

The logo for Greenwich & Bexley Community Hospice features the organization's name in a blue, sans-serif font. Above the word 'Greenwich' is a stylized graphic of two birds in flight, also in blue. The word 'Community' is in a lighter blue, and 'Hospice' is in a darker blue.

**Greenwich & Bexley  
Community Hospice**

**GREENWICH & BEXLEY  
COMMUNITY HOSPICE LIMITED**

(A charitable company limited by guarantee)

**FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED**

**31 MARCH 2022**

Company Number: 2747475  
Registered Charity Number: 1017406

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## REFERENCE AND ADMINISTRATIVE DETAILS

### Directors and Trustees

Mrs Ruth Russell	Chair (also Chair of Quality & Safety Committee to March 2022)
Mr Tim Gutteridge	Deputy Chair and Chair of Trading Board
Mr David Atterbury Thomas	Treasurer and Chair of Finance Information Governance and Information Technology Committee
Mr Gerald Peters	Company Secretary and Chair of Lottery Board
Ms Lekshmi Babarujan (resigned 21 July 2021)	
Mr Simon Di Marino	Chair of Investment Committee
Ms Paula Keats	Chair of Remuneration Committee
Mrs Estelle Kerridge	Board Safeguarding Champion
Ms Kate McGranaghan (appointed 10 November 2021)	Fundraising Link Trustee
Ms Rebecca Middleton	
Mrs Mairead O'Reilly	
Dr Mary-Clare Parker	
Mrs Manal Sadik (appointed 10 November 2021)	Board Equity, Diversity and Inclusion Champion
Mrs Komal Whittaker-Axon	Chair of Quality and Safety Committee
Mr Michael Williams (appointed 10 November 2021)	Marketing and Communications Link Trustee

### Membership of Board Committees

Quality & Safety Committee
Finance, Information Governance and Information Technology Committee
Investment Committee
Remuneration Committee
Lottery Board
Trading Board (from August 2021)
Recovery and Transformation Programme Board (until November 2021)

### Non-Trustee Advisors

Mr Mike Davis	Non-Executive Director for GBCH Trading
Mr Barry Dow	Non-Executive Director for GBCH Trading
Mr Ivan Izikotwitz	Non-Executive Director for GBCH Trading
Mr Alan Powell	

### Chief Executive

Ms Kate Heaps

### Senior Leadership Team

Mr Victor D'Arcy-Smith  
Mr Jon Devlin  
Ms Wendy Lethem  
Ms Aneta Saunders  
Mrs Susan Smyth (resigned May 2021)  
Mr Graham Turner (appointed Sept 2021)

### Registered Manager

Ms Ellen Tumelty

### Registered Office

185 Bostall Hill  
Abbey Wood  
London  
SE2 0GB

### Bankers

National Westminster Bank Ltd  
1 Townley Road  
Bexleyheath  
Kent DA6 7JG

REFERENCE AND ADMINISTRATIVE DETAILS

**Auditors** Haysmacintyre LLP  
10 Queen Street Place  
London  
EC4R 1AG

**Registered Charity Number** 1017406

**Company Number** 2747475

## TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022

The Board of Trustees present their report and the consolidated financial statements of Greenwich & Bexley Community Hospice Limited (GBCH) for the year ended 31 March 2022.

The financial statements have been prepared in accordance with the Statement of Recommended Practice for Charities (SORP 2015) (Second Edition, effective 1 January 2019), applicable law and the Charity's governing document.

### STRATEGIC REPORT

#### OBJECTIVES AND ACTIVITIES

The Charity's public benefit as set out in the objects clause in its Articles of Association is, for the *relief of pain and suffering among the ill, the provision, management and maintenance of a hospice and associated community and outreach services for people with life-limiting illness and their families and friends, the protection and preservation of the health of those affected by bereavement and the advancement of education of professionals and the public in the relief of pain and suffering.*

At Greenwich & Bexley Community Hospice, we believe that every person facing death should have the best quality of life possible, experience dignity, peace and comfort and be supported to make the choices that are right for them.

Our organisational purpose is to support and care for people facing death and those close to them, their families and professional carers, acting as a system and community leader and connector, supporting others and delivering expert care to achieve our vision. As we strengthen our relationships across the community and health and care system, we will be generous with our skill and expertise to increase the profile of end of life issues and hospice care, improving access and extending reach.

Our staff work within our own services and in partnership with others to help patients maintain connections with their community and maximise their quality of life. We continue to be creative in our approach to care, reimagining support at home and for families, all the time responding to diverse needs and the challenges our patients and communities face.

We actively listen and respond to everyone who needs our care and at times, this requires us to lobby those in power to ensure that the necessary resources are available and that we can address barriers/challenges.

We recognise that our people are our greatest asset; we recruit, develop and retain the best people, creating opportunities and an environment for all of our staff so that they can be themselves and perform at their best.

Our Values



**Working together**

The Hospice will never be able to achieve our vision if we try to do it alone, we have much more impact when we work together across teams and disciplines, with partner organisations, the community, our patients and their families to make sure that we focus on the right things and make the biggest and best impact we can.



**Caring for and supporting one another**

If we care for one another then our patients and their families will feel reassured that we will care for them when they need it too. The work we do can be difficult, so supporting one another, acknowledging our differences, our strengths and weaknesses will help us give the best we can, and help us work as a team which is kind to one another, listens, challenges, is empowered to find solutions to problems and feels valued regardless of role.



**Respect and professionalism**

By being a diverse organisation we can include people with a range of knowledge and skills to achieve our vision. If we engage with this diversity, acknowledging that everyone contributes to achieving our goal and if we act professionally and treat others as we would like to be treated, we will learn from others and instil confidence in the Hospice so that when local people need our care they are less anxious and fearful about approaching us.



**Striving for the best and being forward thinking**

We should never be complacent about the care that we provide or the work that we do, by seeking feedback, reflecting on our work, learning from others and continuously improving we will maintain our ambition to be the best and to lead others to give expert care, support and education to dying people in Greenwich & Bexley if we pay attention to the small things, the more difficult things will be easier to achieve.

**Public Benefit**

The Trustees have paid due regard to the guidance provided by the Charity Commission on Public Benefit. They are assured that the aims and objectives, along with the outcomes of the activities of the Charity have met the Public Benefit requirement and acknowledge the generosity of its supporters who have enabled the public to benefit from the Charity's activities. This Trustees report demonstrates how this was achieved.

## TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued) OBJECTIVES AND ACTIVITIES (continued)

### Our Strategy

The last year has been full of challenges and triumphs; when we first entered the Coronavirus Pandemic, none of us expected it to last a year, let alone two; but unfortunately, it has been what has coloured much of our lives in 2021/22 as well as the previous year.

Across the hospice, colleagues have learned to adapt to ensure that whatever their role they are still able to deliver; whether that is in our income generation team, in our back offices and support functions or in our frontline clinical services. Our multi-professional team has adapted their practise, testing themselves regularly to keep our patients and their colleagues safe; becoming proficient at communication over video or behind a mask and adapting their knowledge and skills to respond to fresh challenges to ensure that we maintain the best service we can for everyone who needs our care.

This virus has in some way impacted the lives and wellbeing of everyone in society, and at the hospice we have not only had to respond to greater need in our community, but we've had to take even greater care of one another. Colleagues have themselves been impacted by the virus, many have lost loved ones themselves or been very sick and some impacted by the protracted effects of long COVID. Nonetheless, those who were able have worked tirelessly to keep shifts covered and patients cared for.

Throughout 2021/22, we continued to use our Recovery and Transformation Programme (RTP) to set our direction, ensure we maintained operations and to develop our hospice. The programme focused on seven priority areas, identified and crystallised by the COVID-19 experience.

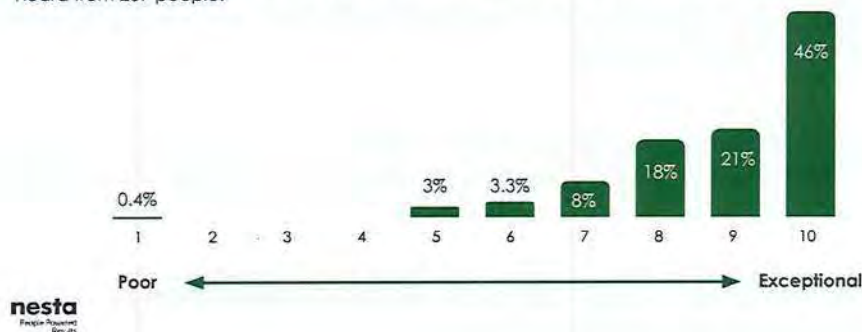
- |                                    |                                      |
|------------------------------------|--------------------------------------|
| 1. Service Transformation          | 5. Retail and Commercial Development |
| 2. Refreshing Volunteering         | 6. Fundraising Development           |
| 3. Staff Wellbeing and Development | 7. Stakeholder Engagement            |
| 4. Equity, Diversity and Inclusion |                                      |

The programme has helped us during a time of significant uncertainty and change to make progress towards achieving our vision, respond to opportunities and become more resilient to future threats. Through the RTP, and working with Nesta and Julie Dodd, a digital transformation consultant, we were able to build on what we've learned and begin to put the last two years behind us with our new strategy, approved by the Board of Trustees in March 2022.

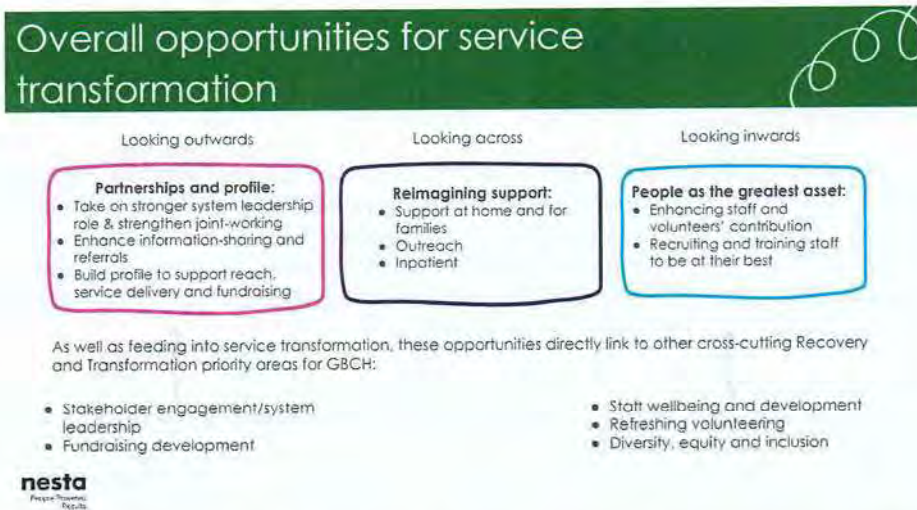
Some headlines from engagement conducted by Nesta on behalf of the hospice are outlined below:

### People feel overwhelmingly positive about GBCH's current care and support

We asked people to tell us how they feel about GBCH's care and support currently from 1-10, and heard from 239 people:



## TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued) OBJECTIVES AND ACTIVITIES (continued)



Our new strategy outlines our priorities for the next five years. We will continue to ensure that our patients, their families and friends and the needs that they encounter through their journey from diagnosis through to death and into bereavement remain at the heart of all we do. Our skilled, compassionate and dedicated team of staff and volunteers, who always strive for the best in all that they do, will be responsible for the delivery of our strategy. Together we will work with local people and our partners to understand and meet the evolving needs of our communities, working together to achieve the very best outcomes for patients. The new strategy continues to take account of the accelerated change and adaptation we have seen through the challenges of 2020 and 2021 and seeks to build on what is positive about this change and leave behind that which is negative.

Our strategic priorities will help ensure that we utilise our resources as efficiently and effectively as possible so that care and support is available where and when needed, delivered by the most appropriate person or service. It also supports our aim to ensure that we remain financially sustainable, so that we can continue to provide care and support long into the future.

We recognise that our purpose will sometimes require us to take risks, to be courageous in advocating for those whom are most in need and sometimes to prioritise resources. We will continue to be innovative in our approach and focus on our priorities; this will help ensure that we achieve our vision of the best quality of life possible for people facing death in our community.

Our three strategic priorities will ensure that we continue to look forward to be the very best we can be:



1. Listening to all voices in our community, understanding their stories and challenging inequalities so that we develop support, which is responsive, compassionate and flexible to meet differing and individual needs



2. Growing and empowering our own staff, working to our strengths alongside system partners and developing others to give the best support they can to dying people and their families



3. Making the most of technology to assist us in delivering outstanding care, increasing reach, demonstrating impact and maximising income

Further information about our new strategy is available at [www.communityhospice.org.uk](http://www.communityhospice.org.uk)



**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**OBJECTIVES AND ACTIVITIES (continued)**

The table below gives an overview of the progress made against our Recovery and Transformation Programme objectives:

Work stream	Progress
Service Transformation	<ul style="list-style-type: none"> <li>• Appointment of New Director of Care and Service Transformation</li> <li>• Reopened our rehab gym and began a hybrid model of service delivery</li> <li>• Mapping of local opportunities for local wellbeing support already provided by partners</li> <li>• Commencement of 1-1 wellbeing support provided by Wellbeing Support worker</li> <li>• Evaluation of ongoing secondment of Physiotherapists to Oxleas' Lung Health team</li> <li>• Appointment of shared Occupational Therapist post with St Christopher's Hospice</li> <li>• Sessional Counsellors recruited for re-modelled bereavement service</li> <li>• Continuation of our involvement in system-wide 'Home First' model including 7 day Care Coordination service and further expansion of Social Work Team</li> <li>• Evaluation of Hospital End of Life Discharge Coordinator role</li> <li>• Further development of Care Homes Team including introduction of Care Homes ECHO webinars</li> <li>• Appointment of Board Safeguarding Champion</li> <li>• Completion of work by Nesta to inform new strategy</li> <li>• Completion of digital maturity assessment and horizon scan of opportunities to support service transformation</li> <li>• Worked with CRASH charity to commission options appraisal to inform clinical estates strategy</li> </ul>
Refreshing Volunteering	<ul style="list-style-type: none"> <li>• Reintroduction of face to face volunteering within hospice and community</li> <li>• Continued growth of Compassionate Neighbours scheme</li> <li>• Recruitment to new roles including for Kickstart Programme and reintroduction of Young Ward Volunteers</li> </ul>
Staff Wellbeing and Development	<ul style="list-style-type: none"> <li>• Staff wellbeing month took place in partnership with St Christopher's Hospice funded by SELCCG</li> <li>• Ongoing use of SE London Wellbeing portal and contribution to its development</li> <li>• Wellbeing sessions ad hoc/ via external supporters</li> <li>• Ongoing training and development available for all staff</li> <li>• Continuation of free meals for hospice based staff</li> <li>• HELP programme continues – including reintroduction of face to face training</li> <li>• Re-Introduction of Schwartz Rounds</li> </ul>
Equality, Diversity and Inclusion	<ul style="list-style-type: none"> <li>• Progress towards implementation of our E,D&amp;I vision<sup>1</sup> and action plan</li> <li>• Introduction of new recruitment procedures</li> <li>• Further roll out of Unconscious bias training</li> <li>• Continued engagement with SE London People board E,D&amp;I work</li> <li>• Appointment of Board E,D&amp;I Champion</li> <li>• Commissioned METRO Charity to review support for LGBTQ+ people</li> <li>• Establishment of new Shadow Workforce Committee</li> <li>• Ongoing Community Development work</li> </ul>

<sup>1</sup> The Hospice aims to develop a culture which values its staff and patients/ clients and its local community and to have a system in place which proactively promotes inclusion and equality for all as well as embracing diversity. We aim to integrate equality, diversity and inclusion in everything that we do, so that it is embedded in our daily practice.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**OBJECTIVES AND ACTIVITIES (continued)**

Retail and Commercial Development	<ul style="list-style-type: none"> <li>• Completion of retail review to advise future structure and strategy</li> <li>• Refurbishment of 2 retail units</li> <li>• Commissioned Box-move for hospice retail logistics</li> <li>• New Head of Retail in role</li> <li>• Established a Trading Board and recruited a new Trading Non-Executive Director</li> </ul>
Fundraising Development	<ul style="list-style-type: none"> <li>• Investment in fundraising to grow income, particularly individual giving, lottery and community fundraising</li> <li>• Reintroduction of some face to face fundraising events and continuation of virtual</li> <li>• Commenced project to replace our current Finance System</li> <li>• Appointment of new Database Manager and agreement to invest in new Customer Relationship Management System (CRM)</li> <li>• Appointment of a Fundraising Trustee Champion</li> </ul>
Stakeholder Engagement	<ul style="list-style-type: none"> <li>• Regular 'time to talk' meetings embedded across the organisation</li> <li>• Appointment of new Marketing and Communications Manager and review of regular communications, including further development of electronic communications Recruitment of Head of Communications and Marketing</li> <li>• Further development of brand and review of patient information resources</li> <li>• Appointment of a Communications and Marketing Trustee Champion</li> </ul>

During the height of the pandemic, we made some changes to our governance structure to ensure continued board oversight and assurance, as well as to provide support to the Chief Executive and her senior leadership team. We have now reviewed the structure for 'business as usual' and will continue to implement our planned changes throughout 2021/22.

