St Michael's Hospice (incorporating The Freda Pearce Foundation) Report and Financial Statements 31 March 2012





Reference and administrative details

For the year ended 31 March 2012

Charity name

St Michael's Hospice (incorporating The Freda Pearce Foundation)

Charity number

511179

Company number

1634942

Address of registered

office

St Michael's Hospice

Bartestree Hereford HR1 4HA

Directors (who are also trustees) in service as at

31 March 2012

Mr A J Walshe, Chairman Mr G Nairn, Vice Chairman Mr D R Teague, Vice Chairman

Dr J A Dalziel
Mr I Entwisle
Mr M Greene
Ms P A Greenwood
Mr T D R Jenkins
Dr J J Kramer
Dr R G Miller
Mrs H A Shenton
Mrs J Winney

Mr D Campion

Retiring directors (who are also trustees) in the year

Mrs J Vanstone (resigned September 2011)

Chief executive officer

Mrs N C West

Hospice management team at 31 March 2012

Dr T Blower, Medical Director

Mr R Broom, Chief Financial Officer (appointed November 2011) Mrs R Denison, Head of Fundraising, Marketing and Communications

Mrs J Fisher, Head of Education Mrs J Mason, Head of Nursing

Mr S Rabbitts, Head of Support Services, Facilities and Volunteers

Rev D Vonberg, Head of Social and Spiritual Care

Retiring management team in the year

Mrs R Lee, Head of Finance (retired December 2011)

Reference and administrative details

For the year ended 31 March 2012

Company secretary Mr A Glover (resigned August 2011)

Ms S Newbould (appointed September 2011)

Bankers The Royal Bank of Scotland PLC

21 Broad Street

Hereford HR4 9AP

Auditors Sayer Vincent

Chartered accountants and statutory auditors

8 Angel Gate City Road London EC1V 2SJ

Investment Managers Thesis Asset Management plc

Exchange Building St John's Street Chichester West Sussex PO19 1UP

Report of the Directors

For the year ended 31 March 2012

The Trustees (who are also directors of the charitable company) present their report, along with the financial statements of the Charity for the year ended March 2012, in accordance with The Statement of Recommended Practice, Accounting by Charities (SORP 2005), statutory requirements and in line with the Memorandum and Articles of Association

Summary of Financial Performance

Despite the incredibly difficult economic situation this year, with the continued support of our community and through careful financial management, we achieved a surplus of £12,875 at the end of the year Importantly, this has been in the context of sustainability, growth and development of all of our services and progression of the design of our facilities redevelopment. There is no doubt that this year's success has been achieved through the hard work and efforts of staff to contain costs, fundraisers to optimise managed income streams and the generosity of the community. Nor would it have been possible without the time and commitment of more than 800 volunteers and the embedded volunteer model throughout the organisation, which optimises skills and resources, enables diversity and saves over £750,000.

The financial picture is all the more to be celebrated in the context of a significant downturn in legacy income this year (£300,000 below budget) and a fragile and unpredictable investment market. Retail sales of donated goods completely outperformed expectations, achieving an uplift in net contribution of £138,744 (23%) over the last year.

There are some significant challenges over the forthcoming years, not least in order to afford and sustain services for our community into the future, but also to achieve the much needed redevelopment of our buildings and environment. Through sound financial and business management and the continuing support of the Herefordshire community, we firmly believe in our ability to continue to meet our objectives.

Statement of Trustees Responsibilities

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 in the Charities SORP,
- make judgements and estimates that are reasonable and prudent,
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements, and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation

The Trustees are responsible for keeping proper accounting records that disclose with reasonable accuracy at any time the financial position of the charitable company and enable them to ensure that the financial statements comply with the Companies Act 2006. They are also responsible for safeguarding the assets of the charitable company and the group and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the Trustees are aware

- there is no relevant audit information of which the charitable company's auditors are unaware, and
- the Trustees have taken all steps that they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditors are aware of that information

Report of the Directors

For the year ended 31 March 2012

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

Public Benefit

Charity Commission Governance states that all charities must have charitable purposes or "aims" that are for the public benefit

We have referred to the Charity Commission guidance on public benefit and have adhered to the two key principles

- That there are clear and identifiable benefits appropriate to the aims which are balanced against any detriment or harm
- That benefit is not unreasonably restricted and beneficiaries are appropriate to the aims

To this end, our services benefit a specific section of the public (adults and their families within Herefordshire and immediate surrounding counties, affected by progressive life limiting illness) and within these criteria are not unreasonably restricted. Accordingly our aims and values are based on a philosophy that everyone is entitled to a good death irrespective of wealth, ethnicity, religion or belief, disability, sexual orientation, gender and with full regard to diversity

Our practice is holistic and takes into account the whole family, friends and others impacted by the individual's illness

From the first day we opened, we made a commitment to provide and sustain quality care to people with all progressive and life limiting conditions and to offer support to their carers and families during the patient's illness and in their bereavement

Within our charitable objects, we set out to provide, free of charge to our patients and families

- Palliative and end of life care to adults with progressive life limiting illness
- Psycho-social and spiritual support to those directly impacted by progressive life limiting illness
- Bereavement support to those affected by the death of someone from a progressive life limiting illness

Benefits can be evidenced by consensus, informed opinion, user feedback and audit

We are also committed to draw on our skill, experience and expertise to provide education and training to professionals and informal carers involved in palliative and end of life care

Philosophy

We aim to provide a range of services that are designed to meet the individuals' needs. Care is focused on whatever is important to the patient and family – spiritual care, emotional care, physical care, good pain and symptom control, advice and support with everyday living, information about financial advice, preparation for loss and bereavement. We practice a philosophy that the patients and their family always come first and that if opportunities can be created to promote the patients quality of life and well-being, in however small a way, then the staff and volunteers will try to enable this to happen. Patients are encouraged to maintain as much control as possible and families are supported to enable them to give as much care as they are able. We do this through advice, education and support in whatever setting the patient is being cared for. Information is provided to enable patients and their families to make choices about their care and the environment in which they are cared for.

Report of the Directors

For the year ended 31 March 2012

Beneficiaries

A comprehensive range of care services is available to

- Adults over the age of 18 with progressive life limiting illness requiring palliative and end of life care.
- Children over the age of 16 by prior permission of the Care Quality Commission
- Families and others involved in their care

from Herefordshire and the immediate surrounds of the adjoining counties of Powys, Shropshire, Worcestershire, Gloucestershire and Monmouthshire

A 24 hour advice and information service is available to professionals, patients and informal carers Education and training support is provided to staff, professional and informal carers within this catchment and more extensively within the West Midlands

Education and training support is provided to staff and professional and informal carers within this catchment and more extensively within the West Midlands

Key Partners

We work closely with the Primary Care Trusts for each geographical area and with NHS and Social Service colleagues in Primary, Secondary and relevant Tertiary centres, with independent nursing and care homes and care agencies. We also work closely with Community Organisations and local churches.

We are a member of the Three Counties Cancer Network and The Herefordshire Alliance, Help the Hospices and the National Council for Palliative Care. An educational key partner is the University of Worcester.

In this financial year, a total statutory contribution in the form of a grant from the NHS equated to just 13% of our income. Other grant income for the provision of operational services was received from the Burdett Trust for Nursing, Princess Royal Trust for Carers (now Carers Trust), Elmley Foundation, Skills for Care as the NQSW project for development of a social worker, and for education from the West Midlands Deanery and Strategic Health Authority. Commitments for significant grants and donations have also been made for the capital redevelopment project.

Most importantly, our partnership is with our community, who, as stakeholders, have the greatest vested interests in our services and achievements. Partnership working with our users, supporters and wider community is core to the opportunity for integration of the model of Compassionate Communities.

