts. Also, payroll costs where the parent charity administers payroll for the group but transfers the relevant costs to the subsidiary. Year end balances are shown in the charity columns of Note 18 Debtors. Net recharges in the year were £1,600k (2020: £2,158k).

25. Taxation

As a charity, Ashgate Hospicecare is exempt from tax on income and gains falling within section 505 of the Taxes Act 1988 or s256 of the Taxation of Chargeable Gains Act 1992 to the extent that these are applied to its charitable objectives. No tax charges have arisen in the Charity. The tax charge arises from the trading results of the subsidiary.

	Group	
	2021	2020
	£	£
Corporation Tax current year	**(21,431)**	7,625
Adjustments in respect of prior years	**1,704**	1,193
	(19,727)	8,818

Notes to the financial statements

For the year ended 31 March 2021

26. (a) Statement of funds current year

	Balance at 1 April 2020	Income	Expenditure	Transfers in/out	Designated	Gains/ (losses)	Corporation Tax	**Balance at 31 March 2021**
Unrestricted Funds	£	£	£	£	£	£	£	**£**
General Funds	6,554,801	10,629,237	(7,882,690)	210,179	(2,379,085)	140,476	19,727	**7,292,645**
Designated Funds	-	-	-	-	2,379,085	-	-	**2,379,085**
	6,554,801	10,629,237	(7,882,690)	210,179	-	140,476	19,727	**9,671,730**
Restricted Funds								
Earmarked Donations	144,151	260,826	(23,077)	(210,179)	-	-	-	**171,721**
HUK/NHSE Covid	-	3,077,114	(3,077,114)	-	-	-	-	**-**
	144,151	3,337,940	(3,100,191)	(210,179)	-	-	-	**171,721**
Total of Funds	6,698,952	13,967,177	(10,982,881)	-	-	140,476	19,727	**9,843,451**

26. (b) Statement of funds prior year

	Balance at 1 April 2019	Income	Expenditure	Transfers in/out	Gains/ (losses)	Corporation Tax	**Balance at 31 March 2020**
Unrestricted Funds	£	£	£	£	£	£	£
General Funds	6,826,105	10,019,262	(11,072,037)	956,470	(166,181)	(8,818)	6,554,801
	6,826,105	10,019,262	(11,072,037)	956,470	(166,181)	(8,818)	6,554,801
Restricted Funds							
Earmarked Donations	71,085	80,756	(7,690)	-	-	-	**144,151**
Three Bedded Bay Project	163,194	793,276	-	(956,470)	-	-	**-**
Hospice Projects	394	-	(394)	-	-	-	**-**
	234,673	874,032	(8,084)	(956,470)	-	-	**144,151**
Total of funds	7,060,778	10,893,294	(11,080,121)	-	(166,181)	(8,818)	**6,698,952**

Notes to the financial statements

For the year ended 31 March 2021

Transfer of Funds

The transfer of £210,179 relates to expenditure on restricted projects which has been disclosed as unrestricted expenditure on the face of the SOFA. This predominantly relates to staff costs which are reported within the costs of charitable activities.

Designation of Funds

The Trustees have designated £2,379,085 from the surplus generated in 20/21 in order to fund the budgeted deficit of the Hospice in the following year.

The restricted funds are restricted by the donors for items of expenditure as follows:

Earmarked Donations

These are donations contributed by the general public to help fund specific clinical activities. At the end of the year £171,721 remained unspent and this will be expended in 2021/2022 onwards.

Hospice UK/NHSE

Non recurring funding of a restricted nature was received from NHSE as explained in Note 9.
The cost of charitable activities (Note 13) is greater than the combination of this NHSE funding and other income from charitable activities (Note 8) and therefore the Trustees consider that this restricted funding has been fully utilised within the year.

Three-bedded Bay Project

The project to transform three bedded bays into individual patient rooms was completed in 2019/20. The related additions to fixed assets were capitalised accordingly in that year. The net incoming resources from fundraising activity were therefore released from restricted funds to unrestricted upon completion of the capital works as the relevant restricted expenditure activity was then complete.

Hospice Projects

The fund represented monies received for two projects: the renovations of Inpatient Unit bathrooms and the development of a new dementia friendly area within the hospice.