**Hospice Services**

Greenwich & Bexley Community Hospice offers a number of services based within and working from our main Hospice building. We were last inspected by the Care Quality Commission in 2016, when we achieved an overall rating of 'Good' and a rating of 'Outstanding' in the responsiveness domain.

**Services in the Hospice building**

- Our **inpatient** unit, caring for and supporting people who have symptom control needs, complex psychological support needs, respite needs or end of life care needs. The team also provide significant support to the families and friends of those who we care for.
- Our **outpatient services** support people who remain at home but are able to travel to the hospice for rehabilitation, ambulatory treatments and outpatient review as well as complementary and creative therapies.
- Our **rehabilitation** team work with patients in all Hospice services to maintain or develop independence and develop strategies to manage symptoms such as fatigue and breathlessness.
- Our **bereavement and counselling** service gives emotional support and counselling to people with advanced illness and their families and friends before and after bereavement, face to face individually, in groups and over the telephone.
- The Hospice's **chaplaincy** service provides spiritual support to patients across all settings when requested.

**Services in the Hospital**

- The Hospice Team at **Queen Elizabeth Hospital**, Woolwich, trains and advises hospital staff on end of life care and symptom control issues as well as supporting patients and their families directly, helping to ensure that their wishes for care are met and supporting patients to be discharged home, or to a care home or the Hospice where this is appropriate. This service operates seven days a week.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**OBJECTIVES AND ACHIEVEMENTS (continued)**

**Services in the Community**

- The hospice's **Community Services** provide specialist palliative care across Greenwich and Bexley Boroughs. Clinical Nurse Specialists, Doctors and Allied Health Professionals visit people in their own homes, in care homes and in the local prisons; giving holistic care, advice and support to them and their network of informal support as well as to the other community staff (GPs, District Nurses etc.) involved in their care. In Greenwich, we also provide a fully integrated care coordination, hospice@home and nursing service, providing practical and personal care around the clock in patient's own homes. Since the beginning of the Coronavirus pandemic, the hospice has also delivered personal care to residents in Bexley through a spot-purchase arrangement. These services operate seven-days a week as well as providing on call advice around the clock. In Greenwich we also provide night sitting and a night time rapid-response service, provided through a contract with Marie Curie and Oxleas NHS Foundation Trust.
- The Hospice **Social Workers** work with patients to access benefits and grants as well as to try to resolve housing issues and get help with complex children and family needs or safeguarding concerns.
- Our network of community **volunteers** increasingly also supports people in their own homes, and includes volunteers who provide compassion, companionship and practical support, these volunteers are called **Compassionate Neighbours**.

**Education and Care Homes Support**

- Through our involvement in the **Hospice Education and Learning Partnership (HELP)**, our team provides bespoke and programmed training to nurses, doctors and other health and social care professionals as well as providing support and facilitation to staff, patients and families in care homes. HELP is a partnership between our own hospice and St Christopher's Hospice.

**OneBexley**

- In 2020/21 we were awarded a contract by London Borough of Bexley to provide assessment and review of social care needs for adults and their carers across the borough. This contract, which is the first of its kind, is delivered by the hospice as prime contractor with a partnership of seven other local charities. As the service develops we hope that it will help us engage with people earlier in their disease as well as supporting more carers who are looking after loved ones facing the end of their lives. Due to the success of the short-term pilot, which demonstrated better outcomes and more personalised care, we have been awarded a three-year contract.

**Progress on Hospice Strategy and Priorities for Improvement during the Coronavirus Pandemic**

Despite the challenges that continued because of the Coronavirus Pandemic, our Hospice achieved a huge amount in 2021/22. Much of what we achieved focused on us maintaining business continuity throughout our services as opposed to explicitly about meeting our strategic priorities, but where the situation presented challenges, we viewed them as opportunities to improve and in doing so were able to achieve a number of strategic goals.

Business Continuity and Infection Prevention

We were able to continue to protect our 'mission critical' services and support more people than ever before. Our hospice-wide pandemic planning group continued to meet regularly, to respond to new legislation and guidance, this has now become a regular group which meets to discuss operational challenges as they arise. The outcome of our governance review continued to be implemented, moving to bi-monthly board meetings and our new Workforce Committee was established in 'shadow' form. Operational managers continued to focus on maintaining our service and supporting staff and continued to assure the Board around our financial stability, workforce wellbeing and resilience, response to the pandemic and quality and safety of our services. Our Chair and Chief Executive continued with their weekly meetings and liaised with other Board members as necessary, we have reviewed our deputising structure for board members to ensure business continuity for governance and assurance.

In the early part of the year we continued to reduce face-to-face contact between staff and between staff and patients where this was appropriate. Many patients remain reluctant to have home visits and for some staff, work life balance has been enhanced by working from home, so hybrid working has remained in place where appropriate/ possible.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**OBJECTIVES AND ACHIEVEMENTS (continued)**

Our Registered Manager/ Infection Prevention Lead led on all aspects of infection risk management with support from the pandemic planning group, our HR department and Estates Team. As the benefit of wide scale vaccination began to enable restrictions to be lifted in wider society, we were able to bring more staff, outpatients and visitors were welcomed back into the building, however we continue to maintain strict controls with mask wearing, social distancing and regular lateral flow device testing for hospice based/ clinical staff. We were pleased to be able to welcome our inpatient team back into the rest of the hospice as we opened the inpatient unit front doors once more. We remain diligent with barrier nursing for new inpatient admissions and patients suspected with COVID and we have had no COVID outbreaks in the hospice in the year because of our continued caution.

Partnership working

We remain grateful to our own staff who showed flexibility working in other areas of the hospice at times of peak demand/ staffing difficulty. In particular, our physiotherapists continue to be seconded on a part time basis to the respiratory team at Oxleas NHS Foundation Trust, working in the team to support patients who could benefit from a palliative approach.

Our partnership approach continued throughout the year with regular participation in the Greenwich and Bexley 'System' wide group 'Resplendent'. Through this group, we have proactively participated in problem solving across organisations, as well as getting support when the Hospice needs it from partners. We accessed winter funding once more which enabled us to invest in our community services.

Our Greenwich and Bexley End of Life group convened at the beginning of the pandemic now continues as a system wide group, chaired by our Director of Care and Service Transformation. The plans for this group link with the SE London Integrated Care System Palliative and End of Life Care Network which is lead by our Chief Executive and supported by a Project Manager seconded from the hospice.

We maintained our partnership with St Christopher's, including a joint Occupational Therapist post; however the Senior Medical support to our inpatient unit and collaboration on our second on call rota ceased due to changes in their medical staffing. An independent Medical Consultant supports the team instead and are working with Supportive Care UK to help sustain our second on call rota. Our Hospice Education and Learning Partnership continued to deliver face to face and virtual learning to colleagues across the NHS and independent care home sector, embedding virtual meetings called Project ECHO with our local care homes. We were sorry to see the joint Chief Executives from St Christopher's moving on to new roles at the end of the year and hope that our collaboration will continue under the new leadership.

Staff Wellbeing

The cumulative impact of two extremely difficult years has been significant across our whole staff team. Changes to practice with less face to face interaction and less opportunity for informal support, long hours and the reality and fear of COVID impacting on staffing levels and the health of ourselves and our loved ones, means that we all bear the scars of the pandemic. The unrelenting nature of these challenges has made it difficult to maintain morale at times. Our very special hospice team have supported one another to get through this last year and together we have achieved so much under tremendous adversity, the board are incredibly grateful for the continued commitment and dedication shown by every member of staff.

The conflict in Ukraine and the cost of living crisis has also added additional worry and pressure for people across the whole of society, our staff are no different and so we will continue to be mindful of both these issues in our wellbeing support.

We maintained regular 'time to talk' sessions for colleagues to share worries and anxieties as well as good news. We also held a staff wellbeing month in partnership with St Christopher's Hospice in May. The month included pamper days, wellbeing checks as well as a programme of virtual health and wellbeing focused sessions. The funding received from SE London Integrated Care System for the month also funded refurbishment of our staff 'wobble room' and the ladies' changing rooms. We were pleased to be able to reintroduce Schwartz rounds, which we also opened up to colleagues from Oxleas NHS Foundation Trust and were evaluated well. Staff began to use our 'Speak Up' platform *Work In Confidence*, albeit in small numbers, and continued to access Clinical Supervision, our Employee Assistance Programme and the South East London Wellbeing portal.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**OBJECTIVES AND ACHIEVEMENTS (continued)**

We're planning a review of Clinical Supervision in 2022/23 which will inform our strategy to support clinical staff; we're also planning a hospice-wide staff survey at the beginning of 2022/23 and will use the findings of this to inform our People Strategy. We'll also continue to link with our staff wellbeing group formed as part of the RTP, to develop more wellbeing initiatives.

*'What was best for me was the wellbeing check, which thankfully I have followed up with my GP. If I didn't do this I don't think I would have spoken to my GP and now receiving treatment. So very well done'*

*'Thank you for putting these sessions on - it was really good to take some time to do mindfulness or to get a massage, as this is not something I would do regularly. It would be great to see initiatives like this spread across the year to encourage staff to remember to prioritise their own health and wellbeing. Thanks again, great idea!'*

**Feedback from staff following our joint hospice wellbeing month**

*'It's nice to be able to connect with colleagues that we wouldn't normally see. Having an insight into each other's working lives is interesting and often very impactful.'*

**Feedback from staff member following a Schwartz round**

Investment in Information Technology

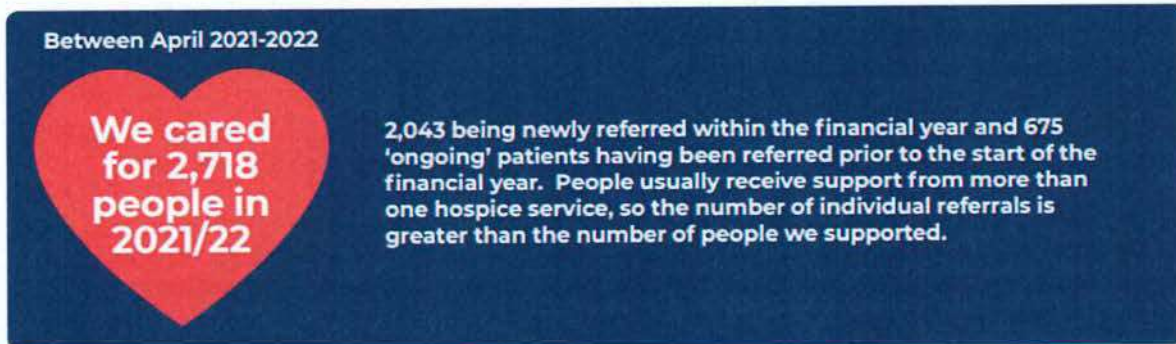
Following the significant investment in IT in the previous year, we continued our network upgrade and moved our server infrastructure into the 'cloud'. We also commenced a project to move our finance system onto a new platform, the project will complete in the autumn of 2022, closely followed by a planned upgrade to a new Customer Relationship Management System.

Financial Sustainability

Although budgeting and income from our usual sources of income were still impacted by the pandemic, we faced immense uncertainty and so we adapted and developed our plans accordingly. Detail on retail and fundraising income is provided later in this report. We were extremely grateful for the continuation of the Hospice grant from NHS England, which gave us an ability to plan and develop in response to increased need.

TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)  
OBJECTIVES AND ACHIEVEMENTS (continued)

CARE ACTIVITY



Hospice Based Services

**Inpatient Care**

In 2021/22 we provided care for 295 patients within Woodlands, our Inpatient Unit (257 in 2020/21). Despite this, occupancy remained at only **63%** (2020/21 63%) because our average length of stay reduced from 13 days to **10 days**, as many patients chose to remain at home surrounded by family, rather than attending the hospice which had restrictions on visitors for parts of the year. Patients are referred for inpatient care for pain and symptom control, terminal care, complex psychological support and respite care.

For some patients their symptoms become hard to manage and require specialist assessment, support and treatment. These patients will stay with us to enable the multi-disciplinary team to assess their condition and if necessary, modify their medication in order to relieve pain and other symptoms, before discharge back home. There was a slight increase in patients being discharged at the end of their stay with **28%** of patients who stayed in the Hospice in 2021/22 being discharged home (2020/21 26%). Some people whose illness has reached the final stages choose to come to the hospice for terminal care: these patients are offered compassionate nursing and medical care so they can achieve the best quality of life during their final days.

The direct cost of providing care in the Inpatient Unit in 2021/22 was £1,439,814 (2020/21 £1,445,115), costs remained flat, mainly due to a high vacancy rate in our inpatient team.

**Outpatient Services**

**Rehabilitation**

The Hospice rehabilitation team, comprising 2 Physiotherapists and an Occupational Therapist, work with our nurses and doctors to enhance the skills of the multi-disciplinary team and encourage a rehabilitative approach across all of our services. Our team continued to develop this service, embedding a rehabilitative approach throughout all areas of the Hospice and working with a small number of rehabilitation volunteers who support their work.

The team worked in the inpatient unit, our rehabilitation gym and virtually to support patients with a small amount of home visiting taking place, mainly by our Occupational Therapist. Our physiotherapists continued to be seconded to the Oxleas NHS Foundation Trust lung health team on a part-time basis and following positive evaluation we are now seeking funding to continue and expand this service. IN total the team supported 201 new patients in the year, compared to 116 in 2020/21.

Our Wellbeing Support Worker spent time with individual patients as well as mapping services provided by others in our community. She is now in the process of developing a number of opportunities for virtual and face-to-face wellbeing groups and these will increase when we appoint to a new Allied Health Professional/ Wellbeing Lead post, planned for 2022/23.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**OBJECTIVES AND ACHIEVEMENTS (continued)**

**Case Study:**

After a stay in hospital, Tracy chose to spend her final weeks in our inpatient unit. She was unsure what to expect as she was unaware of the hospice and the support and care available. Initially she had found it a little scary, but was quickly put at ease by the compassion shown to her by the team who looked after her and the bonds that quickly formed. She recalled that on her second day, Nurse Louise had painted her nails and later washed her hair and how happy and lifted that had made her feel.

Tracy was amazed by the level of the personalised and compassionate care that she received and the positive impact that had on her and her visiting family, and she wanted to shout about the great work that the hospice is doing in the community "Many years ago, when you'd say the word 'hospice', you'd think actually its end of life care, but it's so much more. They are doing so much more for me, it's not all about just one thing and they've got the facilities to help you live your life the way you need to live it, no matter how long you've got to live it."

**Social, Psychological and Spiritual Care**

The Hospice endeavours to meet all the needs of its patients whether they are physical, emotional or spiritual. Our social workers, bereavement support team, chaplain and volunteers help other members of the team to ensure that we meet the holistic needs of patients and their families and friends.

The need for social work support continued to increase in 2021/22, supporting 112 new patients this year (114 in 2020/21) with a variety of issues including complex family work, safeguarding issues, housing, benefits and asylum issues. We were successful in our plans to expand our Social Work service in the year, which helped to meet this challenging workload. We hope that in 2022/23 we will be able to expand our pre and post-bereavement support for children as we continue to see more parents of children as children.

During the course of this year, we continued to offer one to one counselling support virtually via telephone and video. We offer counselling to patients, relatives and carers, before and following bereavement for relatives. Where appropriate, we pass on referrals to other partners through our newly established Greenwich & Bexley Bereavement HelpPoint. In total in 2021/22 our counselling service supported 503 people, provided by paid and volunteer sessional counsellors as well as our Bereavement Coordinator.

**Practice Development**

We continued to work through HELP, the Hospice Education and Learning Partnership in collaboration with St Christopher's Hospice. By working together we reached more local health and care staff, enabling them to support more people to achieve their goal of dying in their own home or care home focusing on promoting holistic care, dignity, independence and choice at the end of life as well as developing symptom management and communication skills.

**Community Based Services**

The Hospice offers 24 hour care and support in the community across the London Boroughs of Greenwich and Bexley. In 2021/22 our specialist palliative care community team supported **1,489 new patients** (1,331 in 2020/21, a **12%** increase); **196** of these patients were supported at some point during their journey via our telephone support service (263 in 2020/21). Of the **1,546** people who died under the care of the hospice (all services), **69%** were able to die out of hospital (67% in 2020/21).