Partnership working

Collaborative working with government, public service, statutory, business and other Third Sector providers is essential to the seamlessness of service delivery and the optimisation of resources. Our skills, knowledge and experience, particularly regarding palliative and end of life care, volunteering, education and fundraising can be hugely influential in the strategic development of services, education programmes and fundraising activities both locally and more widely across the West Midlands and further afield

- We work closely with statutory and Third Sector providers of bereavement services. Our Head of Social and Spiritual Care leads The Herefordshire Bereavement Forum, drawing together strategic partnership strategies for the delivery of bereavement services across the County.
- Family work with young child and adolescent carers and training has been undertaken with schools, Hope Support services and Noah's Ark Bereavement Trust

Report of the Directors

For the year ended 31 March 2012

- Development of a support group for people with Motor Neurone Disease at St Michael's has been developed in association with the MNDA (Motor Neurone Disease Association) and statutory providers
- A renal clinic has been developed at St Michael's in partnership with the NHS
- Carer training has been delivered in partnership with Omega, the National Association for End of Life Care
- We are engaged, through joint bids, in the delivery of palliative care education with St Richard's Hospice in Worcestershire and with education establishments, government programmes and care organisations
- Training and professional development of medical professionals is provided at St Michael's in partnership with the West Midlands Deanery
- Training of other professionals, including nurses, is provided in partnership with the University of Worcester and other provider organisations
- The training of senior clinical staff in advanced communication skills is provided for the Three Counties Network in partnership with the National Cancer Action Team
- A significant amount of partnership working with businesses and communities, supports fundraising activities in the form of sponsorship, services and gifts in kind, time, advice and human resources

Services

Services are developed in response to identified need and in consultation with service users, staff and volunteers. Patient and carer feedback is encouraged, as are complaints, compliments and suggestions.

A comprehensive range of services is provided including

- Inpatient care 16 beds are provided for pain and symptom management, 24 hours specialist assessment and end of life care
- In-Reach Services are provided throughout the week for people affected by progressive lifelimiting illness to be able to 'reach in ' to St Michael's and access personalised support, care, advice and information including
 - Day Hospice Services
 - Living Well Service
 - Fatigue and Breathlessness Clinic
 - Renal Clinic
 - Lymphoedema Clinics
 - Carer Support Groups for adults, children and adolescents
 - Carer Training initiatives
 - Outpatient Assessment Clinics
 - Outreach support to patients at home

Other support is provided to people accessing the above support through

- Bereavement and psychotherapeutic counselling and family support services
- Complementary therapy, diversional therapy and music therapy

Staff

We aspire to be the employer of choice within Herefordshire and in the Health and Social sector. We aim to provide a supportive environment for our staff and volunteers, which engenders motivation, commitment and achievement and recognises and harnesses skills, potential and personal qualities.

Report of the Directors

For the year ended 31 March 2012

We have a professional multidisciplinary team made up of doctors, nurses, social workers, chaplains, occupational therapists, complementary therapists, physiotherapists, psychologists, counsellors and many volunteers with specialist skills and experience in the aspects of the care we deliver. Staff and volunteers receive education, training and other opportunities to maintain and further develop their skills, knowledge and experience.

At March 2012, there were 118 staff of whom 27 were full time, 75 were part time and 16 were bank staff. During the year there was low staff turnover and all positions were recruited to at year end. 38 (32%) of all staff have been employed by us for over 5 years. Of these, 22 (18.5%) have been employed for over 10 years with 3 staff having been engaged with us since our inception. Many long term employees have progressed their career pathways whilst working at St Michael's. The result is a stable, knowledgeable, experienced and committed workforce, particularly in middle and senior management roles. A professional development strategy and culture of motivation and inclusivity encourages creativity and dynamism and minimises the potential for stagnation due to such low turnover. During the course of the year, new members of staff were appointed to support counselling and bereavement services, adolescent support services, finance and events. Increases in salaries over the course of the year were in recognition of movement of staff within salary banding structure, in response to performance review, as agreed as part of the Terms & Conditions Review held in 2008.

Two members of staff undertook development to support Human Resources and Personnel functions in St Michael's and others have been developed with regard to clinical skills, management, teaching, communication skills and therapeutics

Volunteers

Embedded deep into our culture is a volunteer model which values and optimises the skills, experience and qualities of volunteers in every aspect of our work. It is a highly regarded model within the Hospice and Third Sectors

At the end of March 2012 there were 818 volunteers registered with us, of whom 582 support retail and Hospice support groups and 236 work within the Hospice departments. A significant number of additional volunteers provide ad hoc support to us and third party events. Registered volunteers are recruited through a formal process which includes application, interview, references and CRB check.

The Board of Trustees is entirely voluntary and recruited through a formal process which takes into consideration gap analysis, the Organisation's direction and succession planning

Care Standards

We believe that people are entitled to the best possible quality of care and service at all times and are committed to the monitoring and evaluation of our services in order to achieve the highest standards

Our care services are inspected by the Care Quality Commission with whom we are registered under the Care Standards Act 2000. A Care Standard Inspection carried out in November 2011 confirmed that all standards were being met with regard to

- Standards of treating people with respect and involving them in their care
- Standards of providing care, treatment and support that meets people's needs
- Standards of caring for people safely and protecting them from harm
- Standards of staffing
- Standards of suitability of management

Report of the Directors

For the year ended 31 March 2012

We have chosen to volunteer quarterly returns to the Care Quality Commission as part of our commitment to clinical governance and care quality

An unannounced inspection is undertaken annually by a minimum of two members of the Board of Trustees. Whilst independent of the NHS, we are influenced by strategic developments and guidance published by the statutory sector such as that of the National Institute for Clinical Excellence (NICE), the End of Life Care Strategy and Quality Markers. With regard to non-clinical standards, we address our compliance with regulatory, legislative and constitutional requirements through audit, management and risk assessment.

Internal Governance

With regard to non-clinical standards, we address our compliance with regulatory, legislative and constitutional requirements through our governance framework and management of risk

We are governed by our Memorandum and Articles of Association

A Board of Trustees is recruited to

- Safeguard and promote our values and mission
- Determine our strategy and structure
- Ensure we operate in an effective, responsible and accountable manner
- Ensure the effective functioning of our Board of Trustees
- · Meet all company statutory requirements

The Board of Trustees

The Board of Trustees meets quarterly, holds an Annual General Meeting and participates in a strategic half away day once a year. In between times it delegates its responsibilities to the Chief Executive. Board members are volunteers and are recruited according to a gap analysis which identifies skills, experience and qualities required for good governance. New Board members are inducted through visits, education documents and Help the Hospices Guide to being a Trustee. Once in post they are updated through an annual rotation programme of visits. Trustees are updated regarding specific issues at the half away day. Recruitment of new board members is carried out following the Organisations recruitment process and includes an interview by the Chairman, at least one other Board member and the Chief Executive. References and a Criminal Records Bureau (CRB) check are also undertaken.

Appraisal of Board performance is carried out by the Chairman. An Executive Committee consisting of the Chairman, the two Vice Chairmen, Chair of Patient Care and Fundraising Committees and the Company Secretary meets monthly to consider corporate issues, personnel issues, risk management and our overall financial performance. A further Board member is co-opted to the Committee for experience and development. A further seven sub-committees individually address Education & Training, Patient Care, Support Services, Fundraising & Events and Investment & Audit. There are established Clinical Governance and Health & Safety Committees, the frameworks of which mean that the strategic group meets quarterly and an operational group meets monthly, feeding issues of risk to the appropriate committees. There is an assurance framework which ensures that areas of risk are identified for each committee.

Report of the Directors

For the year ended 31 March 2012

Risk Management

Staff are encouraged to report all hazards, adverse incidents and any concerns to the appropriate committee and records are kept of these and steps taken to mitigate risk A 'no blame' culture encourages identification of concerns whilst maintaining a supportive environment for staff and volunteers A comprehensive audit programme is in place for clinical and non-clinical activities and is reviewed by the Clinical Governance Committee. The Head of Nursing undertakes the role of Responsible Officer for controlled drugs and attends the Local Intelligence Network.