Notes to the financial statements

For the year ended 31 March 2021

27. (a) Analysis of net assets between funds current year

	Restricted Funds	Unrestricted Funds	Total Funds
	£	£	£
Fixed assets	2,500	5,978,733	5,981,233
Current assets	169,221	4,914,466	5,083,687
Current liabilities	-	(859,872)	(859,872)
Liabilities due after one year	-	(361,597)	(361,597)
	171,721	9,671,730	9,843,451

(b) Analysis of net assets between funds current year

	Restricted Funds	Unrestricted Funds	Total Funds
	£	£	£
Fixed assets	2,500	5,960,087	5,962,587
Current assets	141,651	1,960,064	2,101,715
Current liabilities	-	(983,963)	(983,963)
Liabilities due after one year	-	(381,387)	(381,387)
	144,151	6,554,801	6,698,952

28. Ashgate Hospicecare Shops Limited: Profit and loss account for the year ended 31 March 2021

	2021	2020
	£	£
Turnover	**953,703**	2,258,477
Furlough	**423,967**	-
Retail Grant	**189,868**	305,000
Total income	**1,567,538**	2,563,477
Cost of sales	**(1,526,557)**	(1,667,279)
Gross Profit	**40,981**	896,198
Administrative expenses	**(595,661)**	(718,000)
Other interest relievable	**50**	254
Tax on profit	**19,727**	(8,818)
Retained (loss)/profit for the year	(534,903)	169,634
Number of shops and coffee shops	18	18

Notes to the financial statements

For the year ended 31 March 2021

29. Reconciliation of net movement in funds to net cash flow from operating activities

	2021	2020
	£	£
Net movement in funds	**3,144,499**	(361,826)
Depreciation charges	**355,001**	337,610
(Decrease) / Increase in creditors	**(143,881)**	24,144
(Increase) in debtors	**(1,788,587)**	(531,768)
(Increase) in stocks	**(3,079)**	(1,403)
(Gain) / Loss on investments	**(140,476)**	166,181
Interest received	**(1,041)**	(6,730)
Net cash generated by operating activities	**1,422,436**	(373,792)

There were no changes in net debt other than the cashflows above.

30. Contingent assets - legacy income

As at the reporting date, it is probable that additional legacies totalling £0.5m (19/20 £1.0m) are to be received. These have not been included within accrued income, as although the income is probable, the amounts have not yet been confirmed.

Notes to the financial statements

For the year ended 31 March 2021

31. Consolidated statement of financial activities - prior year

		Unrestricted Funds	Restricted Funds	2020 Total	2019 Total
Income:		£	£	£	£
Donation and legacies					
Donations	(2)	1,410,077	874,032	2,284,109	2,016,884
Legacies	(3)	1,142,200	-	1,142,200	1,561,177
		2,552,277	874,032	3,426,309	3,578,061
Income from other trading activities:					
Shops	(4)	3,346,756	-	3,346,756	3,071,548
Fundraising	(5)	1,053,828	-	1,053,828	1,088,819
Other	(6)	117,035	-	117,035	101,969
		4,517,619	-	4,517,619	4,262,336
Investment income	(7)	6,730	-	6,730	4,946
Income from charitable activities	(8)	2,942,636	-	2,942,636	2,938,199
Total income		10,019,262	874,032	10,893,294	10,783,542
Expenditure:					
Costs of raising voluntary income	(9)	307,910	-	307,910	290,358
Fundraising & other trading costs	(10)	3,870,257	-	3,870,257	3,767,838
Costs of charitable activities	(11)	6,893,870	8,084	6,901,954	6,592,415
Total expenditure		11,072,037	8,084	11,080,121	10,650,611
Net (expenditure)/income before investment gains		(1,052,775)	865,948	(186,827)	132,931
Losses on investments	(15b)	(166,181)	-	(166,181)	(25,104)
Corporation tax	(23)	(8,818)	-	(8,818)	(5,600)
Net (expenditure)/income		(1,227,774)	865,948	(361,826)	102,227
Reserves transfer		956,470	(956,470)	-	-
Net movement in funds		(271,304)	(90,522)	(361,826)	102,227
Reconciliation of funds:					
Total funds brought forward		6,826,105	234,673	7,060,778	6,958,551
Total funds carried forward		6,554,801	144,151	6,698,952	7,060,778

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities.

Ashgate Hospice

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To find out more about Ashgate Hospice and how you can support our vital work, please get in touch:

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