Whilst there was a slight reduction in patients with a cancer diagnosis (reduction of **58 or 4%**, following a significant increase in 2020/21), the most notable growth in activity was in people experiencing frailty/ old age and those with respiratory conditions. The team supported an additional **50** people experiencing frailty/ old age in 2021/22, an increase of **100%** and **49** people with a respiratory condition, an increase of **20%**.

The direct cost of Specialist Community Care in 2021/22 was £959,011 (2020/21 £949,956), challenges in recruitment and vacancies were responsible for costs remaining relatively flat. Our community team continued to use technology to assist them in their clinical practice, protecting shielded patients as well as freeing up valuable travelling time.

## **TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**

### **ACHIEVEMENTS AND PERFORMANCE (continued)**

The Hospice@Home service continues to deliver an important element of Hospice community activity, led by the Hospice and delivered in partnership with Marie Curie and Oxleas NHS Foundation Trust. The total cost of the care provided by the Greenwich Care Partnership in 2021/22 was £772,546 (2020/21 £724,457). Throughout 2020/21 our team took a leading role in managing the discharge process for those facing end of life in Queen Elizabeth Hospital and we were delighted to be able to support Bexley residents as well as those we normally support in Greenwich through our Hospice@Home team, the increased costs mainly relate to these additional services. In 2021/22 the Hospice@Home team supported a total of 250 new patients (275 in 2020/21).

#### **Case Study:**

The Community team are currently supporting a young man of 26 years old who lives with his mum and young sister. He was diagnosed with a rare brain tumour when he was 18 years old, just as he was ready to start university. Despite life changing immeasurably for him, he went onto graduate from university, set up a social enterprise to educate and support people affected by cancer and brain tumours, particularly those in Black and Minority Ethnic communities and he started a company which sells merchandise to support the social enterprise – Rare & Loved.

Since then, he has undergone a number of surgeries and treatments, each having some residual effect on him in some way. The team have been involved since Summer 2020 with practical issues such as benefits, securing a family break, advocacy, symptom management, emotional support and referring his younger sister to Young Carers. The disease has progressed further and there are no further treatment options, we continue to support the patient and family on this difficult journey. The patient has recently had a book published, detailing the challenges that he has encountered and how he has coped with them.

#### **Hospice Outreach in Hospital**

Our hospital support team based at Queen Elizabeth Hospital, Woolwich, plays an important role in educating and advising hospital professionals as well as supporting patients and their families in hospital. This year our small team made visits to **941** patients over 1075 referrals (918 patients and 1062 in 2020/21 **2%** increase). This demonstrates sustained growth following investment in the team the previous year. The direct cost of Hospice Care in the Hospital in 2021/22 was £393,569 (2020/21 £345,008).

#### **Case Study:**

It's always good to apply our hospice approach to care in the hospital setting; the hospice's hospital support team recently cared for a patient who was approaching the end of her life who had complex care needs most suitably catered for in a hospital environment. After struggling with this reality, the team had emotional and honest conversations with her about where she would preferred to end her days, and having discussed that a hospice stay was not going to be possible, they ascertained that what was most important to her. She wanted her husband to be able to stay with her and to spend time outside, seeing the birds, the greenery and the blue sky. The hospital team leader and senior doctor took time out of their rounds to take her in a wheelchair away from the busy hospital ward into the fresh air where she could see the trees and sky outside the hospital. The team leader later commented 'It was a most honourable and beautiful moment that we were able to share with the patient and her husband- the patient who could not verbally communicate shed tears and smiled - the husband was so grateful... it was one of the most beautiful moments of end of life care in my experience and one both myself and colleagues will remember forever.'

#### **OneBexley Consortium**

One Bexley is a consortium of eight charities who have agreed to work together for mutual benefit as well as to improve the lives of Bexley citizens. The consortium includes the Hospice, Bexley Voluntary Services Council, Age UK Bexley, Inspire Community Trust, MIND in Bexley, Carers' Support Bexley, SE London Crossroads Care and Bexley Mencap.

In April 2020, OneBexley was awarded a contract to deliver and transform the way that adult social care is delivered. The consortium is working with the council and partners to ensure that the most vulnerable people in Bexley get the right kind of care and support.



**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**ACHIEVEMENTS AND PERFORMANCE (continued)**

Through the contract, we are aiming for people to:

- a. Have care and support that enables them to live as they want to
- b. Be in control of planning their own care and support with additional help as required by those who know and care about them
- c. Have needs met effectively, efficiently and quickly
- d. Facilitate proactive and preventative care support rather than reactive and crisis care<sup>2</sup>.

Greenwich & Bexley Community Hospice is the prime contractor for the OneBexley Pathways Contract and our Chief Executive chairs the One Bexley Programme Board. Through this mechanism the Hospice is working to extend reach, build and utilise community assets and deliver value for money and quality benefits to the Hospice, the wider system and the Bexley population.

Following the success of the pilot phase, we were pleased to be able to secure a new three-year contract for OneBexley in March 2022.

**REACHING ALL OF OUR COMMUNITY**

**Care beyond Cancer**

The Hospice continues to strive to reach people with a diagnosis other than cancer, who nationally are often less likely to be referred and to access support from specialist palliative care services.

In previous years we have only reported on one primary diagnosis for each patient, however many of our patients have complex needs and more than one significant diagnosis. Referrals between April 2021 and March 2022 included 125 people referred to our counselling/social work service only; we have excluded these clients for the purposes of diagnosis reporting, as many of these will be carers or bereaved family members. This leaves 2,593 people with at least one recorded diagnosis.

The proportion of patients with a cancer diagnosis was 52%.

**Serving People of All Ages**

The Hospice provides care to anyone with a life limiting illness living in the London Boroughs of Greenwich or Bexley who is over the age of 18<sup>3</sup>. The majority of people we care for are over 65. In 2021/22, **65%** of the people we cared for were over 75 (2020/21 62%) and **36%** were over 85 (2020/21 33%).

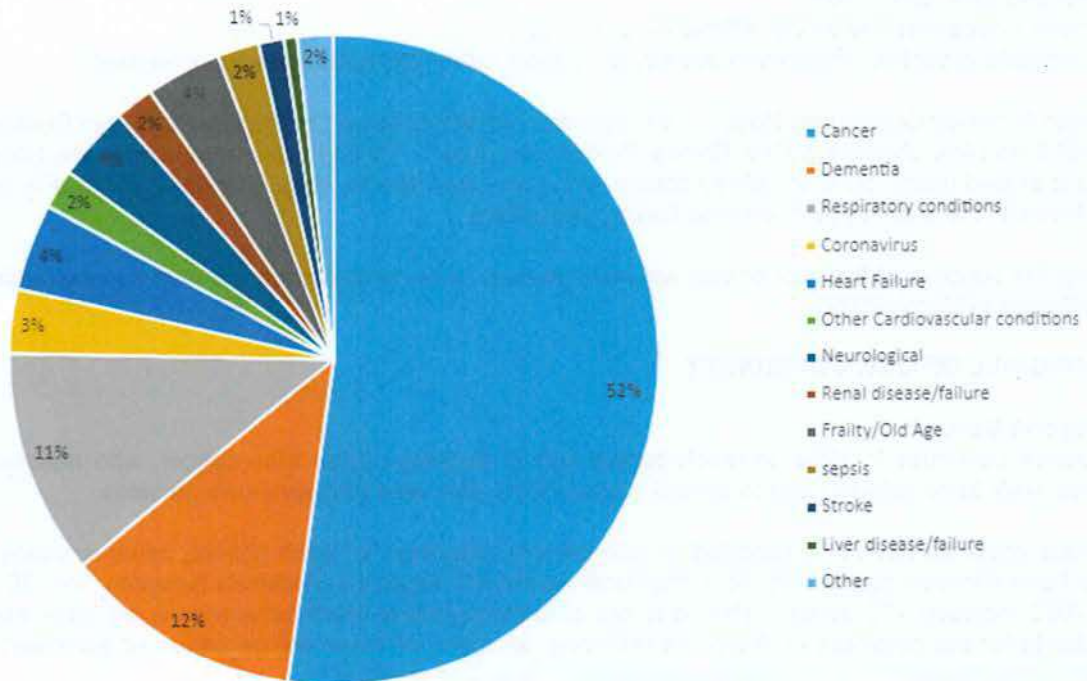
As predicted, we are seeing the need for care for the "older old" increasing and we expect this trend to continue over the next 10-20 years. This is already having an impact on the type of care we provide as people in the "85 years and over" category are more likely to have elderly carers or live alone, and may also be more likely to live in a setting such as a care home or supported housing scheme. In addition, older people are more likely to have multiple conditions, including dementia, and therefore live with increasing levels of frailty and with more complex needs. We continued to invest in our work in care homes in 2021/22 and will continue to develop this support as part of the new strategy.

<sup>2</sup> Taken from LBB pathways contract service specification (2020)

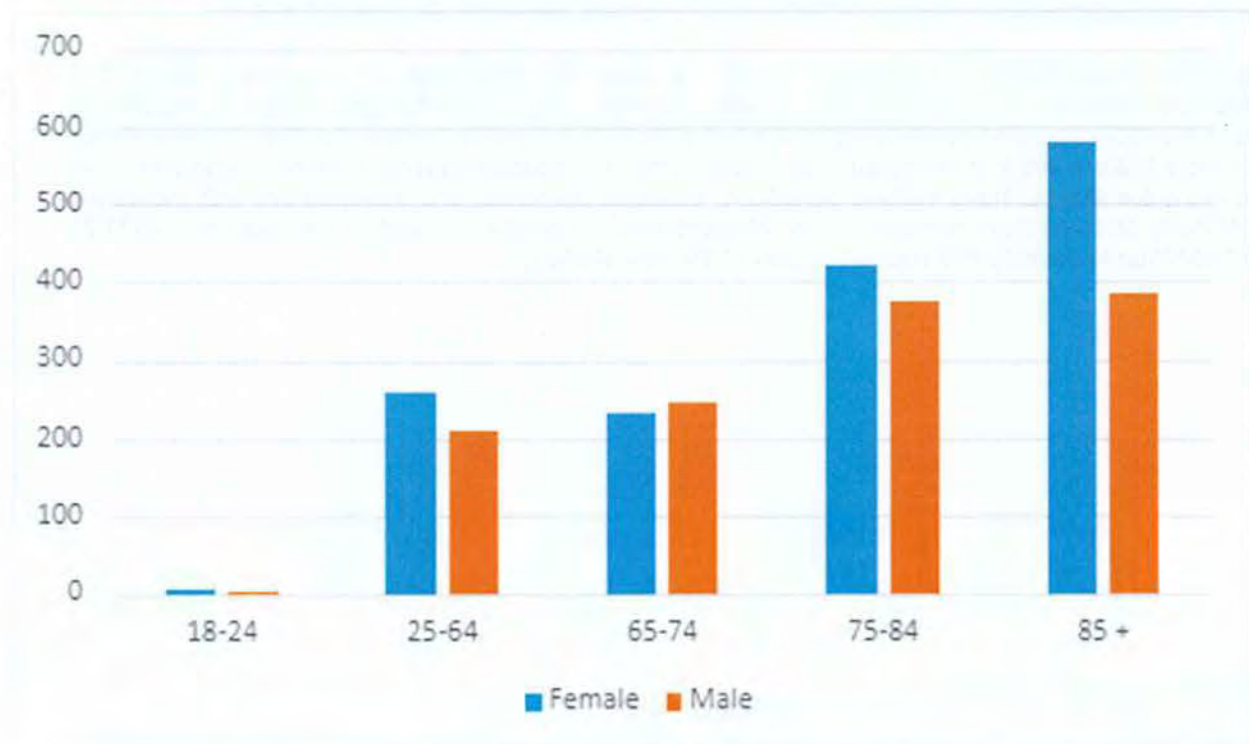
<sup>3</sup> Additionally, children and young people who are family members or close friends of those we care for, receive support from staff, particularly psychological support and social work services.

TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)  
ACHIEVEMENTS AND PERFORMANCE (continued)

Patient Diagnosis



Patient Age/ Gender



TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)  
ACHIEVEMENTS AND PERFORMANCE (continued)

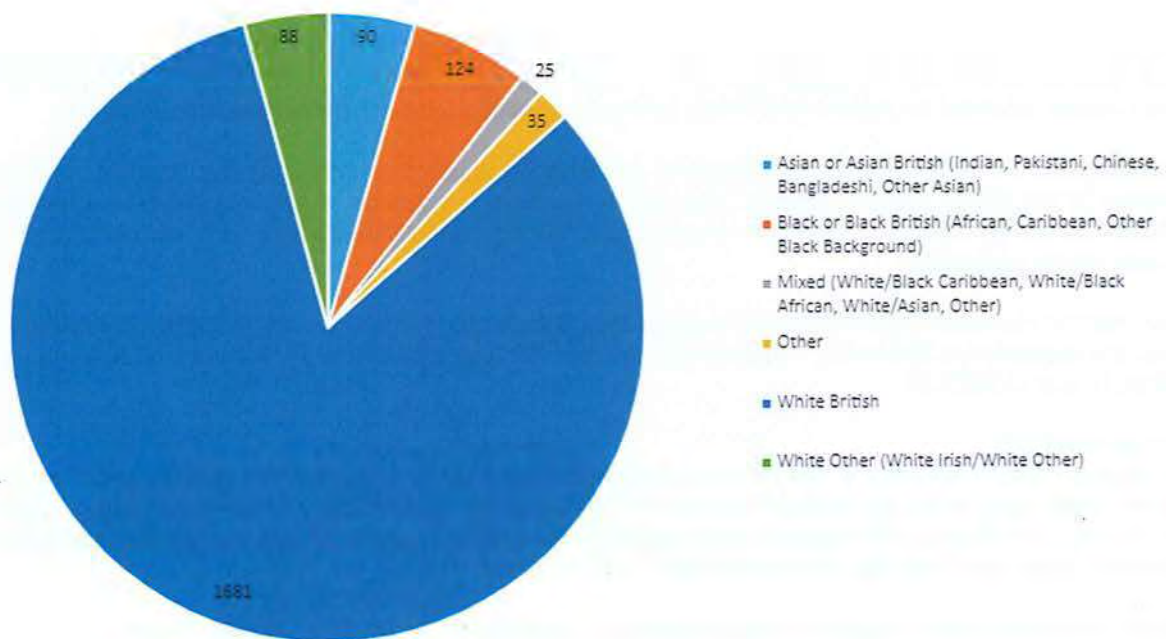
**Cultural Diversity**

The Hospice continues to focus on ensuring that all groups in our community are aware of our services and to break down the barriers to accessing our care and support. As part of this strategy, we spend time with community leaders and groups listening to them about their needs and talking about the Hospice to try to dispel any myths that may discourage people from accessing our services when they need them. At the end of 2019/20 we received a grant from the National Lottery to help us accelerate this work, however the pandemic forced us to scale back our plans to focus on maintaining business continuity.

Although we have made some progress with our ethnicity monitoring (838 or 29% of patients in 2020/21 did not have their ethnicity recorded), disappointingly in 2021/22 this issue remained for 675 people or 25%. For the remaining patients for whom ethnicity was recorded, there was a larger number of people in the non-White British group (27% year on year increase) whereas the White British group stayed the same. We saw the largest growth in the 'Black or Black British' and 'Other' categories.

We continue have a clear focus on data quality in all areas, but are particularly focussing on this area as part of our Equality, Diversity and Inclusion Work which will be monitored through the Quality and Safety Committee.

**Cultural Heritage**



TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)  
ACHIEVEMENTS AND PERFORMANCE (continued)

**INCIDENT MANAGEMENT/ HEALTH & SAFETY**

Reporting of clinical incidents is embedded into the routine business of the Hospice Quality & Safety Committee through the clinical dashboard.

Our medicines incident rate was **56** for the whole year (74 2020/21) a further reduction on the previous year and a welcome downward trend. We were able to use Hospice UK's national annual benchmarking audit to compare ourselves against similar hospices; incidents are graded level 0-6 with 0 being least severe, our errors ranged from level 0 to level 2, also an improvement on the previous year. Our rate of "level 0" (error prevented) drug errors at Greenwich & Bexley Community Hospice is higher than the average for Hospices of a similar size (45% at GBCH, 29% National average per annum), however the overall number of incidents reported is higher, which we strongly believe is due to the low threshold we have for reporting concerns, no matter how minor. We had no repeated incidents of concern and nursing staff undertake a regular medication assessment to assure the organisation of their competency.