The Clinical Governance Committee and sub-group investigate infection control risks, clinical practice and documentation, education and training, falls, drug errors, near misses and complaints. Outcomes of these investigations are reported to the Care Quality Commission in the quarterly reports. Any trends, concerns or risks are reported to the Board through the Executive Committee.

We employ the services in independent auditors Sayer Vincent to examine key areas of risk as part of the audit process

Risks

We address Risk Management in all areas of our operation. Over the course of this year no major risks were identified that were thought to be high enough to have a catastrophic effect on service delivery, income generation or compliance with regulations.

However, the following risks were considered

- Too great a reliance on legacy income
- A risk to donations as a result of the economic climate
- A risk to investments due to the instability of the investment market
- Commissioning and NHS problems

Appropriate steps were taken to mitigate these risks

Alternative sources of sustainable income generation were agreed as part of the Fundraising Strategy and investment made into a lottery campaign and further retail space. A legacy campaign was devised and the recruitment of the services of Smee & Ford to assist in generating legacy income was agreed. A review of investment policy resulted in the adoption of a lower risk strategy.

Succession planning for the Board of Trustees remains a consideration

Careful monitoring of staff professional development has been undertaken and a new appraisal process implemented

Care activity

Inpatient care:

We had 335 admissions over the year 68% of admissions were from home or a residential care setting, the remaining 32% were directly from hospital 12% of admissions were specifically for terminal care whilst the remaining 88% were for assessment and symptom control. Of all patients admitted, 54% died

The average length of stay was 16 days and average bed occupancy 85%. Of these admissions 93% were from Herefordshire and 7% from the surrounding counties.

Report of the Directors

For the year ended 31 March 2012

98% of patients admitted had a primary cancer diagnosis, the remainder having heart and lung conditions, motor neurone disease and autoimmune deficiency

In-Reach care

463 patients and 582 family members accessed In-Reach services from home

An increasing level of bereavement support has been offered to the families of the 394 patients known to us who have died in the past year and to many bereaved in previous years

Over 12,000 episodes of significant support (an average of 32 each day) were provided to people by a range of professionals and volunteers through services including the day hospice, living well, outpatient clinics, counselling and support groups

Principles underlying 2011-2012 business plan

On-going review and development of cost efficient models for service delivery and our operations which make the fullest use of the volunteer workforce skills, experience, commitment and time

Future service sustainability and growth is necessary to enable us to remain responsive to the changing palliative and end of life care needs of patients and their families in Herefordshire and surrounds

Earlier intervention and support across all condition groups and bereavement maximises the benefit of the knowledge, experience and our expertise for a wider group of patients and their families. Such intervention will also have an additional longer term fundraising and promotional benefit.

The potential for our services to be commissioned or grant funded as the preferred service provider will promote sustainability of our services into the future

Regard for our responsibility and commitment to share knowledge and expertise with others will maintain internal quality of care and influence the standards of palliative care in other settings across all disciplines. Development of business and social enterprise opportunities has the potential to increase revenue income in the future.

Optimisation and diversification of income generation, sponsorship, trading, donor, corporate and grant funding streams will promote sustainability into the future

There is a demonstrated need for building re-development and associated capital appeal

Achievements

Over the past year there has been some further embedding of infrastructure to support the above principles, progression of new strategies for fundraising, education and care provision, recruitment of HR support and more recently, progression of an IT strategy. Care services have developed in a structured and staged way with support and training for carers, development of family support, early development of bereavement services and group support and further development of therapeutic interventions, activities and therapies. Professional and volunteer skills have been enhanced in a planned way to provide the expertise required to take services forward over the next few years.

Existing high performing methods of income generation have been strengthened and diverse income streams explored and implemented Increase in grant funding has been successful and will be explored further. Some development of fundraising streams such as Trading Company activity and further service development have been curtailed by the current economic crisis.

Report of the Directors

For the year ended 31 March 2012

Plans for the building redevelopment, undoubtedly necessary for the future development of our services and consequent commissionability or fundability, have been progressed in order to secure our place in the Community of Herefordshire and surrounding Counties

Objectives 2011-2012

Clinical and care services	Progress made
Consider long term future direction in the context of	
national directives to enhance end of life care in the	
home setting	visiting service to progress Hospice at Home
	and deliver outreach services. Work is on-going
	with a pilot project planned for Autumn 2012
	We are remaining receptive to business and
	service development opportunities Building
	redevelopment plans incorporate appropriate
	space to support Hospice at Home and
	Outreach services
Increase access to all services for more people,	
earlier in their illness	groups and assessment clinics have been
	positively evaluated by users of these services
	Funding has been secured from the Burdett
	Trust for Nursing for some In-Reach work for a
	year A carer support project (ACWA) was
	pump-primed, also by the Burdett Trust for
	Nursing, for the first year and is now embedded
	in our In-Reach services. Two training courses
	were completed in partnership with Omega and
	further courses are planned for the future
	Activity statistics demonstrate a healthy uptake
	of these services by people who would not
	otherwise have accessed us for support and
	also demonstrate an increased engagement in
	the marketing of our services and fundraising
Further develop care provision for people with	,
progressive non-malignant life-limiting conditions	
Increase accessibility to services for minority and	
disadvantaged groups with Specialist Palliative Care	·
needs who have dementia, learning difficulty or are	
homeless	and experience gained from supporting patients
	with cancer can be shared widely to benefit
	others with palliative and end of life need The
	pattern of access for this group tends to be
	short term, with specialists in the non-malignant
	disease continuing to be the main support. This
	offers opportunities for partnership working

Report of the Directors

For the year ended 31 March 2012

Clinical and care services	Progress made
Create opportunities for user involvement and	
feedback to shape future service provision and the	,
re-development plans	needing it and accessing it All stakeholders
	have been actively engaged in the re-
	development project
Explore potential for partnership working with other	
service providers to optimise skills and resources	, , , , , , , , , , , , , , , , , , , ,
and contain costs	others from the Statutory, Education and Third
	Sectors in particular, as outlined in the
Francisco About and a state of About Linearing and account was About	Director's report
Explore the role of the Hospice in supporting the	
transition of young people requiring palliative care	
from children's to adult services	people in the region A strategy is being
	developed for future support, particularly in the
	new building development
Develop Hospice bereavement services and explore	
our role in the strategy for the provision of	· · · · · · · · · · · · · · · · · · ·
bereavement services across Herefordshire	Herefordshire through our role with the
	Herefordshire Bereavement Forum Internally,
	bereavement counselling and volunteer support
	services are in early stages of development
	A counselling model has been developed and
accordance with best practice outlined by NICE	
guidance, optimising experience with volunteer	Idevelop and integrate a comprehensive service. I
Imodels	
models Fundraising and Income generation	
Fundraising and Income generation	Progress made
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Fundraising and Income generation Increase income to a sufficient level to sustain and grow services and achieve a surplus towards the redevelopment to levels reasonably achievable within the current economic climate Community	Progress made Sufficient income has been raised over the financial year to support the current level of service and planned development of these in the context of the agreed strategic service plan In the current climate and despite care having been taken with budgeting and cost efficiency, there is no surplus towards the redevelopment Income from collecting tins and support groups has been influenced by the current economic climate. We have increased the number of collecting tins in circulation and the time invested in developing support groups to expand income from these sources. There has been increased engagement with corporates in the community. Some have not been in a position to offer financial support, but where this has been the case, pro bono work, gift in kind and practical and human resources.
Fundraising and Income generation Increase income to a sufficient level to sustain and grow services and achieve a surplus towards the redevelopment to levels reasonably achievable within the current economic climate Community	Progress made Sufficient income has been raised over the financial year to support the current level of service and planned development of these in the context of the agreed strategic service plan In the current climate and despite care having been taken with budgeting and cost efficiency, there is no surplus towards the redevelopment Income from collecting tins and support groups has been influenced by the current economic climate. We have increased the number of collecting tins in circulation and the time invested in developing support groups to expand income from these sources. There has been increased engagement with corporates in the community. Some have not been in a position to offer financial support, but where this has been the case, pro bono work, gift in kind and practical and human resources have been beneficial to us, our operations and
Fundraising and Income generation Increase income to a sufficient level to sustain and grow services and achieve a surplus towards the redevelopment to levels reasonably achievable within the current economic climate Community	Progress made Sufficient income has been raised over the financial year to support the current level of service and planned development of these in the context of the agreed strategic service plan In the current climate and despite care having been taken with budgeting and cost efficiency, there is no surplus towards the redevelopment Income from collecting tins and support groups has been influenced by the current economic climate. We have increased the number of collecting tins in circulation and the time invested in developing support groups to expand income from these sources. There has been increased engagement with corporates in the community. Some have not been in a position to offer financial support, but where this has been the case, pro bono work, gift in kind and practical and human resources.

Report of the Directors

For the year ended 31 March 2012

Fundraising and Income generation	Progress made
General donations	There is evidence of the impact of the current
	climate on this stream Small increases are
	requiring significant energy to sustain
	Community support for us is not dwindling, but
	disposable income is an issue for our
	supporters The Fundraising strategy for the
	forthcoming year has taken this into
	consideration
Events	Events performance has been good in the
	context of the economic climate. There has
	been careful review of current events to create
	challenging and realistic targets, new events
	and opportunities to support substantial
	increases over the coming year for this stream
Lottery	Investment into a new lottery campaign to
	increase the number of plays has seen positive
	recruitment of new players with low attrition A
	positive financial return will be realised in the
Retail	coming year
Netall	Investment in the retail warehouse and shops models has seen exceptional performance of
	this activity over the year
Review the Trading Subsidiary strategy for income	
generation and adjusted accordingly for income	
generation from new goods in the light of emerging	, , , , , , , , , , , , , , , , , , ,
economic predictions	l can any reviewed
Improve statutory income and sustainability of	No uplift was secured for the NHS grants from
service through committed commissioning as a	
preferred or lead provider	There was also no non-recurrent money
F	available during the year Hereford PCT is not
	currently in a position to increase their
	contribution, but remain receptive to dialogue
	regarding future commissioning opportunities
	GP commissioning of the services is likely, but
	processes and tariffs are currently unknown
	Some funding is likely to be at risk, whilst other
	opportunities are likely, but whilst engagement
	is planned, this is taking time to secure
Information provision, Education and Training	Progress made
Develop plans for an information centre and	_ · · · · · · · · · · · · · · · · · · ·
resource within St Michael's	progressed
Secure grant and business income	There has been evidence of some difficulty for
	other organisations to sustain professional
	development of their staff. Some opportunities
	are evident for optimising gaps in the market
	and becoming the preferred provider Some
	bids have been successful, but there has to be
	caution as to the future for this income stream

Report of the Directors

For the year ended 31 March 2012

Organisational governance and compliance with Progress made			
regulatory directives			
Assist the Board with Corporate profiling, communication and promotion, a Hospice Association was developed in 2010 Representatives will continue to be drafted from the local Community. Plans for wider engagement and involvement for this group will be implemented over the coming year. This will give the Board access to a support resource, bespoke skills, expertise and advice and a potential pool of people for future. Trustee recruitment for succession planning.			
Building re-development	Progress made		
Progressing the building design and capital appeal with a view to seeking further major donations and grants and commencing a special gifts campaign in 2011-2012	The Capital Appeal Strategy continues to be implemented with good reception and success		
St Michael's Hospice Development Company Ltd will progress towards the appointment of a redevelopment contractor whilst we further develops its governance role and the necessary risk management	are due in September 2012		
Monitor and review impact of capital income generation on on-going revenue generation and organisational sustainability and growth (including appropriate review of containment and efficiency of operational costs)	regarding the balance between capital and revenue income generation. Some trusts		

Financial report

Results

Charity income for the year was £3,963,392 with an expenditure of £4,077,701 resulting in net outgoing resources before other recognised gains of £114,309. There was a small surplus of £12,875 after realised and unrealised gains on investment. Under the circumstances of the current economic climate and a significant shortfall in legacies, this is a good outcome for us. It reflects the high level of support from the community and the efforts of staff and management to contain costs, optimise efficiencies and support the generation of income.

Report of the Directors

For the year ended 31 March 2012

Income

Efforts have been made throughout the year to increase, diversify and promote sustainability of all income streams. An overall increase of 13.5 % has been achieved across all managed income streams. Others more directly influenced by the current financial crisis, have not performed so well, notably legacy income, investments and statutory grant income. These have, without doubt, been impacted by the financial crisis. Within this context, strategies have been implemented to protect and optimise these sources of income and to reduce long term reliance on uncertain performance.

	£
Shops	1,292,129
Lottery	384,843
Donations	816,666
Legacies	450,455
Events	252,504
Community (including tins and support groups)	63,084
Statutory Grant income	522,213
Investment Income	87,741
Other	93,757
	3,963,392

Expenditure

The greatest percentage (71.5%) of expenditure is on direct patient care. A further 28.1% is spent raising sufficient funds to enable Patient Care delivery. Where possible, salaries were contained where direct impact on patient care, operational efficiency and staff recruitment and retention, were not compromised. Direct and general costs were significantly contained. This was achieved through review of providers, procurement, efficiencies and careful budgeting.

	£
Patient care	2,916,702
Shops	666,430
Fundraising and Publicity	338,586
Lottery	139,740
Governance	16,243
	4,077,701

Reserves

Unrestricted general reserves stand at £3,714,910 which equates to 10 14 months operating costs Amounts invested decreased by £227,055

Certain property assets were independently re-valued in the year, in line with our accounting policy

This has resulted in a decrease in their value of £19,732

	£
General Funds (free reserves excluding subsidiaries)	3,714,340
Designated Funds	4,157,632
Restricted funds	107,962
SMH Trading subsidiary	564
DevCo (Development Company Limited)	6
	7,980,504

Disclosure of movement in funds is made in Note 14 of the financial statements

Report of the Directors

For the year ended 31 March 2012

Trading subsidiary

St Michael's owns the whole of the issued ordinary share capital of SMH Trading Limited, a company registered in England. The subsidiary is used for non-primary purpose trading activities. All profits are gift aided to the charitable company. Details are outlined in the Note 16 to the financial statements.

It was agreed that, due to the economic crisis, there would be no active investment in expanding our trading of new goods in this financial year. Sales of new goods across charities and high street retail sector performance in Herefordshire would support this decision. There continues to be opportunities to diversify our income generation in the future and we remain mindful of sufficient investment to pave the way for this over the next year or so. This year £4,787 was gift aided to the parent company.

St Michaels Hospice Development

The charitable company also owns the whole of the issued ordinary share capital of St Michael's Hospice Development Company Limited, a company registered in England. The subsidiary is used for non-primary purpose trading activities in relation to the re-development of our buildings and surroundings. Details are outlined in Note 16 to the financial statements.

There are four Directors of St Michael's Hospice Development Company Limited, three of whom are entirely independent of St Michaels Hospice Accounts are prepared in accordance with the Companies Act and consolidated into the Charitable Company accounts of the parent Company, St Michael's Hospice (incorporating The Freda Pearce Foundation)

We have instructed the Development Company to deliver a redevelopment of our buildings and environment. The project involves the building of a new In-Patient Unit and Integrative Services Block and the refurbishment of the current building, to deliver space for comprehensive outreach services, including Day Hospice, Living Well, Outpatient clinics and therapeutic support services. The project also includes extensive landscaping.