Through the National audit programme, we are also able to benchmark our performance in terms of the incidence of falls. We reported a lower than average figure for falls of **8.2** per 1,000 overnight bed days (Audit average 9.9), we also reduced our overall rate by 50% from 16.7 in 2020/21. 96% of falls were in the no harm/ low harm category, sadly the remaining 1 fall was recorded as severe harm, this related to a gentleman who had sustained a suspected hip fracture whilst trying to mobilise independently. He and his family decided that he did not wish to attend hospital for treatment, but to remain at the hospice for comfort care alone.

We received 17 care and 16 non-care complaints in 2021/22 (2020/21, 15 care, 15 non-care complaints), all complaints were fully investigated, whether they are informal complaints such as direct feedback or comments received on patient and family feedback questionnaires or formal written complaints.

An investigation is carried out for all complaints and where possible the complainant is invited to meet with members of the senior team to discuss their concerns and the outcome of any investigation. Complaints are seen as an opportunity to learn and improve and findings are shared widely with our own team, and partners where applicable.

We review the Hospice's operational risk register as a standing item at the Quality & Safety Committee and issues are escalated to the Board if appropriate. In 2021/22 the register mainly featured matters relating to staffing, IT and COVID-19.

**Serious Incidents**

The Hospice Board receives a report from the Chief Executive at every Board meeting which confirms whether there have been any serious incidents that should be notified to the Charity Commission and/or Care Quality Commission. We reported one incident to the Charity Commission as a precautionary measure in 2020/21; they confirmed that no further action was required.

Further information about incidents and complaints is available in our 2021/22 Quality Account.

**PATIENT AND FAMILY FEEDBACK**

The Charity receives hundreds of thank you cards and letters from patients and bereaved families each year; in addition, there are a number of comments and suggestion boxes placed around the Hospice building and we continue to gather patient and family feedback in a more structured way through questionnaires. We continue to use our online feedback portal **iWantGreatCare** to collect patient feedback, with targeted mailshots to certain service users.

Our **Patient Forum** unfortunately remained on hold throughout 2021/22 due to staff capacity and social distancing; however, we will be pleased to see this restart early in 2022/23.

When received, feedback is reviewed at the Hospice's regular clinical leads meeting and Quality & Safety Committee. This feeds into a quality improvement plan and helps shape our services in the future.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**ACHIEVEMENTS AND PERFORMANCE (continued)**

*'In the most dire circumstances we found the support of the entire team exceptional, warm caring and positive. We couldn't have asked for more. We were rewarded with 10 months at home together despite the prognosis of only days to live after the initial admission - thank you'*

**Feedback on community service from bereaved relative**

*'I feel I must thank you and our team for admitting yesterday my dear brother in law into your inpatient unit, which has saved the day after a struggle at home, complicated by my sisters advanced dementia and her having to be admitted to a nursing home. My nieces report such amazing care already received from the clinical team.....I must admit I did burst into tears just now reading my niece's text from her dad's bedside describing your excellent care for her dad'*

**Thank you letter, Inpatient Unit**

*'(She) only stayed 4 days in your hospice. Having herself trained and served as a nurse in the NHS for 41 years. When (she) said to every family member her sincere satisfaction about the wonderful care and attention she received from all your staff, that was a first'*

**Thank you letter, Inpatient Unit**

*'I don't even know where to begin in saying how massively thankful we are for the care and love you gave. You were so incredibly kind to both him and our family and you made a sad and hard situation much easier for all of us and most importantly you made (him) comfortable and put a smile on his face every time you walked through the door.'*

**Feedback on Hospice@Home service from bereaved relative**

*'I would like to thank you for all the help my husband and I have received from the hospice at this very difficult time. Thanks to (community nurse) for helping him come to terms with his cancer and accepting his condition. To (the inpatient drs and nurses) who looked after him and lastly (bereavement coordinator) for helping me cope throughout'*

**Feedback from bereaved relative on Inpatient Unit, Community Service and Counselling Support**

**SUPPORTING THE HOSPICE TO PROVIDE CARE**

**Volunteers**

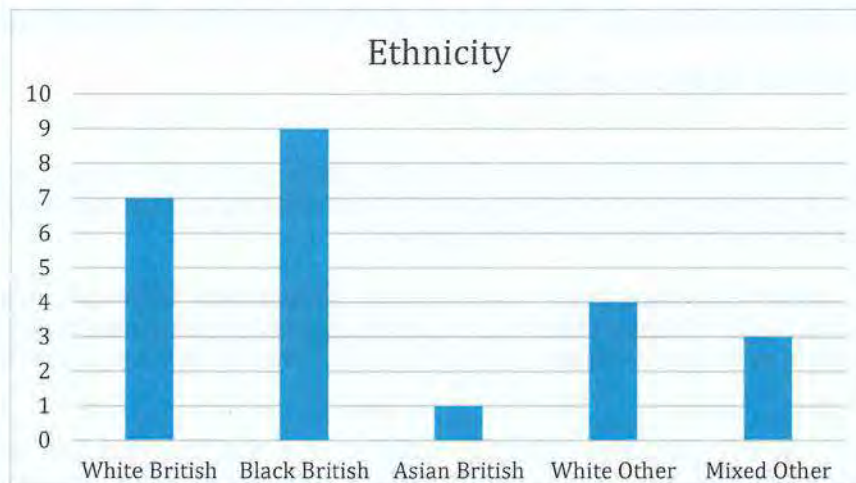
The Hospice continues to benefit from the support of a large number and diverse range of volunteers. Volunteers not only bring their time and expertise but also their personalities and life experiences, helping to create the special atmosphere that exists within the Charity.

Volunteers work in all areas of the Hospice; these include trustees, receptionists, gardeners, clothes sorters in retail distribution, IT volunteers, compassionate neighbours and volunteer fundraisers to mention a few. In 2021/22 528 people were active as volunteers, collectively giving over 83,000 hours of their time and skills.

In total, this equates to over 50 full time workers for a year, or a financial donation equivalent to approximately £917,500. Compared to 2020/21 this represents an increase in volunteer hours as we reopened our shops and safely opened our building back up to volunteers. We were excited to welcome volunteers back across all of our services, as they are a key part of the fabric of the organisation, representative of our whole community and embedding the ethos and values of charity in their work. We are indebted to all of our volunteers, new and established, who step up to take on new roles and established positions to support our staff team and our patients.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**ACHIEVEMENTS AND PERFORMANCE (continued)**

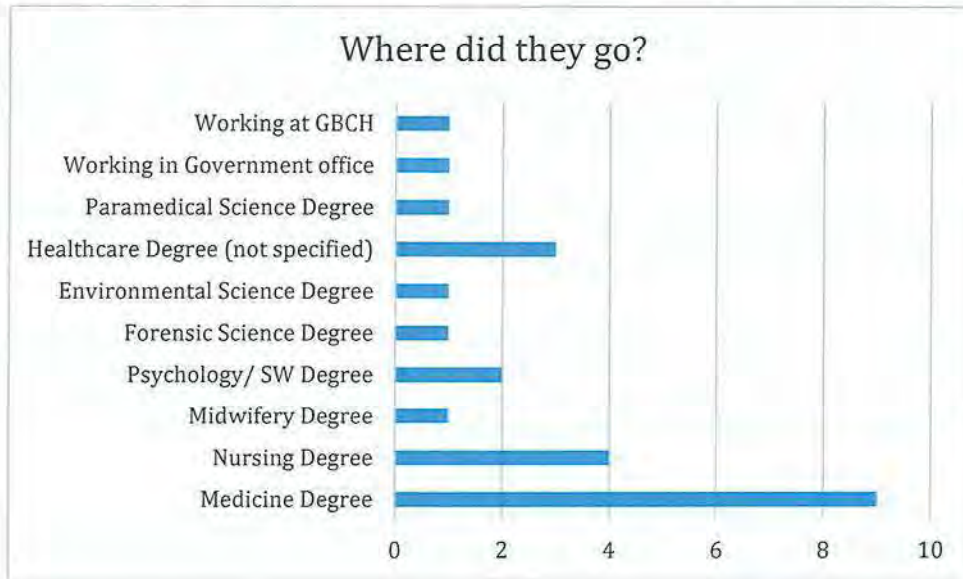
The skills and expertise that volunteers add to every aspect of our work is one of the aspects that makes Hospice care so special. We are proud and greatly encouraged to have such a wide range of volunteers from teenagers to people in their late 80s offering their time to the Hospice. We have identified volunteering as a priority in our new strategy which will focus on recruitment of new volunteers, development of new roles and training and support for new and existing volunteers as well as those staff who manage volunteers. We also hope that we can encourage people to volunteer for the hospice as a way to widen participation in the community, in health and care generally and to improve their wellbeing and life and career chances in future. Our Young Ward Volunteers Programme is one such example of this, over the first two cohorts we have had 25 volunteers from a range of backgrounds, many of whom who have gone on to use their learning to support their studies/ work in healthcare.



**Case Study:**

Nineteen year old student Sophie's ambition was to become a nurse and she was studying Health and Social Work Level 2 when she applied to join our Young Ward Volunteer Programme. In September 2021, she began her six-month volunteering placement, which consists of extensive training via weekly four-hour shifts on our Inpatient Unit supporting our clinical team, whilst simultaneously working towards a non-accredited Care Certificate. Sophie gained valuable healthcare experience through the programme and enjoyed it so much so that she has become a Healthcare Assistant and a valued member of the hospice staff team.

TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)  
ACHIEVEMENTS AND PERFORMANCE (continued)



### Income Generation

#### Fundraising and Lottery

Throughout 2021/22 we continued to face many of the same challenges as the year before however, we are now much more comfortable with applying a flexible approach and are more adept at learning from our peers and proactively listening to our supporters. The team has also become expert at responding to changing circumstances and taking a creative approach to raising much needed funds. This year, across all areas of fundraising, our priority has remained a focus on excellent engagement with local people to build solid foundations for future years.

Despite another challenging and uncertain year for our organisation and recognising that local people also face significant challenges, we continued to be overwhelmed by the support from our community. We couldn't do what we do without those who take part, fundraise, volunteer and donate. Your unwavering support through such difficult times, feels so incredibly special. Thank you.

Fundraising income fell short of budget in 21/22 by £108,000 however it is worth noting that total income of £1,173,000 demonstrates an 8% growth on 19/20 (pre-pandemic) income generated. With excellent budgetary control and due to a number of vacancies throughout the year, expenditure fell short of budget by £76,000, making for a net contribution £32,000 short of budget.

Events Fundraising struggled with continued uncertainty around COVID-19 infections and cautious supporter behaviour. The team were creative and determined in their approach to try new things; we utilised a new online platform and ran our first virtual challenge event with more than 100 people taking part, 80% of whom fundraised (compared to a general average of 30% participants raising sponsorship). Across the events calendar, the team focussed on tailored communications for supporters, to see smaller groups fundraising more on average.

We were delighted to see the return of our first in-person event for two years, hosting the Mini Marathon in Royal Greenwich Park in September. Despite much lower levels of registration than in previous years, thoughtful communications meant that 45% of new supporters and 35% of returning supporters, raised sponsorship to support the work of the Hospice. It was a wonderful morale boost for the team and many of our dedicated volunteers to return to in-person events and there was an uplifting 'community spirit' atmosphere bringing people back together for such a fun event. A special mention must go to our fantastic event sponsors, JLL and groups that volunteered en-masse to make the event possible - Lewisham & Greenwich Police Cadets, the 97 (Woolwich) Detachment Army Cadets and Greenwich GoodGym.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**ACHIEVEMENTS AND PERFORMANCE (continued)**

We decided to go ahead with other face-to-face events as a way to prioritise continuing engagement with our community. We know that many of our annual events are key dates in the diary and have the potential to help bring our community back together (with appropriate measures in place to keep people safe). Our message in continuing to deliver events was very much, 'we're still here for you' and 'we can't wait for you to join us at an event whenever the time is right for you.'

We opened a new Christmas Grotto for 2021 in Danson House, Bexley. Our first year was a success and we hope we will be able to develop and grow this fundraiser over the next few years, engaging with local families to generate significant income for Hospice care.

In 2021 we live streamed our Annual Carol Concert from Greenwich, bringing this much-loved festive fundraiser to even more people, in the comfort of their own home. This very special event was also an opportunity for us to invite and thank some of our most dedicated supporters. We would like to extend our thanks to the Old Royal Naval College for generously discounting venue fees to maximise the income we raised.

In Community Fundraising, we supported the return of a much-loved community-own fundraising event, our in-person 'Open Gardens Festival' with more than 30 gardens featured; we raised more than £20,000. We would like to thank Penny Matheson and her family, as well as all the garden hosts for their support in running and hosting the festival.

Local people demonstrated their unwavering support once again through individual giving; with a new Individual Giving Manager now in place, we are refining processes and our offer to grow this income stream and our weekly lottery further over the coming years.

We continued to run a door-to-door and venue canvassing campaign in partnership with LFS (Lottery Fundraising Services) and saw the Hospice's weekly lottery membership grow by 1,904 players. The team returned to face-to-face activity on 12th April 2021 and the signup numbers for April and May totalled 798 compared to a budget of 140. These fundraisers are also raising awareness of the Hospice generally and signposting local people to find out more, or support in others ways if playing our lottery is not right for them. The Lottery contributed £163,610 towards Hospice care and lottery players also made donations back to the Hospice totalling £17,000 in 2021/22.

Striving for the highest standards

We commissioned a database consultant to report on the quality of our data and processes, as well as an external data protection audit. Both exercises highlighted areas for improvement and resulted in an action plan to ensure the highest standards of practise, these have all now been made. Along with wider conversations around our vision for Fundraising operations, this piece of work resulted in the Senior Leadership Team championing a project to replace our Fundraising database. This is incredibly exciting and will transform the way that we work and enable a culture of data-led decision making which is vital for great relationship management, supporter care and income growth.

The impact of vacancies

The level of vacancies in our team has affected our ability to deliver against planned activity and generate income; at no point in the year has the team been at full strength and so there has been an added burden for the whole team to cover the workload of vacant posts. The recruitment landscape has changed significantly in the last two years and remains incredibly challenging across all areas of the business; adapting our recruitment processes has been essential to ensure we engage the best fundraising candidates.

It is vital to have the right people in the right roles, so despite the challenging landscape, we have been sure to wait for the right people. That did mean that for more than 7 months of the year we were without an Individual Giving Manager and a Trusts Manager. For 6 months of the year we were without support in our fundamental donation processing function, which a number of the team covered by picking up additional responsibilities. We were also unable to progress our major donor/philanthropy fundraising plans, as we struggled to recruit to this new post for the whole year.



**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**ACHIEVEMENTS AND PERFORMANCE (continued)**

Our approach to fundraising

At Greenwich & Bexley Community Hospice, our supporters and the local community are incredibly important to us and we always endeavour to deliver the highest possible standards when fundraising. The trustees are aware of best practice and trustee duties as contained in the Charity Commission publication CC20 "Charity Fundraising: a Guide to Trustee Duties".

In 2021/22 we continued to make sure all our fundraising activities were compliant with regulatory standards as well as including additional levels of risk management and provisions in line with government guidance. We continued to prioritise excellent supporter experience across all areas of fundraising and continued to review our data protection compliance and best practise.

The Hospice is registered with the Fundraising Regulator and adheres to the code of Fundraising Practice; we received no complaints via the Regulator in 2021/22. Greenwich & Bexley Community Hospice Lottery is registered with and regulated by the Gambling Commission.

**Trading**

The government restrictions relating to the COVID-19 pandemic were lifted in the middle of April allowing our stores to operate throughout the rest of the year without any closures. We originally anticipated three months of lockdown and budgeted accordingly hence our total gross income from Retail significantly outperformed our budget and raised £2,111,967 (2020/21: £704,583). Our stores traded for 50 weeks and delivered +15% on 2019 sales. The total net contribution from our stores was £305,500 (2020/21: loss of £576,308). The pre-pandemic contribution (2019/20) was £243,766.

We appointed a new Head of Retail at the beginning of the year and this has enabled us to focus on improving our internal processes and sharing business knowledge across the whole trading team. Similar to fundraising, our biggest challenge remains long-term vacancies in the team and challenges around recruitment of skilled staff. Despite excellent results for the year compared to previous years, the level of lost hours has had a direct impact on our profitability as well as staff wellbeing and morale.

Trading Board and strategy

The pandemic has accelerated changes within the retail sector across the UK and while there are some clear challenges, we also recognise that there is great potential for modernisation in our Trading operation (retail stores, e-commerce and other commercial activities). We need to be able to capitalise on these opportunities, which means having the right expertise at a strategic and operational level. As part of the governance review, we identified that the establishment of a Trading Board to support the development of our retail and commercial activities and capitalise on all potential opportunities in this uncertain climate.