During the financial year, the Development Company subsidiary has progressed the purchase of additional land, instructed professionals and paid fees accordingly and secured planning permission for the redevelopment, subject to conditions expressed therein. It has also progressed costs to full Bill of Quantities with a view to seeking early tenders for the project contract.

Hospice Redevelopment Project

We are progressing our Capital Appeal programme alongside the work undertaken by the Development Company

During the year, we progressed our plans to redevelop our buildings and environment. This project will further enhance the delivery of palliative and end of life care to the people of Herefordshire and surrounding counties affected by progressive life-limiting illness. With existing Hospice facilities for inpatient care, which is mainly carried out in four bedded wards, we are unable to provide the level of privacy and dignity that we would wish to offer to patients and families during what is often their final moments together. This can be distressing to all involved, including other patients in the ward and their relatives and members of staff. The new building will afford complete individual family and patient privacy and the option of a relative staying in the patient's room overnight if this is desired. Also, each room will have toilet and bathing facilities, greatly adding to patient comfort and dignity. The building has been carefully designed to prevent patient isolation for those wishing to have social interaction.

Report of the Directors

For the year ended 31 March 2012

Through the building of a new 20 bedded In-Patient Unit and Integrated Services Block, we will be able to increase our inpatient activity by over 30%, meaning that an additional 100 people per year will benefit from this service. The development of community services to support people at home will be enhanced by new space for our Hospice at Home initiative and multi-disciplinary working with health and social care partners and volunteers. The refurbishment of the existing building will create a therapeutic environment in which to deliver our In-Reach and Out-Patient services, support groups, counselling and bereavement services. It is projected that activity in these areas will double. This will mean that an additional 463 patients and 582 family members and carers will be supported each year.

The redevelopment will enable us to increase our care and support to patients. It will enable us to provide these services earlier and for a longer period throughout a patient's illness as it progresses. The development of additional beds in the In-Patient Unit and of the Therapies Suite will specifically provide space in which to manage rehabilitation and re-adaptation, promoting independence for patients. Through therapies such as Physiotherapy, Occupational Therapy and Complementary Therapy, we are able to help patients to manage symptoms and the inevitable changes that progressive illness brings and to promote quality of life, dignity and independence as a result. The assessment kitchen and bathroom will also assist in achieving this

A new state of the art kitchen and welcoming café will enable people to enjoy nutritious and appetising meals and refreshments. A new spiritual space will enable people to contemplate, reflect, sit quietly, or celebrate and practice their faith in a bespoke and supportive environment. It will be possible to conduct wedding blessings, christenings and confirmations, celebrations of life services and religious services, and for larger family events, the café and community spaces will be accessible. Other spaces will help to provide an environment in which carer support and training, group meetings and support sessions can be delivered efficiently and effectively.

Sensitive and practical landscaping will transform the currently inaccessible parts of the landscape into space which patients and families, staff, volunteers and the community can use and enjoy and will create planting schemes to enhance the patient and visitor experience

The project is needed to ensure that we can continue to provide and grow our services in response to ever-changing needs, now and well into the future and to support its sustainability through grant funding, enterprise and donor support

To this end a Capital Fundraising strategy has been developed and is underway, with the second phase of approaches to significant donors due in the forthcoming year

Strategic Vision

Drivers

The following drivers influence our vision for the future

- Changing demographics increasing demand for the services
- The need for a sustainable business model in an uncertain economic and commissioning world
- The need for re-development of our buildings and environment in which to deliver services into the future
- Changing health and social care provision
- Changing needs and expectations of the Community we support
- Choice, Preferred Place of Care and Outreach agendas
- Increasing dementia, co-morbidities and life-prolonging interventions
- A changing profile of cancer care
- Increasing competition in fundraising and tendering
- · Competition in Service Provision

Report of the Directors

For the year ended 31 March 2012

Aims

Our intention is to respond to these forces for change in a planned and careful way, ever mindful of cost efficiency, effectiveness and the reality that we are funded almost entirely by our community. It will be important to retain flexibility, creativity and a 'can do' attitude. Central to this will be the volunteer model, which is so well embedded in the services currently provided.

To achieve our aims, we intend to

Care

- Progress the development and delivery of In-Reach and Hospice at Home services to support people wishing to remain at home
- Support re-adaptation and rehabilitation to support independence and ability to remain at home
- Further develop carer support and training
- Further develop the support group model for patients and carers and for particular marginalised groups
- Progress voluntary counselling and bereavement services
- Further develop partnership working with the NHS and other organisations to deliver our palliative clinics
- Work with the PCT to deliver highly specialised continuing care packages

Personnel

- Grow the volunteer workforce in all areas of our work
- Progress strategic workforce planning and staff and volunteer development to ensure skills and resources for the future

Education

- Deliver communication skills training to GPs, Primary Health Care Professionals and other specialist areas such as the Cardiac Network
- Secure the proposal to deliver training on Gold Standards Framework to Primary care, within a regional consortium
- Secure funding and deliver Level 7 modules within the Education Programme

Environment

Deliver the capital appeal and progress the re-development project

Financial

- Protect and grow sustainable revenue income streams
- Further the engagement and support of businesses
- Invest in critical income streams, including lottery and retail
- Implement the wider fundraising and marketing strategy
- Consider social and business enterprise opportunities
- Create strong relationships with potential health and social care commissioners
- Grow grant funding of operational services

Communication

- Engage with communities
- Further relationships with the media to promote our profile
- Progress a communication strategy

Report of the Directors

For the year ended 31 March 2012

Together, we will ensure that everyone in Herefordshire can receive access to excellent palliative care, advice and support, when and wherever they may need it and in an appropriate and responsive way

Auditors

Sayer Vincent were re-appointed as the charitable company's auditors during the year and have expressed their willingness to continue in that capacity

Approved by the Directors on 5 September 2012 and signed on their behalf by

Mr A Walshe - Chairman

Independent auditors' report

To the members of

St Michael's Hospice (incorporating The Freda Pearce Foundation)

We have audited the financial statements of St Michael's Hospice (incorporating The Freda Pearce Foundation) for the year ended 31 March 2012 which comprise the group and parent charitable company statement of financial activities, the group and parent charitable company balance sheets, the group cashflow statement and the related notes. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice)

This report is made solely to the company's members as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006 and section 144 of the Charities Act 2011 and regulations made under section 154 of that Act. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an auditors' report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed

Respective responsibilities of Directors and auditors

As explained more fully in the Statement of Trustees' responsibilities set out in the report of the Directors, 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

We have been appointed auditor under the Companies Act 2006 and section 151 of the Charities Act 2011 and report in accordance with those Acts. Our responsibility is to audit and express an opinion on the financial statements in accordance with applicable law and International Standards on Auditing (UK and Ireland). Those standards require us to comply with the Auditing Practices Board's Ethical Standards for Auditors.

Scope of the audit of the financial statements

An audit involves obtaining evidence about the amounts and disclosures in the financial statements sufficient to give reasonable assurance that the financial statements are free from material misstatement, whether caused by fraud or error. This includes an assessment of whether the accounting policies are appropriate to the charitable company's circumstances and have been consistently applied and adequately disclosed, the reasonableness of significant accounting estimates made by the Trustees, and the overall presentation of the financial statements. In addition, we read all the financial and non-financial information in the report of the Directors to identify material inconsistencies with the audited financial statements. If we become aware of any apparent material misstatements or inconsistencies we consider the implications for our report.

Opinion on financial statements

In our opinion the financial statements

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 March 2012, and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended,
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice, and
- have been prepared in accordance with the requirements of the Companies Act 2006 and the Charities Act 2011

Independent auditors' report

To the members of

St Michael's Hospice (incorporating The Freda Pearce Foundation)

Opinion on other matter prescribed by the Companies Act 2006

In our opinion the information given in the report of the Directors for the financial year for which the financial statements are prepared is consistent with the financial statements

Matters on which we are required to report by exception

We have nothing to report in respect of the following matters where the Companies Act 2006 and the Charities Act 2011 requires us to report to you if, in our opinion

- the parent charitable company has not kept adequate and sufficient accounting records, or returns adequate for our audit have not been received from branches not visited by us, or
- the parent charitable company 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

Catherine L Sayer (Senior statutory auditor)
14 November 2012
for and on behalf of Sayer Vincent, Statutory Auditors
Sayer Vincent, 8 Angel Gate, City Road, LONDON EC1V 2SJ
Sayer Vincent is eligible to act as an auditor in terms of section 1212 of the Companies Act 2006

Consolidated Statement of Financial Activities (incorporating an Income and Expenditure Account)

For the year ended 31 March 2012

Incoming resources	Note	Unrestricted £	Restricted £	2012 Total £	2011 Total £
Incoming resources from generated funds					
Voluntary income	2	1,461,477	187,032	1,648,509	1,571,074
Activities for generating funds Retail shop income		1,292,129	-	1,292,129	1,110,853
Lottery income		384,843	-	384,843	375,239
Investment income		87,428	313	87,741	126,128
Incoming resources from chantable activities					
Grants	3 _	550,170		550,170	680,403
Total incoming resources	_	3,776,047	187,345	3,963,392	3,863,697
Resources expended Costs of generating funds					
Costs of generating voluntary income					
Fundraising and publicity		338,586	-	338,586	368,961
Retail shop expenditure		666,430	-	666,430	579,508
Lottery expenditure		139,740	-	139,740	136,610
Chantable activities					
Nursing services		2,269,839	149,015	2,418,854	2,292,204
Medical care services		497,848	-	497,848	558,300
Governance costs	-	16,243		16,243	23,845
Total resources expended	4 _	3,928,686	149,015	4,077,701	3,959,428
Net (outgoing)/incoming resources before transfers		(152,639)	38,330	(114,309)	(95,731)
Gross transfers		9,241	(9,241)		
Gross transfers		5,241	(3,241)	-	•
Net (outgoing)/incoming resources before other recognised gains/(losses)	5	(143,398)	29,089	(114,309)	(95,731)
Realised gains on investments		36,778	300	37,078	76,652
Net (expenditure) / income for the year		(106,620)	29,389	(77,231)	(19,079)
Unrealised gains on investments	9 _	90,093	13	90,106	8,769
Net movement in funds		(16,527)	29,402	12,875	(10,310)
Reconciliation of funds Total funds brought forward	_	7,889,069	78,560	7,967,629	7,977,939
Total funds carried forward	=	7,872,542	107,962	7,980,504	7,967,629

All of the above results are derived from continuing activities. There were no other recognised gains or losses other than those stated above. Movements in funds are disclosed in Note 14 to the financial statements.

Company no. 1634942

Consolidated and Charity balance sheets

As at	31	March	2012
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AS at 31 Warch 2012				<u> </u>	
		The G	iroup	The Charity	
		2012	2011	2012	2011
	Note	£	£	£	£
Fixed assets					
Tangible fixed assets	8	2,648,484	2,555,599	2,648,484	2,555,599
Investments	9	5,148,967	5,376,022	5,148,967	5,376,022
		7,797,451	7,931,621	7,797,451	7,931,621
Current assets					
Stock	10	19,229	15,801	_	-
Debtors	11	166,400	135,915	198,545	151,153
Short term deposits		302,409	179,435	286,661	179,435
Cash at bank and in hand		1,852	7,356	1,852	7,356
		489,890	338,507	487,058	337,944
Liabilities					
Creditors amounts due within one					
year	12	306,837	302,499	306,837	302,499
Net current assets		183,053	36,008	180,221	35,445
		·	·	·	
Net assets		7,980,504	7,967,629	7,977,672	7,967,066
The funde of the group					
The funds of the group Restricted funds					
In surplus		107,962	78,560	107,962	78,560
Unrestricted funds		107,302	70,000	101,302	10,000
Designated funds		4,157,632	4,240,958	4,157,632	4,240,958
General funds		3,714,910	3,648,111	3,712,078	3,647,548
2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2					
Total funds	13, 14	7,980,504	7,967,629	7,977,672	7,967,066

Approved by the directors on 5 September 2012 and signed on their behalf by

Mr A Walshe - Chairman

Consolidated cashflow statement

For the year ended 31 March 2012			<u> </u>
		2012 £	2011 £
		L	
Net cash inflow from operating activities		8,288	22,111
Capital expenditure and financial investment			
Transfers to managed investment fund		(350,000)	(350,000)
Payments to acquire tangible fixed assets		(274,901)	(735,236)
Transfers from managed investment fund		775,000	793,277
		150,099	(291,959)
Increase / (Decrease) in cash in the year		158,387	(269,848)
Reconciliation of net (outgoing) resources before reva	luations to		
Net outgoing resources before revaluations		(114,309)	(95,731)
Depreciation and revaluation adjustment		182,016	162,094
Investment income		(87,741)	(126,128)
Investment management fees		16,980	19,119
Loss on disposal of fixed assets		(3,428)	16,257 1,204
(Increase) / decrease in stocks (Increase) / decrease/ in debtors		(30,485)	25,003
Increase in current liabilities		45,255	20,293
Net cash inflow from operating activities		8,288	22,111
Reconciliation of net cash flow to movement in net fui	nds		
Increase / (Decrease) in cash in the year		158,387	(269,848)
Net funds at 1 April 2011		99,446	369,294
Net funds at 31 March 2012		257,833	99,446
Analysis of changes in net funds			
	At 1 April	Cook flows	At 31 March
	2011 £	Cash flows	2012 £
	~	~	~
Cash at bank and in hand	7,356	(5,504)	1,852
Short term deposits	179,435	122,974	302,409
Bank loans and overdrafts	(87,345)	40,917	(46,428)
Increase in the year	99,446	158,387	257,833

Notes to the financial statements

For the year ended 31 March 2012

1. Accounting policies

a) Basis of accounting

The financial statements have been prepared under the historical cost convention except for investments which have been included at revalued amounts and in accordance with applicable accounting standards and the Companies Act 2006. They follow the recommendations in the Statement of Recommended Practice, Accounting and Reporting by Charities (issued in March 2005).

b) Consolidation

These financial statements consolidate the results of the charitable company and its wholly-owned subsidiaries - St Michael's Hospice Trading Limited and St Michael's Hospice Development Company Limited, on a line by line basis Transactions and balances between the charitable company and its subsidiaries have been eliminated from the consolidated financial statements. Balances between the two companies are disclosed in the notes of the charitable company's balance sheet. A separate statement of financial activities, or income and expenditure account, for the charitable company itself is not presented because the charitable company has taken advantage of the exemptions afforded by section 408 of the Companies. Act 2006 and paragraph 397 of SORP 2005.

c) Depreciation

Items are capitalised where the purchase price exceeds £250

Depreciation of fixed assets is charged by equal annual instalments commencing with the year of acquisition at rates estimated to write off their cost or valuation less any residual value at the following rates

Freehold land and hospice buildings	See below
Leasehold improvements	Over the period of the lease
Medical and nursing equipment and beds	25-33¼%
Motor vehicles	20-25%
Other equipment, fixtures, furnishings and fixtures	20-25%
Computer equipment	33¼%
Shop equipment	25%

Land and buildings are included at cost and houses are included at valuation. Buildings held at cost are depreciated over their expected useful life of 40 years. Buildings held at valuation are not depreciated but are re-valued independently at 3 yearly intervals at open market value for existing use.

Assets in the course of construction are not depreciated

Furnishings, crockery and linen are not depreciated but their replacements are charged to repairs and renewals

d) Pension schemes

Defined benefit scheme

The company contributes to the NHS pension scheme for staff eligible to join the NHS scheme Such contributions are a fixed percentage of salary. Contributions are charged to the Statement of Financial Activities in accordance with the rules of the scheme.