The purpose of the Trading Board is to be forward looking and strategic and we have already seen that it:

- brings retail related expertise and experience to assist our strategic planning
- supports challenge, innovation and development in Trading as well as helping us to while manage risks and operate efficiently
- helps to ensure that all legal and regulatory compliance requirements are met

The Trading Board had its first meeting in August 2021 and in December we welcomed Barry Dow as our first Non Executive Director of the GBCH Trading Ltd. We are aiming to recruit other new Directors with relevant expertise in 2022/23.

The Trading Board had supported the Director of Income Generation with the development of our new Trading Strategy, which will be finalised in 2022/23. The Trading Strategy builds on our overarching strategy and has four key priorities: People, Stores, Ecommerce and Digital and Innovation and Partnerships.

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**ACHIEVEMENTS AND PERFORMANCE (continued)**

Retail Gift Aid

It should be noted that for accounting purposes through the Gift Aid scheme for donated goods, a proportion of retail income, which is in effect a donation, is treated as income for the charity and not for the trading subsidiary. The trading subsidiary only accounts for the commission element of the sale value on donated goods. This is reflected in the results of the trading subsidiary, GBCH Trading Ltd which is included in note 10 of these accounts.

Acknowledgment

We are incredibly grateful to all our customers, donors and volunteers who continue to support our stores and ultimately, our patients. Thank you.

**FINANCIAL REVIEW - Strategic Report**

The Consolidated Statement of Financial Activities for the year ended 31 March 2022 is set out on page 36. There is a surplus reported for the year of £917,191 (2020/21 £818,730).

On the General Fund there was a surplus of £996,109 for the year before transfers (2020/21 £649,140). Legacies reported for the year were £969,279 (2020/21 £682,237). £846,348 was received in restricted funds throughout the year.

We had budgeted for a deficit in 2021/22 however we were delighted that our final declared results are significantly better than we had anticipated. This was largely due to the shops being open for almost 12 months of the year and additional support from NHS England. In total for the year ended 31<sup>st</sup> March 2022, expenditure rose by 8%.

The surplus reported for this year has provided a boost to our reserves and we have agreed a plan to invest some of these to secure additional income sources in future years and to expand our services to reach the increased need for our services that we continue to see (see page 26 for further information on our reserves policy).

We agreed a modest increase in our statutory income from SE London CCG (now SE London ICS) at the beginning of the year. We were also successful in securing additional income as part of the *winter pressures* and *home first* initiatives. The overall impact of these changes on our statutory income was an increase of 9% (to £4,481,335). NHS income was 42% of income of the Charity in 2021/22, another 7% (£706,423) was provided through support from the NHS England via Hospice UK leaving the remaining 51% which we must raise through the generous support of individuals, businesses, charitable trusts and foundations, and community groups and organisations<sup>4</sup>.

Several elements of service that the Hospice provides have been designated as a *Commissioner Requested Service* (CRS) by SE London Clinical Commissioning Group. This necessitates that the Hospice maintains a licence with NHS Improvement<sup>5</sup>, which brings an additional level of scrutiny and regulation for the Charity. The Hospice is one of only a few Hospices nationally who have been designated as CRS and we continue to work closely with NHS Improvement to ensure that this designation works to benefit our beneficiaries.

Throughout 2021/22 we continued to build on our close system-wide partnerships forged during the pandemic. Our role in the Greenwich and Bexley silver command group 'Resplendent' was pivotal in ensuring that people facing end of life were cared for in the appropriate place and that staff in all settings were supported with additional training to care for people at end of life.

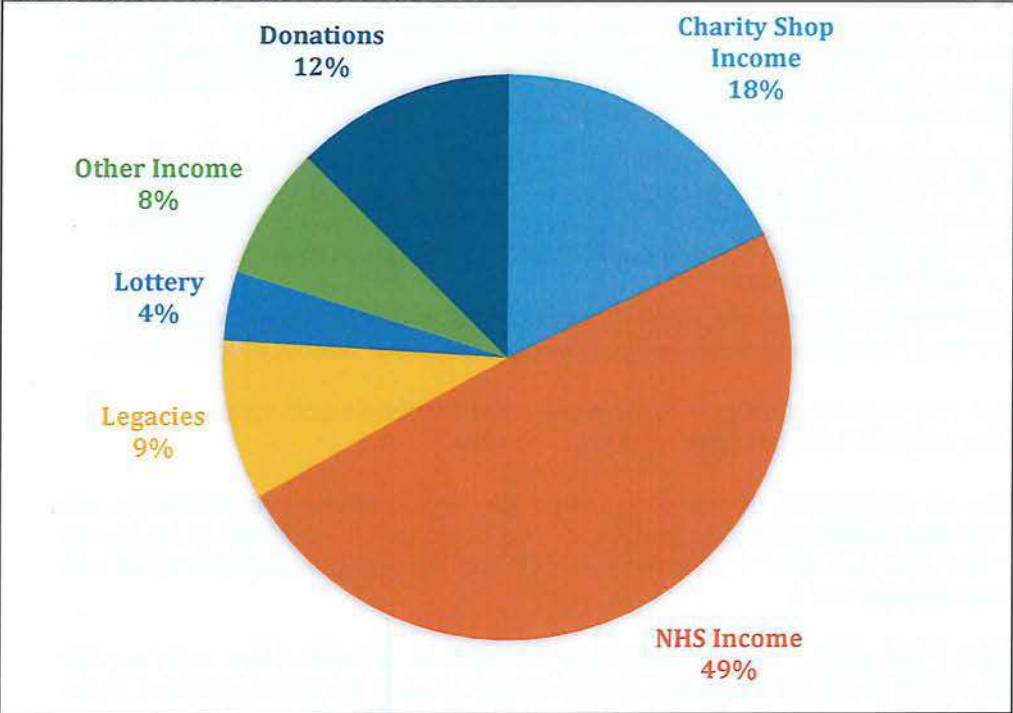
Our involvement helped solve problems including vaccination for staff and has led to additional resources being made available through the COVID response funding and the 'Home First' Programme. The local landscape continues to change and we are keen to continue working in partnership to lead the improvements needed for people facing the end of life in Greenwich & Bexley.

<sup>4</sup> In any other year the statutory contribution is approximately 40% of income.

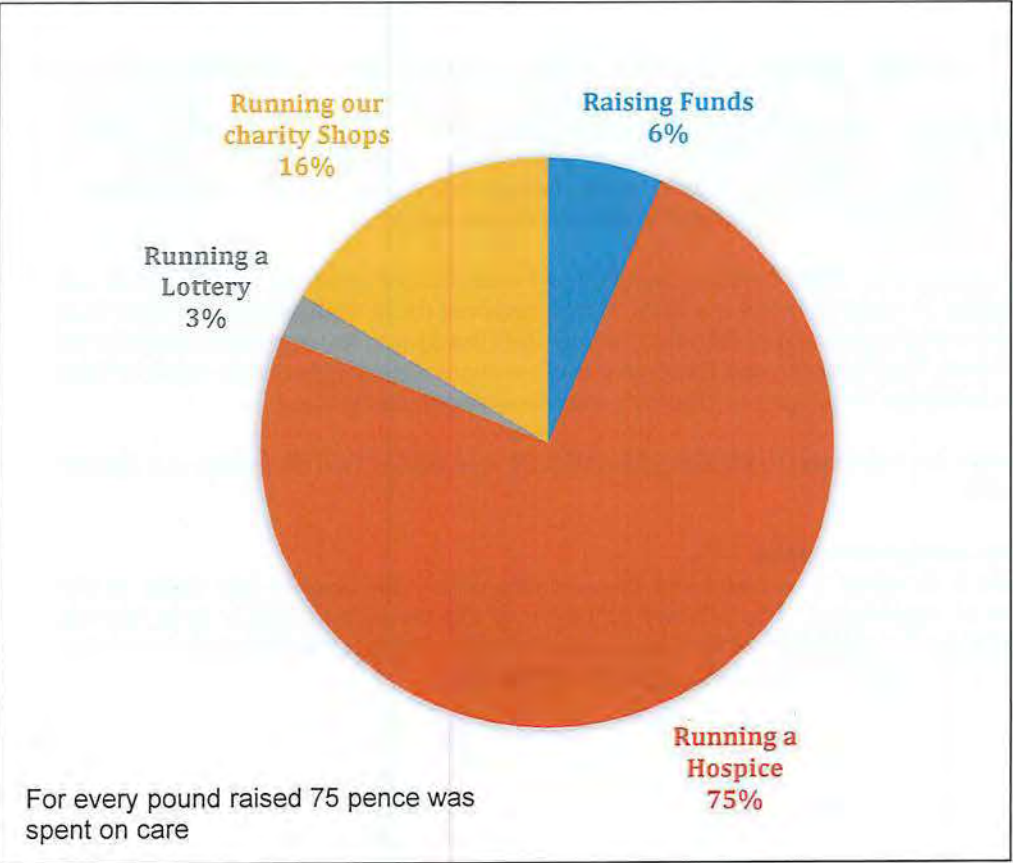
<sup>5</sup> **NHS Improvement** is an executive non-departmental public body of the Department of Health. It is the sector regulator for health services in England.

TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)  
FINANCIAL REVIEW - Strategic Report (continued)

Where our money came from in 2021/22



Where our money was spent in 2021/22



**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**FINANCIAL REVIEW – Strategic Report (continued)**

**Reserves Policy**

The Hospice holds reserves to create financial security and allow for investment in the future operational development of the Hospice. The Trustees have recently reviewed our reserves policy and agreed it is their intention to retain a level of free reserves (unrestricted funds not committed or invested in fixed assets) of £4,883,229. This figure takes account of the following considerations:

- To fund shortfalls in income (whether statutory, retail, lottery, donations, legacies or other fundraising activities) when it does not reach expected levels. The charity is dependent on fundraised income as well as statutory funding. The fundraised income is subject to fluctuation as economic conditions change and statutory funding could be affected by government policy and the financial position of NHS commissioners;
- To fund unexpected expenditure, for example, when projects overrun or unplanned events occur;
- To fund unexpected building maintenance costs and to provide a degree of flexibility for innovation; and
- To fund working capital. The majority of hospice expenditure is fixed whereas both fundraised and statutory income fluctuates in terms of cash inflow over the year.

The Hospice's free reserves are represented in the accounts by the 'General Fund', the 'Recovery and Transformation Fund' and the new 'Building Development Fund'. The Board took the decision to wind down the 'Legacy Equalisation Fund' this year, and to invest this into the two remaining designated funds with the balance transferred to the General Fund.

Recovery and Transformation Fund (RTF): The Trustees have invested an amount of free reserves into areas which will enable the charity to recover from the pandemic and support the implementation of our new strategy to help deliver a sustainable future for the hospice. In 2021/22 £42,208 was spent from the Recovery and Transformation Fund, which has now been 'topped up' to the value of £600,000 with further designation of free reserves into this fund.

Building Development Fund

In addition to the RTF, the trustees agreed to invest a further £300,000 into a designated Building Development Fund in 2021/22. This fund will be used to support the development of the building post pandemic, including investment in our inpatient unit, creating more single bedrooms to enable easier infection control and improvement of our staff changing and rest facilities to improve staff wellbeing. We are grateful to CRASH Charity for facilitating a review of our Bostall Hill site in 2021/22, this created a feasibility study of the options available to improve our building post pandemic.

Fixed Asset Fund: The Trustees have established a designated Fixed Assets Reserve, equivalent to the net book value of Fixed Assets, in order to make the level of free reserves more transparent. As described in Note 16, the net book value of the land and buildings on which the Charity's main operations are located are included in a restricted fund. The Fixed Assets Reserve therefore represents the net book value of fixed assets other than land and buildings on which the Charity's main operations are located.

At 31 March 2022, Free Reserves increased to £5,596,202 (2020/21 - £4,469,371). This is over our agreed reserves target of £4,883,229.

**Investment powers, policy and performance**

The Investment Committee is in place to monitor the investments under the powers laid down in the Memorandum and Articles of Association. The primary objective of the investment policy is to provide financial security and stability for the operation of the Greenwich & Bexley Community Hospice. Our funds placed with Rathbones are now valued at £891,566 (2020/21 - £800,312).

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**PLANS FOR THE FUTURE – Strategic Report**

In March 2022 the Trustees approved a new five year strategy for the hospice. It outlines our priorities which continue to centre around our patients, their families and friends and the needs that they encounter through their journey from diagnosis through to death and into bereavement.

Our skilled, compassionate and dedicated team of staff and volunteers, who always strive for the best in all that they do, will be responsible for the delivery of this strategy. Together we will work with local people and our partners to understand and meet the evolving needs of our communities, working together to achieve the very best outcomes for patients.

The strategy takes account of the accelerated change and adaptation we have seen through the challenges of 2020 and 2021 and seeks to build on what is positive about this change and leave behind that which is negative.

The local Greenwich and Bexley plan includes end of life care and bereavement as a vital element of service in the post-COVID world, additional capacity is being maintained across the system in 2022/23 with a focus on 'home first' and 'virtual wards'. The Hospice remains ideally placed to take the lead in keeping end of life care at the top of the agenda.

**Our Strategic Priorities**

Our priorities aim to utilise our resources as efficiently and effectively as possible so that care and support is available where and when needed, delivered by the most appropriate person/ service. They also aim to ensure that we remain sustainable, so that we can continue to provide care and support long into the future.

Our purpose will sometimes require us to take risks, to be courageous in advocating for those whom are most in need and sometimes to prioritise resources. We will need to continue to be innovative in our approach and focussed on our priorities. This will give us the direction to ensure that we achieve our vision of the best quality of life possible for people facing death in our community. Our priorities will ensure that we continue to look forward to be the very best we can be.

1. Listening to all voices in our community, understanding their stories and challenging inequalities so that we develop support which is responsive, compassionate and flexible to meet differing and individual needs
2. Growing and empowering our own staff, working to our strengths alongside system partners and developing others to give the best support they can to dying people and their families
3. Making the most of technology to assist us in delivering outstanding care, increasing reach, demonstrating impact and maximising income

Now that the five-year direction has been approved, we are developing detailed plans which we will begin operationalising in 2022/23; these are in the following areas:

- Service Transformation Strategy
- People Plan (incorporating equity, diversity and inclusion and wellbeing)
- Community Development Strategy (incorporating volunteering)
- Environmental Strategy
- Estates Plan
- Digital Strategy
- Fundraising Strategy
- Trading Strategy
- Communications and Marketing Strategy

Further Information regarding our five-year strategy can be found at: [communityhospice.org.uk](http://communityhospice.org.uk).

*'I've seen a change in perspective for the hospice, looking beyond service specs and challenging the system on what's best for the patient.... Flexibility on how staff and resources are used has really been a breath of fresh air and pushed us all as organisations.'*

**Stakeholder Interview: Shaping the future of Greenwich & Bexley Community Hospice – Insights report – Nesta 2021**

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**STRUCTURE, GOVERNANCE AND MANAGEMENT**

*'The Hospice was a key partner in our local COVID response and remains alongside us as we continue to support our care homes and develop our local Home First schemes. Your Quality Account shows that you are a learning organisation continually holding yourselves to account and challenging yourselves to find new ways to support our residents and their families at the most sensitive time. Through your engagement in the system locally you challenge and support us all to do the same.'*

**Partner, NHS Bexley**

Greenwich & Bexley Community Hospice Limited is a company limited by guarantee and not having a share capital is governed by its Memorandum and Articles of Association dated 15<sup>th</sup> September 1992 and amended to meet the developing needs of the Charity on 15<sup>th</sup> January 1993, 8<sup>th</sup> January 2001, 10<sup>th</sup> July 2006 and 8<sup>th</sup> June 2012. The Members' liability is limited. Every Member of the Company undertakes to contribute up to £1 to the assets of the company in the event of it being wound up. It is a registered Charity with the Charity Commission (No 1017406). The number of Members of the Company is limited to 50. Present membership is 18. Every person desirous of becoming a Member must sign and deliver to the Company an application for membership. The sole right to membership is vested in the committee (Board of Management – see below) who may, without showing cause, refuse to admit any application to membership.

**Board of Management**

The business of the Charity is managed by a Board of Management (the Trustees) and its membership comes from within the Members of the Company. It is an objective to have members on the Board of Management whose skills, expertise and backgrounds complement the needs and aspirations of the workings of the Hospice and its business. Current membership of the Board of Management is 14 and following a review in 2020, the Articles of Association determine a minimum of four and a maximum of 14.

At each Annual General Meeting, those Trustees who have served for a period of four years since their last appointment shall retire and be eligible for re-appointment, via election by Members, for a further four-year term of office. New Trustees are recruited as skill gaps are identified or to support succession planning through external advert and direct approach, with a robust interview process and the appropriate pre-volunteering checks.