Notes to the financial statements

For the year ended 31 March 2012

1. Accounting policies (continued)

Defined contribution scheme

Where staff are not eligible to join the NHS pension scheme, the company contributes to the personal schemes of individual employees. Such contributions are a fixed percentage of salary Contributions are charged to the Statement of Financial Activities in accordance with the rules of the schemes.

e) Stocks and donated goods

Income from goods donated for resale in the Hospice shops is accounted for in the year in which the goods are sold. No value is placed on any stock of donated goods. Other stocks are valued at the lower of cost and net realisable value.

f) Investments

Investments are stated at market value, calculated as follows

UK Equities

Middle of the quotation from the Stock Exchange daily official list

Unit Trusts

Bid price

Others

As valued by the Investment Managers

Realised gains or losses arising on the disposal of investments are determined by reference to the difference between the market valuation at the beginning of the year, plus the cost of additions, and the sale proceeds. Unrealised gains or losses are determined by the movement in the market valuations from the beginning of the year, plus the cost of additions and the market valuations at the balance sheet date, and are taken to the Statement of Financial Activities.

g) Incoming resources

Income including grants and legacies is accounted for on a receivable basis, recognised when entitlement to the income has been established, the amounts can be ascertained and receipt is certain. Income relating to tax claims for donations made net of tax relief is accounted for in the year in which the donation was received.

Donated investments are accounted for at market value at the date the donation became receivable

The value of services provided by volunteers has not been included

h) Resources expended

Resources expended are recognised in the period in which they are incurred

Direct and support costs represent specific attributable costs directly in relation to the activity and where specific allocation has not been possible these have been allocated on the basis of average salary (see note 4)

Governance costs include those costs associated with meeting constitutional and statutory requirements and include audit fees and costs linked to strategic management

i) Operating leases

Rentals applicable to operating leases are charged to the Statement of Financial Activities over the period in which the cost is incurred

Notes to the financial statements

For the year ended 31 March 2012

1. Accounting policies (continued)

j) Funds

Unrestricted funds are those available for use at the discretion of the directors in furtherance of the general objectives of the company and which have not been designated for any other purpose

Restricted funds are those which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the company for a specific purpose. The notes to the accounts provide further details. Once the terms and conditions of the restrictions have been met, tangible fixed assets purchased with restricted monies, are transferred to unrestricted funds.

Designated funds represent the total Net Book Value of the freehold land and buildings and assets in the course of construction held at the balance sheet date and funds designated for the Development project

k) Deferred capital grants

Deferred capital grants in respect of capital expenditure are treated as deferred income and are credited to the profit and loss account over the estimated useful life of the assets to which they relate

2. Voluntary income

• • • • • • • • • • • • • • • • • • •	Unrestricted £	Restricted £	2012 Total £	2011 Total £
Donations, covenants, corporate & GAYE Support groups Legacies Other income	947,938 63,084 450,455	187,032 - - -	1,134,970 63,084 450,455	980,769 64,039 501,321 24,945
Total	1,461,477	187,032	1,648,509	1,571,074

3 Incoming resources from charitable activities

	Unrestricted £	2012 Total £	2011 Total £
Grants from Primary Care Trusts Grants from grant making trusts	522,213 27,957	522,213 27,957	647,669 32,734
Total	550,170	550,170	680,403

Notes to the financial statements

For the year ended 31 March 2012

4. Total resources expended

Direct and support costs represent specific attributable costs directly in relation to the activity and where specific allocation has not been possible these have been allocated on the basis of staff costs as follows

	20 ⁻	12	20	11
	Direct	Support	Direct	Support
	%	%	%	%
Average salary allocation				
Retail shop expenditure	9 25	0.74	6 76	0 71
Fundraising and publicity	5 03	1.98	6 89	1 92
Lottery expenditure	0 81	-	0 82	-
Nursing services	63 08	3.37	61 88	3 36
Medical care services	15 00	0 74	16 9 5	0 71

St Michael's Hospice (incorporating The Freda Pearce Foundation)

Notes to the financial statements

For the year ended 31 March 2012

Total 2012 2011	ធ	2,6	36,124 36,525	62,410 29,408	3,684 3,312	83,543 74,736	114,307 114,591	351,688 338,106	11,047 2,632					39,741 40,829	45,387 55,431	12,335 18,955	182,016 162,094	39,185 36,646	29,530 12,134	104,485 60,876	15,000 15,000	,701 3,959,428		3,959,428
·		2,692,470		. 62		83	114	. 351	Ξ										. 29	104	15	4,077,701		4,077,701
Support	3	184,091	4,422	•	368	•	•	•	•	4,479	6,824	3,909	4,364	31,588	3,103	12,335	12,446	2,679	•	•		270,608	(270,608)	
Governance Costs	બ	•	•	1	•	•	•	•	•	•	•	1	•	•	,	1	•	•	•	,		•	16,243	16,243
Medical Care services	ભ	403,804	2,585	ı	ı	•	,	•	•	9,824	•	8,574	9,574	•	6,807	ı	27,298	5,877	1	•		474,343	23,505	497,848
Nursing services	બ	1,698,184	25,694	31,205	3,316	•	•	•	11,047	41,314	61,413	36,056	40,265	8,153	28,626	•	114,800	24,714	29,530	104,485	15,000	2,273,802	145,052	2,418,854
Activities for generating funds	a	270,848	242	ı	ı	•	114,307	351,688	ı	6,590	1	5,751	6,422	1	4,566	1	18,309	3,942	ı	•		782,665	23,505	806,170
ontinued) Fundraising and publicity	ભ	135,543	3,181	31,205	•	83,543	•	1	•	3,298	•	2,878	3,214	•	2,285	•	9,163	1,973	•	•	•	276,283	62,303	338,586
Total resources expended (continued)		Staff costs (Note 6)	Other staff costs	Communications	Education	Fundraising and events	Lottery expenses	Shop expenses	Chapel supplies	Office and administration	Catering and domestic	Fuel, Rates and Water	Maintenance	Nursing and medical supplies	Legal and professional fees	Audit and accounts	Depreciation and revaluation	Irrecoverable VAT	Patient care	Other specific project costs	Freda Pearce nurse salaries		Support Costs	Total resources expended

Notes to the financial statements

For the year ended 31 March 2012

5.	Net outgoing resources for the year		
	This is stated after charging / crediting	2012	2011
		£	£
	Depreciation and revaluation Interest payable	182,016 -	162,094 -

Operating lease rentals

• property

• other

Auditors' remuneration

• audit

• audit

12,335

10,950

None of the Trustees received any remuneration or reimbursement of expenses during the year (2011 Nil)

8,005

6. Staff costs and numbers

Staff costs were as follows

other services

otali costs were as follows	2012 £	2011 £
Salaries and wages Social security costs Pension contributions	2,331,313 155,731 205,426	2,318,613 159,741 202,547
	2,692,470	2,680,901
Total staff emoluments were	2,536,739	2,521,160

One employee earned between £60,000-£70,000 during the year (2011 One Employee) Pension contributions for this staff member amounted to £12,833 (2011 £12,833)

The average weekly number of employees (full-time equivalent) during the year was as follows

	2012 No	2011 No
Charitable activities Fundraising and publicity	66 20	66 18
	86	84

7. Taxation

The charitable company is exempt from corporation tax as all its income is charitable and is applied for charitable purposes

St Michael's Hospice (incorporating The Freda Pearce Foundation)