Each Designated Officer (Chair, Deputy Chair, Treasurer and Company Secretary) is elected by and from within the Board of Management to serve a period of up to 4 years following which the position will become subject to re-election.

The Board went out to open recruitment in August 2021 and was successful in appointing three new Trustees. This resulted in filling a number of identified skills gaps as well as improving the diversity on our Board. Any future recruitment will continue to take this open approach, targeting skills and increasing Board diversity. The charity holds indemnity insurance in respect of trustees.

**Trustee induction and ongoing training**

New Trustees undergo an orientation and training to brief them on their role and the various aspects of the Hospice service and to brief them on their legal obligations under Charity and company law, the content of the Memorandum and Articles of Association, the committee and decision making process, the business plan and recent financial performance of the Charity. We also pair new Trustees up with a 'buddy' to support them in settling into their role.

Trustees attend appropriate external training events which will develop them to better undertake their role. In 2021/22 Trustees attended the following training:

- Compliance and Culture - Civil Society
- Raising the Bar for Charity Governance - Civil Society
- The Charity trustee induction and refresher - NCVO
- Safeguarding Essentials - NCVO
- Understanding the numbers: financial intelligence for trustees training - NCVO

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)**

There is an annual review and appraisal of Trustees' individual roles within the organisation. Our Chair participated in a 360° degree appraisal this year, facilitated by the NHS Leadership Academy.

**Organisation**

The Board meets every alternate month; in 2021/22 there were a number of sub-committees with specific responsibilities: Quality & Safety Committee, Finance, Information Governance and Information Technology Committee, Investment Committee, Remuneration Committee and the Recovery and Transformation Programme Board. As a result of the previous governance review and the work undertaken by the RTPB, a Trading Board was established in 2021/22 and a Workforce Committee was established in 'shadow' form, to become a full sub-committee of the board in 2022/23, the RTPB was wound up in November 2021 in anticipation of our new strategy.

The Board, along with the senior leadership team of the company have an "Away Day" to discuss future strategic developments of the Hospice and its services. The Chief Executive manages the day-to-day operations of the Hospice and leads its Strategic Development. To facilitate effective operations, the Chief Executive has delegated authority, within a scheme of delegation approved by the Trustees, for matters including finance, employment, fundraising and Care Quality Commission registration.

**Regulatory Framework**

The Hospice is registered with the Care Quality Commission to enable it to operate as a Hospice. Ellen Tumelty, Modern Matron for Inpatient Services is the Registered Manager and Kate Heaps, is the Responsible Person. The Hospice maintains a schedule of compliance with the relevant Statutory Regulations and may be inspected by the Care Quality Commission twice annually, by announced and/or unannounced inspection. The Hospice was inspected in the autumn of 2016 and received an overall 'Good' rating, with 'Outstanding' for the Responsiveness domain. The Hospice produced a "Quality Account" for 2021/22, which is submitted to the CQC and to NHS Improvement<sup>6</sup>.

The Hospice was required to hold an NHS Improvement (Monitor) Issued Provider licence from April 2018; this requires regular reporting of financial plans, performance against these plans and assessment of financial risk.

**Related parties**

The Hospice has close relationships with NHS SE London who supports the Charity's work including a significant financial contribution. Close working relationships exist with other health and care providers within the community in particular, Lewisham & Greenwich NHS Trust, Oxleas NHS Foundation Trust, London Borough of Bexley, Royal Borough of Greenwich, Marie Curie, St Christopher's Hospice and Darent Valley Hospital NHS Trust.

The Hospice has a contractual relationship with seven other charities in Bexley as a part of a consortium OneBexley (Age UK Bexley, Bexley Carers, SE London Crossroads, Inspire Community Trust, Bexley Mencap, MIND in Bexley and Bexley Voluntary Services Council); the Hospice is also represented by the Chief Executive on the Local Care Programme Board in Bexley.

The Hospice has two wholly owned subsidiary trading companies – GBCH Trading Limited and Greenwich & Bexley Community Hospice Lottery Limited. Details of their activities are highlighted in note 10 of these accounts.

The Hospice has a Remuneration Committee which reviews and sets the remuneration of the Chief Executive and Senior Leadership Team (key management personnel) based on appropriate market rates and other parameters on at least an annual basis.

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<sup>6</sup> Available via the Hospice website [www.communityhospice.org.uk](http://www.communityhospice.org.uk)

**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)**

**Our approach to Sustainability and the Environment**

The Hospice is surrounded by large gardens and undeveloped grounds, some of which are covered by an environmental protection order. We look forward to recruiting a paid gardener to lead our dedicated team of volunteer gardeners in 2022/23 so that we can develop a long-term plan for our grounds, which will create a beautiful environment for patients, families and staff and encourage biodiversity.

We continued our partnership with Veolia and the Royal Borough of Greenwich at our RePurpose unit this year, removing tonnes of waste from the waste chain through salvage, upcycle and resale. Although we contribute significantly to the reuse, repurpose, recycle agenda through all our shops, we know there is more we can do to reduce waste across our operation. We have commissioned an environmental review from Royal Borough of Greenwich greener business team and in 2022/23 we will use this report to help develop a more detailed environmental strategy to guide our vision to play a greater role in the increasingly important green agenda.

We are mindful of the increasing cost of fuel and the impact it also has on the environment, we have invested in an electric vehicle this year as well as investing in electric car charging points on site. We plan to increase the size of the electric fleet going forwards and to reduce our carbon footprint through energy efficiencies and other forms of green travel.

**Social Responsibility**

As well as the Public Benefit outlined at page 4, the hospice wants to be an organisation that maximises any opportunities to strengthen our local area. As a local employer and business, we have the ability to bring economic and social capital to the area and make the lives of our staff, volunteers and the communities they live in better beyond our charitable purpose.

Our People Plan will create opportunities for new and existing staff and volunteers to live happy, healthy lives and be developed and rewarded in their work, this includes widening participation so that we ensure our whole community have equity of access to new and emerging roles and our Community Development Strategy will not only encourage engagement with community groups that we haven't yet met, but also explore how we encourage staff to get involved in their own communities through flexible working policies and a volunteering promise.

**Risk Management**

The Trustees implement a Risk Management Strategy which comprises of:

- A regular review of the Charity's Corporate Risk Register and Risk Management Framework (RMF)
- The establishment of systems and procedures to mitigate those risks identified in the register and RMF
- The implementation of procedures designed to minimise any potential impact on the Charity should those risks materialise

The Trustees review the financial accounts on a monthly basis and constantly review the level of reserves which it is felt prudent should be held.

The top 3 risks as identified by the Finance, Information Governance and Information Technology Committee are outlined in the table below:

<b>Risk</b>	<b>Mitigation</b>
1. Financial uncertainty as we emerge from the COVID-19 Pandemic and related to the War in Ukraine and the Rising Cost of Living.	The Board and Senior Leadership Team continue to monitor income, expenditure and cash flow closely, with monthly review of forecast. We continue to negotiate with system partners and commissioners about additional resources to support our work. We have developed a new five-year strategy and established an Investment Fund to support us to grow our income, and to implement digital technologies to maximise efficiency. We have a healthy level of reserves.



**TRUSTEES' REPORT FOR THE YEAR ENDED 31 MARCH 2022 (continued)**  
**STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)**

<b>Risk</b>	<b>Mitigation</b>
<p>2. Additional workload created by the effects of the COVID-19 Pandemic and the aging population/ Recruitment and retention challenges in our clinical workforce</p>	<p>We are working with system partners to manage existing and plan for future increased demand.</p> <p>We continue to recruit bank staff to provide flexibility and have identified new ways of working to enable us to meet increased need.</p> <p>We are developing our detailed Service Transformation Strategy and People Plan to be approved October 2022, this will set out our plans for how we plan to meet future demand and how we will recruit, retain and develop our workforce.</p> <p>We are planning a review of salaries and terms and conditions of employment to ensure they remain in line with our competitors.</p> <p>Delivery of education to external organisations and good communication about Hospice opportunities.</p> <p>Development of new roles to fill gaps that are difficult to fill (e.g. traditional nursing roles)</p> <p>Increased use of digital</p>
<p>3. Data Protection risks due to increased prevalence of cyberattacks.</p>	<p>We upgraded our hardware in 2021.</p> <p>We carry out regular network penetration tests and have a third party agreement with a company who monitor our network for potential threats.</p> <p>We have cybersecurity insurance in place.</p> <p>All staff are trained on an annual basis around data protection and cyber security.</p> <p>Staff are only able to access GBCH systems when on site or with 2 factor authentication.</p> <p>The majority of personally identifiable information is securely held on the cloud (Raiser's Edge and SystemOne)</p> <p>Clinical staff use NHS mail to communicate about individual patient care.</p> <p>Contract with Data Protection people for advice and guidance</p> <p>Robust incident management</p>

## TRUSTEES' RESPONSIBILITIES IN RELATION TO THE FINANCIAL STATEMENTS

The Trustees (who are also Directors of Greenwich & Bexley Community Hospice Limited for the purposes of company law) are responsible for preparing the Trustees' 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 the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable company/group 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 of the Charities SORP;*
- *Make sound judgements and estimates that are reasonable and prudent;*
- *State whether applicable 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 appropriate to presume that the charity will not continue in business.*

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time of 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 the Group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In accordance with company law, as the company's directors, we certify that:

So far as we are aware, there is no relevant audit information of which the company's auditors are unaware.

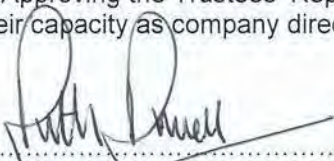
As the Directors of the company we have taken all the steps that we ought to have taken in order to make ourselves aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

### Auditors

A resolution will be proposed at the Annual General Meeting that Haysmacintyre LLP be reappointed as auditors to the charity for the ensuing year.

By Order of the Trustees

In Approving the Trustees' Report, the Board are also approving the Strategic Report included herein their capacity as company directors.



.....  
**Mrs Ruth Russell**  
Chair

21 SE. October 2022  
.....

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF GREENWICH & BEXLEY COMMUNITY HOSPICE LIMITED**

**Opinion**

We have audited the financial statements of Greenwich and Bexley Community Hospice Limited for the year ended 31 March 2022 which comprise the Consolidated Statement of Financial Activities, the Consolidated and Parent Charitable Company 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 of the parent charitable company's affairs as at 31 March 2022 and of the group's and parent charitable company's net movement in funds, including the income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

**Basis for opinion**

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

**Conclusions relating to going concern**

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

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

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

**Other information**

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

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:

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF GREENWICH & BEXLEY COMMUNITY HOSPICE LIMITED (continued)**

- the information given in the Trustees' Report (which includes the strategic report and the directors' report prepared for the purposes of company law) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the strategic report and the directors' report included within the Trustees' Report have been prepared in accordance with applicable legal requirements.

**Matters on which we are required to report by exception**

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Report (which incorporates the strategic report and the directors' report).

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

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

**Responsibilities of trustees for the financial statements**

As explained more fully in the trustees' responsibilities statement set out on page 32, the trustees (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the trustees are responsible for assessing the group'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.

**Auditor's responsibilities for the audit of the financial statements**

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

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

Based on our understanding of the group and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to compliance with regulatory requirements of the Care Quality Commission, Charity Commission, employment law and health and safety regulations, and we considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006, the Charities Act 2011, the Statement of Recommended Practice for Charities (SORP 2015) (Second Edition, effective 1 January 2019), payroll taxes and VAT.

**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF GREENWICH & BEXLEY COMMUNITY HOSPICE LIMITED (continued)**

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

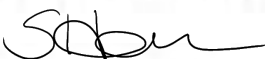
- Inspecting trustees' meeting minutes;
- Inspecting correspondence with regulators and tax authorities;
- Discussions with management including consideration of known or suspected instances of non-compliance with laws and regulation and fraud;
- Evaluating management's controls designed to prevent and detect irregularities;
- Identifying and testing journals, in particular journal entries posted at the year-end or with unusual descriptions; and
- Challenging assumptions and judgements made by management in their critical accounting estimates.

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

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

**Use of our report**

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



Siobhan Holmes (Senior Statutory Auditor)  
For and on behalf of Haysmacintyre LLP  
Statutory Auditors  
10 Queen Street  
London  
EC4R 1AG

Date: 4 November 2022

**CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES**  
(Incorporating INCOME AND EXPENDITURE ACCOUNT)

	Notes	Unrestricted Funds General £	Designated £	Restricted Funds £	2022 £	2021 £
<b>INCOME FROM:</b>						
<i>Donations and Legacies:</i>						
	2					
Voluntary Income						
General donations		954,565	-	139,925	1,094,490	1,562,094
Charity shop donations		229,602	-	-	229,602	42,093
Legacies		969,279	-	-	969,279	682,327
<i>Charitable activities:</i>						
Operating a Hospice	3	4,481,335	-	-	4,481,335	4,121,839
<i>Other trading activities:</i>						
Charity shop income		1,882,365	-	-	1,882,365	662,490
Lottery income		417,442	-	-	417,442	282,685
Other sales income	4a	38,482	-	-	38,482	57,926
Rental income		10,311	-	-	10,311	9,410
<i>Investment:</i>		21,923	-	-	21,923	20,222
<i>Other income:</i>	4b	726,493	-	706,423	1,432,916	2,268,013
<b>Total Income</b>		<u>9,731,797</u>	<u>-</u>	<u>846,348</u>	<u>10,578,145</u>	<u>9,709,099</u>
<b>EXPENDITURE ON:</b>						
<i>Raising funds:</i>						
Fundraising and marketing costs		629,424	-	-	629,424	591,095
Charity shop expenditure		1,587,580	-	-	1,587,580	1,642,466
Lottery expenditure		255,591	-	-	255,591	215,212
<i>Charitable activities:</i>						
Operating a Hospice						
Clinical expenses		6,330,157	-	925,266	7,255,423	6,530,776
<b>Total Expenditure</b>	5	<u>8,802,752</u>	<u>-</u>	<u>925,266</u>	<u>9,728,018</u>	<u>8,979,549</u>
Net (losses)/gains on investments	10	67,064	-	-	67,064	89,180
<b>Net income/(expenditure)</b>		<u>996,109</u>	<u>-</u>	<u>(78,918)</u>	<u>917,191</u>	<u>818,730</u>
Transfers between funds	16	922,391	(843,206)	(79,185)	-	-
<b>Net movement in funds</b>		<u>1,918,500</u>	<u>(843,206)</u>	<u>(158,103)</u>	<u>917,191</u>	<u>818,730</u>
<b>BALANCE BROUGHT FORWARD at 1/4/21</b>						
		2,777,702	1,966,349	6,269,308	11,013,359	10,194,629
<b>BALANCE CARRIED FORWARD at 31/3/22</b>						
		<u>4,696,202</u>	<u>1,123,143</u>	<u>6,111,205</u>	<u>11,930,550</u>	<u>11,013,359</u>

All recognised gains and losses are included in the consolidated statement of financial activities.  
All transactions are derived from continuing activities.

The accompanying notes form part of these financial statements.

Full comparative figures for the year ended 31 March 2022 are shown in note 21.

**CONSOLIDATED AND CHARITY BALANCE SHEETS**  
As at 31 March 2022

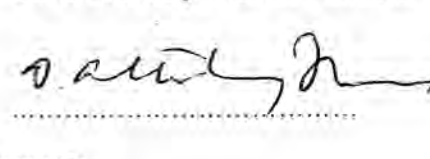
	Notes	The Group		The Charity	
		2022 £	2021 £	2022 £	2021 £
<b>FIXED ASSETS</b>					
Tangible assets	9	6,089,764	6,210,485	6,089,764	6,210,485
Investments	10	891,566	811,342	892,568	812,344
		<u>6,981,330</u>	<u>7,021,827</u>	<u>6,982,332</u>	<u>7,022,829</u>
<b>CURRENT ASSETS</b>					
Stocks	11	-	5,457		
Debtors	12	2,708,338	1,736,456	3,160,586	2,257,589
Cash on deposit, at bank and in hand		4,825,528	3,063,749	4,338,029	2,911,964
		<u>7,533,866</u>	<u>4,805,662</u>	<u>7,498,615</u>	<u>5,169,553</u>
<b>CURRENT LIABILITIES</b>					
CREDITORS: Amounts falling due within one year	13	(2,584,646)	(814,130)	(2,334,170)	(657,296)
<b>NET CURRENT ASSETS</b>		<u>4,949,220</u>	<u>3,991,532</u>	<u>5,164,445</u>	<u>4,512,257</u>
<b>NET ASSETS</b>		<u>11,930,550</u>	<u>11,013,359</u>	<u>12,146,777</u>	<u>11,535,086</u>
<b>FUNDS</b>					
<b>UNRESTRICTED FUNDS:</b>					
General Fund		4,696,202	2,777,702	4,912,429	3,299,429
<b>Designated Funds</b>					
Fixed Assets Fund		223,143	274,680	223,143	274,680
Legacy Fund		-	1,191,669	-	1,191,669
RTP Fund		600,000	500,000	600,000	500,000
Building Development Fund		300,000	-	300,000	-
<b>RESTRICTED FUNDS:</b>					
Property Fund		5,866,621	5,935,805	5,866,621	5,935,805
Others		244,584	333,503	244,584	333,503
	16	<u>11,930,550</u>	<u>11,013,359</u>	<u>12,146,777</u>	<u>11,535,086</u>

The financial statements were approved and authorised for issue by the Board of Directors on 21<sup>st</sup> October 2022 and were signed below on its behalf by:

Mrs Ruth Russell - Director



David Atterbury Thomas - Director



The accompanying notes form part of these financial statements.

The net income for the charity only for the year is £611,691 (2020/21:£1,340,457)

**CONSOLIDATED CASH FLOW STATEMENT  
FOR THE YEAR ENDED 31 MARCH 2022**

	Notes	2022 £	2021 £
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>	A	1,842,590	1,762,349
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Interest received		1,166	2,240
Payments to acquire fixed assets		(81,977)	(143,963)
Disposal of fixed assets		-	9,750
Purchase of investments		-	(11,030)
<b>CASH PROVIDED / (USED IN) INVESTING ACTIVITIES</b>		<u>1,761,779</u>	<u>1,619,346</u>
<b>INCREASE/ (DECREASE) IN CASH IN THE YEAR</b>		<u>1,761,779</u>	<u>1,619,346</u>
<b>Cash and cash equivalents at the beginning of the year</b>		<u>3,063,749</u>	<u>1,444,403</u>
<b>TOTAL CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR</b>		<u>4,825,528</u>	<u>3,063,749</u>

**NOTES TO THE CONSOLIDATED CASH FLOW STATEMENT**

A. RECONCILIATION OF NET INCOME TO NET CASH FLOW FROM OPERATING ACTIVITIES	2022 £	2021 £
Net income (as per the Statement of Financial Activities)	917,191	818,730
Depreciation charge	202,698	194,640
Profit on disposal of fixed assets	-	(9,750)
Gainson Investments	(80,223)	(100,460)
Decrease in stock	5,457	3,989
(Increase)/decrease in debtors	(971,882)	712,743
Increase in creditors	1,770,515	144,697
Interest received	(1,166)	(2,240)
<b>Net cash used in operating activities</b>	<u>1,842,590</u>	<u>1,762,349</u>

**B. ANALYSIS OF NET DEBT**

The charity has no net debt and therefore no analysis is required.



## NOTES TO THE FINANCIAL STATEMENTS

### 1. ACCOUNTING POLICIES

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

#### **Statement of compliance**

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 2015) - the Statement of Recommended Practice for Charities (SORP 2015) (Second Edition, effective 1 January 2021), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

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

#### **General information**

The charity is a private company limited by guarantee, incorporated in England and Wales (company number: 2747475) and a charity registered in England and Wales (charity number: 1017406) the charity's registered office is shown in the reference and administration section. The charity is set up as a company limited by guarantee.

#### **Preparation of accounts on a going concern basis**

##### Impact of economic factors on our business

The COVID-19 worldwide pandemic has generated an economic tsunami, demonstrating the inherent volatility to revenue income, coupled with the conflict in Ukraine and the rising cost of living, we continue to operate in incredibly uncertain times. We were pleased to see the lifting of many lockdown measures in April 2021, but our community remains understandably cautious and, as a result, it is difficult to predict how people will shop, donate and volunteer their time into 2022/23.

Following the instigation of our business continuity plan the previous year, many changes remained in place for significant parts of the year. Most notably, we continued to rely on more remote video and telephone consultation, although we were glad to bring outpatients back into the building and gradually relax some of our visiting arrangements for our inpatient unit. We have continued to see an increased need for care in the community, and the demand for Inpatient and hospital support is also above pre-pandemic levels. We welcomed more volunteers back into all areas of our operation; it was refreshing to see their generosity and commitment which has been the lifeblood of the hospice for so long.

We designed our fundraising plans to be flexible and adaptable to accommodate supporter behaviour and we were excited to open our shops earlier than we had budgeted for, gaining an additional three months' worth of income.

We were glad to be able to benefit from an additional £706,423 Hospice Emergency funding from NHS England, and were supported by an additional £299,000 of COVID-19 funding from the local NHS.

The cost of living crisis has seen a significant increase in inflation instigated by high energy prices. The company will benefit from the various measures that the government is putting in place to support companies through this crisis.

## NOTES TO THE FINANCIAL STATEMENTS (continued)

### 1. ACCOUNTING POLICIES (continued)

In addition:

- We have free reserves of £5.6m and have liquid funds of £4.8m in our bank accounts as at the year-end
- We are able to liquidate the investment portfolio if necessary.

Based on the plans and measures described above, the Trustees consider there are no material uncertainties about the Charity's ability to continue as a going concern. The review of our financial position, reserves levels and future plans gives Trustees confidence the charity remains a going concern for the foreseeable future.

#### **Consolidation**

The group financial statements consolidate the financial statements of the charitable company and its wholly owned subsidiaries, GBCH Trading Limited and Greenwich & Bexley Community Hospice Lottery Limited. It is the group's policy to transfer the profits of the subsidiaries to the charity under Gift Aid. A separate Statement of Financial Activities and Income and Expenditure Account for the charity has not been presented because the Charity has taken advantage of the exemption afforded by section 408 of the Companies Act 2006. The surplus of the parent charity was £917,191 (2021: £818,730). The registered office for both GBCH Trading Limited and Greenwich & Bexley Community Hospice Limited is 185 Bostall Hill, London, SE2 0GB. Uniform accounting policies have been applied.

#### **Income recognition**

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

#### **Donations and legacies**

Donations and gifts and are included in full in the Statement of Financial Activities when there is entitlement, probability of receipt and the amount of income receivable can be measured reliably.

#### **Gifts in kind**

Gifts in kind represent assets donated for distribution or use by the Charity. Assets given for distribution are recognised as income only when distributed. Assets given for use by the charity are recognised when receivable. Gifts in kind are valued at the amount actually realised from the disposal of the assets or at the price the charity would otherwise have paid for the assets.

#### **Personal Protective Equipment (PPE)**

The group received donated PPE during the year, organised by Hospice UK.

#### **Grants**

Grants (including government grants) are recognised in full in the statement of financial activities in the year in which the charity has entitlement to the income, the amount of income receivable can be measured reliably and there is probability of receipt.

#### **Income from charitable activities**

Income from charitable activities is recognised as earned as the related services are provided. Income from other trading activities is recognised as earned as the related goods are provided.

#### **Other Income**

Income received from pension recovery, salary recharges, Bexley adult social care contract, and NHS England are included in other income.

#### **Investment income**

Investment income is recognised on a receivable basis once the amounts can be measured reliably

**1. NOTES TO THE FINANCIAL STATEMENTS (continued)**  
**ACCOUNTING POLICIES (continued)**

**Expenditure**

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds comprises; fundraising and marketing, charity shop and lottery expenditure.
- Expenditure on charitable activities comprises Hospice operating costs.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred

Expenditure is allocated to the particular activity where the cost relates directly to that activity. However, the cost of overall direction and administration of each activity, comprising the salary and overhead costs of the central function, is apportioned based on staff time attributable to each activity.

**Allocation of costs**

Staff costs are allocated between direct charitable expenditure and support costs based on the time spent on these activities. Other costs are allocated directly to the relevant heading.

**Fixed assets**

Depreciation is provided to write off the cost or valuation, less estimated residual values, of all fixed assets, except freehold land over their expected useful lives. It is calculated at the following rates:

Freehold buildings	1% straight line
Fixture, Fittings and equipment	33 $\frac{1}{3}$ % and 10% straight line
Motor vehicles	25% straight line

Donated assets are included at value on the date received.

**Investments**

Investments are a form of basic financial instruments and are initially shown in the financial statements at market value. Movements in the market values of investments are shown as unrealised gains and losses in the Statement of Financial Activities.

**Stocks**

Stocks are valued at the lower of cost and net realisable value. Cost is based on the cost of purchase on a first in, first out basis. Net realisable value is based on estimated selling price less additional costs to completion and disposal.

The Trustees have concluded and agreed that the valuing of shops donated goods for resale on receipt is impractical due to the high volume of low value items, lack of stock system for recording these items and the administrative cost involved. Instead the income is recognised in the accounts when these goods are sold.

**Financial instruments**

The Charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest method.

NOTES TO THE FINANCIAL STATEMENTS (continued)

1. ACCOUNTING POLICIES (continued)

**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.

**Debtors**

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

**Cash at bank and in hand**

Cash at bank and cash 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.

**Operating leases**

Rentals payable under operating leases are charged to the Statement of Financial Activities (SOFA) as incurred over the term of the lease.

**Funds**

Unrestricted funds are funds that can be used in accordance with the charitable objects at the discretion of the trustees.

Designated funds are unrestricted funds earmarked by the trustees for particular purposes.

Restricted funds comprise monies raised for, and their use restricted to a specific purpose or donations subject to donor-imposed conditions.

**Estimates and judgements**

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. Although these estimates are based on management's best knowledge of the amount, events or actions, actual results ultimately may differ from those estimates. The Trustees consider the estimation of useful life of fixed assets to be the area of judgement and estimation that have a significant effect on the financial statements. Further details on these judgements are provided above under tangible fixed assets.

Legacies are recognised when the following conditions are confirmed:

- there has been grant of probate by the end of the financial year
- the executors have established that there are sufficient funds to pay the legacy
- any conditions attached to the legacy are either within the control of the Charity or have been met

**Employee benefits**

*Short term benefits*

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

*Employee termination benefits*

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

*Pension scheme*

Contributions to the NHS and Stakeholder pension schemes in respect of eligible employees are charged to the income and expenditure account as they become payable. The Stakeholder scheme is a defined contribution scheme and the NHS a final salary scheme.

NOTES TO THE FINANCIAL STATEMENTS (continued)

2. DONATIONS AND LEGACIES

	2022 Total £	2021 Total £
Donations	1,329,092	1,604,187
Legacies	969,279	682,327
	<u>2,298,371</u>	<u>2,286,514</u>

3. INCOME FROM CHARITABLE ACTIVITIES

	£	£
Operating a Hospice - NHS income	4,481,335	4,121,839

4a. OTHER SALES INCOME

	2022 £	2021 £
Catering Income	5,184	2,072
Training Income	33,298	55,854
	<u>38,482</u>	<u>57,926</u>

4b. OTHER INCOME

	2022 £	2021 £
Pension Recovery	22,528	22,528
Medical Insurance Claims	4,463	55,854
Landlord Contribution to shop repairs	-	2,055
Kickstart Rebates	12,000	-
Covid Testing charges	32,562	-
Lease Extension	21,660	-
Salary Recharge secondment	30,605	29,707
Retail, Hospitality and Leisure Grant	52,002	198,732
Furlough Refund including Trading	10,446	414,537
NHS England Support	706,423	1,386,599
Adult social Care Contract	539,546	210,000
Charge for provision of medical notes	-	50
Others	681	-
	<u>1,432,916</u>	<u>2,268,013</u>

NOTES TO THE FINANCIAL STATEMENTS (continued)

**ANALYSIS OF GROUP EXPENDITURE**

**5a Direct and Support costs**

**Raising Funds**

	Direct costs £	Support costs £	Total 2022 £
Fundraising and marketing costs	491,838	137,586	629,424
Charity shop expenditure	1,549,753	37,827	1,587,580
Lottery expenditure	251,391	4,200	255,591

**Charitable activities**

***Operating a Hospice***

Clinical expenses	5,835,296	1,420,127	7,255,423
<b>Expenditure</b>	<u>8,128,278</u>	<u>1,599,740</u>	<u>9,728,018</u>

=

**Direct and Support costs**

**Raising Funds**

	Direct costs £	Support costs £	Total 2021 £
Fundraising and marketing costs	495,074	96,021	591,095
Charity shop expenditure	1,606,183	36,283	1,642,466
Lottery expenditure	211,372	3,840	215,212

**Charitable activities**

***Operating a Hospice***

Clinical expenses	5,548,610	982,166	6,530,776
<b>Expenditure</b>	<u>7,861,239</u>	<u>1,118,310</u>	<u>8,979,549</u>

NOTES TO THE FINANCIAL STATEMENTS (continued)  
ANALYSIS OF GROUP EXPENDITURE (continued)

5b.

Support costs	Administration	Finance and IT	Office Costs	Governance	Total
	£	£	£	£	2022 £
<b>Raising funds</b>					
Fundraising and marketing costs	65,463	57,270	9,771	5,082	137,586
Charity shop expenditure	33,287	4,540	-	-	37,827
Lottery expenditure	-	4,200	-	-	4,200
Clinical expenses	660,713	615,974	100,532	42,908	1,420,127
	<u>759,463</u>	<u>681,984</u>	<u>110,303</u>	<u>47,990</u>	<u>1,599,740</u>

Support costs	Administration	Finance and IT	Office Costs	Governance	Total
	£	£	£	£	2021 £
<b>Raising funds</b>					
Fundraising and marketing costs	34,666	48,501	9,054	3,800	96,021
Charity shop expenditure	31,683	4,600	-	-	36,283
Lottery expenditure	-	3,840	-	-	3,840
Clinical expenses	359,792	502,655	89,395	30,324	982,166
	<u>426,141</u>	<u>559,596</u>	<u>98,449</u>	<u>34,124</u>	<u>1,118,310</u>

5c Governance costs include:

	2022 £	2021 £
Staff costs	47,990	34,124
Auditor's remuneration:		
- Audit work	13,900	10,900
- Other services	-	(200)
	<u>61,890</u>	<u>44,824</u>

Where support costs are not incurred specifically for an activity heading, they are allocated on the basis of the number and level of staff employed within the appropriate activity heading.

**NOTES TO THE FINANCIAL STATEMENTS (continued)**  
**ANALYSIS OF GROUP EXPENDITURE (continued)**

**6. Employees**

	The Group		The Charity	
	2022	2021	2022	2021
	Number	Number	Number	Number
Average number of employees, excluding Directors	179	178	143	134
Full time equivalent figures	156	157	122	118
	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>
<b>Staff costs consisted of:</b>	<b>2022</b>	<b>2021</b>	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
Salaries	5,350,454	5,192,777	4,435,247	4,190,992
Social security costs	540,939	499,901	465,838	422,939
Other pension costs	369,278	368,642	332,792	326,220
Redundancy payments	-	20,062	-	20,062
	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>
	6,260,671	6,081,382	5,233,877	4,960,213
Agency	175,719	29,422	169,416	29,422
Medical services	222,163	283,955	222,163	283,955
	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>
	6,658,553	6,394,759	5,625,456	5,273,590
	<u>          </u>	<u>          </u>	<u>          </u>	<u>          </u>

The number of employees whose emoluments were £60,000 or above per annum were:

	2022	2021
£60,000 - £69,999	1	2
£70,000 - £79,999	4	4
£80,000-£89,999	2	-
£100,000 - £109,999	1	1
	<u>          </u>	<u>          </u>

Of these, 8 employees are accruing pension contributions totalling £55,796 (2021:7 employees, accruing £44,105).

The total employee benefits of the key management personnel of the Group were £524,915 (2021: £448,572). Of this, £491,732 (2021: £416,889) relates to the key management personnel of the charity.

**7. TRUSTEES REMUNERATION AND EXPENSES**

No expenses were reimbursed to trustees in the current year. (2021: £Nil). No Trustee received remuneration in the current or prior year.



**NOTES TO THE FINANCIAL STATEMENTS (continued)**

**8. NET INCOME**

	<b>2022</b>	<b>2021</b>
	<b>£</b>	<b>£</b>
The net income is stated after charging:		
Auditors' remuneration (excluding VAT)		
- For audit	16,700	15,500
- For tax compliant services	5,940	3,640
Lease payments	343,297	333,750
Depreciation	<u>202,698</u>	<u>194,640</u>

**9. TANGIBLE ASSETS - GROUP**

	<b>Freehold Land &amp; Buildings</b>	<b>Equipment Furniture &amp; Fittings</b>	<b>Motor Vehicles</b>	<b>Charity Total</b>	<b>Subsidiary Furniture, Equipment &amp; Vehicles</b>	<b>Group Total</b>
	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>	<b>£</b>
<b>Cost or valuation</b>						
At 1 April 2021	6,918,444	2,116,082	69,650	9,104,176	127,801	9,231,977
Additions	-	60,627	21,350	81,977	-	81,977
Disposals	-	-	(40,886)	(40,886)	(127,801)	(168,687)
	<u>6,918,444</u>	<u>2,176,709</u>	<u>50,114</u>	<u>9,145,267</u>	<u>-</u>	<u>9,145,267</u>
<b>Depreciation</b>						
At 1 April 2021	982,639	1,849,320	61,732	2,893,691	127,801	3,021,492
Provided for the year	69,184	123,138	10,376	202,698	-	202,698
Disposals	-	-	(40,886)	(40,886)	(127,801)	(168,687)
	<u>1,051,823</u>	<u>1,972,458</u>	<u>31,222</u>	<u>3,055,503</u>	<u>-</u>	<u>3,055,503</u>
<b>Net Book Value</b>						
At 31 March 2022	<u>5,866,621</u>	<u>204,251</u>	<u>18,892</u>	<u>6,089,764</u>	<u>-</u>	<u>6,089,764</u>
At 31 March 2021	<u>5,935,805</u>	<u>266,762</u>	<u>7,918</u>	<u>6,210,485</u>	<u>-</u>	<u>6,210,485</u>

NOTES TO THE FINANCIAL STATEMENTS (continued)

10. FIXED ASSET INVESTMENTS	2022 £	2021 £
<b>Charity:</b>		
Shares in subsidiary companies at cost	1,002	1,002
Listed Investments	891,566	811,342
	<u>892,568</u>	<u>812,344</u>
At 31 March 2022	<u>892,568</u>	<u>812,344</u>

The historical cost of listed investments at 31 March 2022 was £750,000 (2021: £750,000).

	2022 £	2021 £
At 1 April 2021	811,342	699,852
Additions	-	11,030
Disposals	-	-
Gain/ (loss) on investment	66,871	100,460
Investment Income	20,952	17,983
Investment Fees	(7,599)	(6,703)
	<u>891,566</u>	<u>811,342</u>
At 31 March 2022	<u>891,566</u>	<u>811,342</u>

	2022 £	2021 £
<b>Investment in subsidiary undertakings</b>		
Cost		
GBCH Trading Limited	1,000	1,000
Greenwich & Bexley Community Hospice Lottery Ltd	2	2
	<u>1,002</u>	<u>1,002</u>
At 31 March 2022	<u>1,002</u>	<u>1,002</u>

The charitable company owns 100% of the share capital of GBCH Trading Limited being 1,000 Ordinary Shares of £1 each and 100% of the share capital of Greenwich & Bexley Community Hospice Lottery Limited being 2 Ordinary Shares of £1 each.

The subsidiaries are registered in the United Kingdom. The principal activity of GBCH Trading Limited (company registration number: 5612068) is the operation of charity shops. The principal activity of Greenwich & Bexley Community Hospice Lottery Ltd (company registration number: 06483768) is to generate funds for the parent company through the operation of a lottery. Where applicable, the total net taxable profits are distributed to the Charity by gift aid.

A summary of the results of the subsidiaries are shown on the next page.

NOTES TO THE FINANCIAL STATEMENTS (continued)

10. FIXED ASSET INVESTMENTS (continued)

	2022 £	2021 £
<b>GBCH Trading Limited</b>		
Turnover	1,882,365	662,490
Cost of sales	(11,604)	(6,239)
Gross profit	1,870,761	656,251
Administrative expenses	(1,575,977)	(1,636,227)
Operating (loss)/profit	294,784	(979,976)
Other Income	10,716	390,163
Corporation Tax	305,500	(589,813)
	-	13,505
Profit/(Loss) for the year	305,500	(576,308)
Profit/(Loss) brought forward	(521,727)	54,581
Profit/(Loss) carried forward	(216,227)	(521,727)

The assets and liabilities of the subsidiary were:

Fixed assets		-
Current assets	583,422	257,214
Current liabilities	(798,649)	(777,941)
Total net assets	(215,227)	(520,727)
Aggregate share capital and reserves	(215,227)	(520,727)

The net (liabilities)/assets of the subsidiary as at 31 March 2022 were £ (215,227) (2020/21: £ (520,727)).

**Greenwich & Bexley Community Hospice Lottery Limited**

	2022 £	2021 £
Turnover	417,442	282,685
Cost of sales	(71,912)	(67,600)
Gross profit	345,530	215,085
Administrative expenses	(183,679)	(147,612)
Operating profit	161,851	67,473
Distribution to parent charity	161,851	67,473
Retained in subsidiary	-	-

NOTES TO THE FINANCIAL STATEMENTS (continued)

10. FIXED ASSET INVESTMENTS (continued)

The current assets and liabilities of the subsidiary were:

Current assets	223,148	112,853
Current liabilities	(223,146)	(112,821)
Total net assets	2	2
Aggregate share capital and reserves	2	2

The net assets of the subsidiary as at 31 March 2022 were £2 (2021: £2).

11. STOCKS

	The Group		The Charity	
	2022 £	2021 £	2022 £	2021 £
Materials	-	5,457	-	-

12. DEBTORS

	The Group		The Charity	
	2022 £	2021 £	2022 £	2021 £
Trade debtors	689,226	96,284	686,351	86,443
Prepayments	349,053	225,536	71,693	58,482
Legacies	878,116	923,559	878,116	923,559
Other accrued income	54,811	58,311	39,000	42,500
NHS England grant	644,089	318,120	644,089	318,120
Other debtors	93,043	114,646	70,060	94,527
Amounts due from subsidiaries	-	-	771,277	733,958
	2,708,338	1,736,456	3,160,586	2,257,589

13. CREDITORS: amounts falling due within one year

	The Group		The Charity	
	2022 £	2021 £	2022 £	2021 £
Trade creditors	489,798	239,858	446,571	222,122
Other taxes and social security	132,693	127,599	132,094	127,599
Accruals	804,218	316,381	630,113	205,984
Other Creditors	897,087	49,900	897,087	49,886
Deferred income (note 15).	260,850	80,392	228,305	51,705
	2,584,646	814,130	2,334,170	657,296

NOTES TO THE FINANCIAL STATEMENTS (continued)

14. ANALYSIS OF DEFERRED INCOME

	Group		Charity	
	2022 £	2021 £	2022 £	2021 £
Deferred income at 1 April	80,392	74,242	51,705	51,705
Applied during the year	211,546	28,687	179,000	-
Released during the year	(31,088)	(22,537)	(2,400)	-
Deferred income at 31 March	<u>260,850</u>	<u>80,392</u>	<u>228,305</u>	<u>51,705</u>

15. STATEMENT OF FUNDS (2022)

	At 1/4/21 £	Income £	Expenditure £	Transfers & Gains £	At 31/3/22 £
<b>Unrestricted Funds</b>					
General Fund	2,777,702	9,731,797	(8,802,752)	989,455	4,696,202
<b>Designated:</b>					
Fixed Assets Fund	274,680	-	-	(51,537)	223,143
Legacy Equalisation Fund	1,191,669	-	-	(1,191,669)	-
Recovery & Transformation Fund	500,000	-	(42,208)	142,208	600,000
Building Development Fund	-	-	-	300,000	300,000
<b>Restricted Funds</b>					
Donations	333,503	846,348	(925,266)	(10,001)	244,584
Property Fund	5,935,805	-	-	(69,184)	5,866,621
<b>Group Total</b>	<u>11,013,359</u>	<u>10,578,145</u>	<u>(9,770,226)</u>	<u>109,272</u>	<u>11,930,550</u>

NOTES TO THE FINANCIAL STATEMENTS (continued)

STATEMENT OF FUNDS (2021)

	At 1/4/20 £	Income £	Expenditure £	Transfers £	At 31/3/21 £
<b>Unrestricted Funds</b>					
General Fund	2,049,220	8,003,163	(7,443,203)	168,522	2,777,702
<b>Designated:</b>					
Fixed Assets Fund	260,048	-	-	14,632	274,680
Legacy Equalisation Fund	1,691,669	-	-	(500,000)	1,191,669
Recovery & Transformation Fund	-	-	-	500,000	500,000
<b>Restricted Funds</b>					
Donations	193,501	1,705,936	(1,536,346)	(29,588)	333,503
Property Fund	6,000,191	1,705,936	-	(64,386)	5,935,805
<b>Group Total</b>	<u>10,194,629</u>	<u>9,709,099</u>	<u>(8,979,549)</u>	<u>89,180</u>	<u>11,013,359</u>

*The Trustees have designated funds out of the unrestricted funds for specific purposes as follows:-*

**Fixed Assets Fund**

In order to fulfil its charitable objectives the Charity needs its fixed assets. These assets, although unrestricted, cannot be realised without undermining the Charity's work and the Trustees therefore feel that it is appropriate to reflect the investment in fixed assets by means of a designated fund.

**Legacy Equalisation Fund**

In 2016/17 the Trustees created a Legacy Equalisation Fund taking advantage of the record legacy income in that year. The fund was established to be used to moderate the fluctuating nature of legacy income by allocating any annual excess of legacy income received over the ten year average legacy income to the Equalisation Fund and to release funds back to the General Fund in years where the legacy income falls below the ten year average. Due to above average income in 2021/20, £735,291 was transferred to the Legacy Equalisation Fund from the general fund. The Board took the decision to wind down the 'Legacy Equalisation Fund' this year, and to invest this into the two remaining designated funds with the balance transferred to the General Fund.

**Recovery and Transformation Fund**

This fund has been set up to invest in a number of projects to support the Recovery & Transformation Programme. The Hospice Recovery and Transformation Programme was approved by the Board of Trustees at the end of 2021. The purpose of the programme is to help us recover from the effects of the pandemic and to support transformation in seven priority areas, identified and crystallised by the COVID-19 experience:

- Service Transformation
- Refreshing Volunteering
- Staff Wellbeing and Development
- Equality, Diversity and Inclusion
- Retail and Commercial Development
- Fundraising Development
- Stakeholder Engagement

**Building Development Fund**

This fund will be used to support the development of the building post pandemic, including investment in our inpatient unit, creating more single bedrooms to enable easier infection control and improvement of our staff changing and rest facilities to improve staff wellbeing. We are grateful to CRASH Charity for facilitating a review of our Bostall Hill site in 2021/22. This created a feasibility study of the options available to improve our building post pandemic.

**NOTES TO THE FINANCIAL STATEMENTS (continued)**

*The Charity has the following restricted funds:*

**Donations Fund**

This represents funds received where the donor has declared where the gift should be spent. During the year, £228,843 was released into general reserves.

**Property Fund**

The predecessor organisation to the Hospice, an unincorporated charity, transferred the land and buildings on which the Hospice's main operations are located, to the Hospice on restrictive terms for the sum of £1. The transfer documentation predates the SORP and Charities Act, but legal opinion clarified restrictive terms that the property is held on trust by Greenwich & Bexley Community Hospice Limited on behalf of the predecessor organisation. However, the Charity has the legal right to register charges against the property and it could be indemnified out of the premises in respect of liabilities properly incurred in the Charity's role of Trustee.

Accordingly, the net book value of the land and buildings together with all improvements made to date on the premises are reported as a separate restricted fund.

Transfers between funds reflects the capital building project and movement in fixed assets.

**NOTES TO THE FINANCIAL STATEMENTS (continued)**

**16. ANALYSIS OF GROUP NET ASSETS  
BETWEEN FUNDS AS AT 31/3/22**

	General Fund £	Designated Fund £	Restricted Funds £	Subsidiary Reserves £	Total £
Fixed assets	-	223,143	5,866,621	-	6,089,764
Investments	891,566	-	-	-	891,566
Current assets	5,582,712	900,000	244,584	806,570	7,533,866
Current liabilities	(1,561,849)	-	-	(1,022,797)	(2,584,646)
	<u>4,912,429</u>	<u>1,123,143</u>	<u>6,111,205</u>	<u>(216,227)</u>	<u>11,930,550</u>

**ANALYSIS OF GROUP NET ASSETS  
BETWEEN FUNDS AS AT 31/3/21**

	General Fund £	Designated Fund £	Restricted Funds £	Subsidiary Reserves £	Total £
Fixed assets	-	274,680	5,935,805	-	6,210,485
Investments	811,342	-	-	-	811,342
Current assets	2,410,423	1,691,669	333,503	370,067	4,805,662
Current liabilities	77,664	-	-	(891,794)	(814,130)
	<u>3,299,429</u>	<u>1,966,349</u>	<u>6,269,308</u>	<u>(521,727)</u>	<u>11,013,359</u>

**17. PENSIONS**

The company contributes to the NHS and Stakeholder pension schemes in respect of eligible employees. The assets of the schemes are held separately from those of the company in independently administered funds. The pension cost represents contributions payable by the company to the pension scheme funds. The NHS scheme is a multi-employer deferred benefits scheme which is underwritten by the Treasury. The Charity's obligations are limited to its annual contributions. The scheme currently has an employee contribution of between 5% and 13.5% and an employer contribution of 14.3%. The Stakeholder Scheme has an employee contribution decided by the employee and the employer contribution is 1% above the employee's contributions up to a maximum of 7%. The total employers pensions contribution for the year amounted to £332,792 (2021: £326,220) and as at the balance sheet date the company held total contributions of £53,207 (2021: £49,841) that were payable to the pension schemes. The charity does not have any further commitments under these pension schemes.



NOTES TO THE FINANCIAL STATEMENTS (continued)

18. OPERATING LEASE  
COMMITMENTS

	2022		2021	
	Land & Buildings £	Other £	Land & Buildings £	Other £
As at 31 March 2022, the charity had annual lease rental commitments totalling:				
Leases expiring within 1 year	208,897	6,884	193,049	4,065
Leases expiring within 1-5 years	511,699	8,658	490,998	8,073
Leases expiring after 5 years	5,151	-	18,332	-
	<u>725,747</u>	<u>15,542</u>	<u>702,379</u>	<u>12,138</u>

19. CAPITAL COMMITMENTS

	2022 £	2021 £
Authorised	<u>5,000</u>	<u>-</u>

20. RELATED PARTY TRANSACTIONS

In 2022 the following transactions took place between the Charity and its wholly owned subsidiaries GBCH Trading Limited (company number: 05612068) and Greenwich & Bexley Community Hospice Lottery Limited (company number: 06483768):

- Amounts due to the parent company at the year-end was £771,277.

There are no other outstanding balances with related parties as at 31 March 2022 (2021: £nil). The total amount of donations received from the trustees in the year was £9,155 (2021: £ 31,113).

NOTES TO THE FINANCIAL STATEMENTS (continued)

21. COMPARATIVE CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (2021):

	Notes	Unrestricted Funds General £	Designated £	Restricted Funds £	2021 £
<b>INCOME FROM:</b>					
<i>Donations and Legacies:</i>					
Voluntary Income	2				
General donations		1,242,757	-	319,337	1,562,094
Charity shop donations		42,093	-	-	42,093
Legacies		682,327	-	-	682,327
<i>Charitable activities:</i>					
Operating a Hospice	3	4,121,839	-	-	4,121,839
<i>Other trading activities:</i>					
Charity shop income		662,490	-	-	662,490
Lottery income		282,685	-	-	282,685
Other sales income	4a	57,926	-	-	57,926
Rental income		9,410	-	-	9,410
<i>Investment:</i>		20,222	-	-	20,222
<i>Other income:</i>	4b	881,414	-	1,386,599	2,268,013
<b>Total Income</b>		<b>8,003,163</b>	<b>-</b>	<b>1,705,936</b>	<b>9,709,099</b>
<b>EXPENDITURE ON:</b>					
<i>Raising funds:</i>					
Fundraising and marketing costs		591,095	-	-	591,095
Charity shop expenditure		1,642,466	-	-	1,642,466
Lottery expenditure		215,212	-	-	215,212
<i>Charitable activities:</i>					
Operating a Hospice					
Clinical expenses		4,994,430	-	1,536,346	6,530,776
<b>Total Expenditure</b>	5	<b>7,443,203</b>	<b>-</b>	<b>1,536,346</b>	<b>8,979,549</b>
Net (losses)/gains on investments	10	89,180	-	-	89,180
<b>Net income/(expenditure)</b>		<b>649,140</b>	<b>-</b>	<b>169,590</b>	<b>818,730</b>
Transfers between funds	16	79,342	14,632	(93,974)	-
<b>Net movement in funds</b>		<b>728,482</b>	<b>14,632</b>	<b>75,616</b>	<b>818,730</b>
<b>BALANCE BROUGHT FORWARD at 1/4/20</b>		<b>2,049,220</b>	<b>1,951,717</b>	<b>6,193,692</b>	<b>10,194,629</b>
<b>BALANCE CARRIED FORWARD at 31/3/21</b>		<b>2,777,702</b>	<b>1,966,349</b>	<b>6,269,308</b>	<b>11,013,359</b>