Notes to the financial statements

For the year ended 31 March 2012

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Tangible fixed assets Group and Charity				Other Equipment Medical and	pment		
	Freehold Land and Buildings	Assets in the course of construction	Leasehold Property	Nursing Equipment and Beds	Fixtures, Furnishings and Fittings ϵ	Motor Vehicles	Total £
Cost At the start of the year Additions in year	3,026,344	396,500 216,258	138,977	258,110 3,015	542,052	87,773 10,995	4,449,756 274,901
At the end of the year	3,026,344	612,758	157,264	261,125	568,398	98,768	4,724,657
Depreciation At the start of the year Charge for the year Revaluation for year	1,035,386 98,144 19,73 <u>2</u>		82,916 21,722	227,700 11,060	479,293	68,862 10,068	1,894,157 162,284 19,732
At the end of the year	1,153,262		104,638	238,760	500,583	78,930	2,076,173
Net book value At the end of the year	1,873,082	612,758	52,626	22,365	67,815	19,838	2,648,484
At the start of the year	1,990,958	396,500	56,061	30,410	62,759	18,911	2,555,599

These were re-valued in the year by Jonathan Preece, Chartered Surveyor, at open market value for their existing use at £565,000 No depreciation is charged in respect of these properties held at valuation. The historic cost value of these properties is £584,732. Freehold Land and Buildings includes three dwellings adjacent to the main hospice buildings Accordingly, an impairment loss of £19,732 has been recognised in the year

Notes to the financial statements

For the year ended 31 March 2012

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9	Investments - Group and Charity			2012	2011
				2012 £	£
	Market value at the start of the year			5,591,605	4,627,357
	Additions at historic cost			2,912,787	2,749,800
	Disposal proceeds			(3,499,392)	(1,870,973) 8,769
	Unrealised gain Realised gain			90,106 37,078	76,652
	reansed gain			37,070	70,002
	Market value at the end of the year			5,132,184	5,591,605
	investments - cash holdings			16,783	(215,583)
	Market value at the end of the year			5,148,967	5,376,022
	Historic cost at the end of the year			4,804,442	5,100,280
	investments comprise				
	, , , , , , , , , , , , , , , , , , ,			2012	2011
				£	£
	Cook and sook funds			0.405.405	0.444.540
	Cash and cash funds Fixed interest investments			2,425,435 1,728,700	2,444,513 2,058,114
	Equities			44,380	37,863
	Unit / Investment Trusts			548,158	535,420
	Alternative investments			402,293	300,111
	Investment in subsidiary undertakings incorporate	ed in the UK		402,233	1
	mrodiment in easeralary arraertaininge interperate			<u>.</u>	<u></u>
				5,148,967	5,376,022
40	Charle	TL -	0	Th- 0	L
10	Stock	2012	Group 2011	The C 2012	narity 2011
		2012 £	£	2012 £	£
		~	~	~	-
	Goods for resale	19,229	15,801	-	
		19,229	15,801		
11	Debtors	The	Group	The C	harity
		2012	2011	2012	2011
		£	£	£	£
	Trade debtors	127,527	42,355	159,672	57,593
	Other debtors	2,474	·	2,474	61,399
	Prepayments and accrued income	36,399	32,161	36,399	32,161
		166,400		198,545	151,153
					701,100
12	Creditors amounts due within 1 year	The	Group	The Ch	arıty
		2012	2011	2012	2011
		£	£	£	£
	Trade creditors	220,415	57,476	220,415	57,476
	Bank overdraft	46,428	87,345	46,428	87,345
	Accruals and deferred income	39,994		39,994	157,678
			302,499	306,837	
		306,837	302,499	300,037	302,499

Notes to the financial statements

For the year ended 31 March 2013

<u> </u>	the year ended 31 March 2012					
13	Analysis of Group net assets betw	veen funds				
			Restricted	Designated	General	
			funds	funds	funds	Total funds
			£	£	£	£
	Tangible fixed assets		-	2,485,840	162,644	2,648,484
	Investments		107,962	1,562,643	3,478,362	5,148,967
	Net current assets/ (liabilities)		<u>-</u>	109,149	73,904	183,053
	Net assets at the end of the year		107,962	4,157,632	3,714,910	7,980,504
14	Movements in Group funds					
		At the start	Incoming	Outgoing		At the end
		of the year	resources	resources	Transfers	of the year
		£	£	£	£	£
	Restricted funds					
	Patient Care	35,366	16,503	(29,530)	(356)	21,983
	Funds for other specific items	18,249	103,310	(104,485)	(8,885)	8,189
	Development Project	24,945	52,845	-	-	77,790
	Eric Bayliss Nurses Fund		15,000	(15,000)		
	Total restricted funds	78,560	187,658	(149,015)	(9,241)	107,962
	Unrestricted funds Designated funds					
	Property Fund	2.387.458	_		98,382	2,485,840
	Development Fund	1,853,500	-	_	(181,708)	1,671,792
	Development rund	1,000,000			(101,700)	1,071,732
	Total designated funds	4,240,958	-	-	(83,326)	4,157,632
	General funds	3,648,111	3,902,918	(3,928,686)	92,567	3,714,910
	Total unrestricted funds	7,889,069	3,902,918	(3,928,686)	9,241	7,872,542
	Total funds	7,967,629	4,090,576	(4,077,701)		7,980,504

Purposes of restricted funds

Restricted funds comprise amounts totalling £17k donated by Trusts for specific nursing, medical and social work purposes. In addition, £15k was donated towards nursing salaries and a further £103k was donated towards specific equipment or support and £53k was donated towards the development project.

The transfer between general and restricted funds followed a full review of the restricted reserves which resulted in some realignment between the funds

Purposes of designated funds

Designated funds totalling £4 16m are held against the current freehold properties(including assets in the course of construction relating to the development project)

Notes to the financial statements

For the year ended 31 March 2012

15 Operating lease commitments

The Charity had annual commitments at the year end under operating leases expiring as follows

	2012		2011	
	Land and		Land and	
	Buildings	Other	Buildings	Other
	£	£	£	£
Less than 1 year	37,340	11,890	38,000	-
1 - 2 years	101,440	-	42,580	11,890
2 - 5 years	13,200	-	62,760	-
Over 5 years	60,400	<u> </u>	53,140	-
	212,380	11,890	196,480	11,890

16 Subsidiary Undertakings

The charitable company owns the whole of the issued ordinary share capital of St Michael's Hospice Trading Limited, a company registered in England. The subsidiary is used for non-primary purpose trading activities. All activities have been consolidated on a line by line basis in the statement of financial activities. Available profits are gift aided to the charitable company. A summary of the results of the subsidiary is shown below.

	2012 £	2011 £
Turnover Cost of sales	57,445 (37,445)	71,300 (35,115)
Gross profit	20,000	36,185
Distribution costs Administrative expenses Gift aid donation to parent company	(6,596) (8,617) (4,787)	(12,590) (19,572) (4,023)
Operating profit / (loss)	-	-
The aggregate of the assets, liabilities and funds was		
Assets Liabilities	23,033 (22,469)	15,802 (15,238)
Funds	564	564

Notes to the financial statements

For the year ended 31 March 2012

16 Subsidiary Undertakings (continued)

The charitable company also owns the whole of the issued ordinary share capital of St Michael's Hospice Development Company Limited, a company registered in England. The subsidiary is used for non-primary purpose trading activities. All activities have been consolidated on a line by line basis in the statement of financial activities. Available profits are gift aided to the charitable company. A summary of the results of the subsidiary is shown below.

·	2012	2011
	£	£
Turnover	232,000	396,500
Cost of sales	(218,523)	(394,229)
Gross profit	13,477	2,271
Distribution costs	-	-
Administrative expenses	(2,200)	(2,265)
Gift aid donation to parent company Other operating income	(11,276)	-
Other operating moone		
Operating profit / (loss)	1	6
Taxation	(1)	•
Interest payable		
Profit on ordinary activities for the period		6
The aggregate of the assets, liabilities and funds was		
Assets	15,748	2,271
Liabilities	(15,742)	(2,265)
Funds	6	6

17 Capital commitments

At the year end the charitable company had capital commitments as follows

For the purchase of property and land adjacent to Hospice for £36k (2011 £50k)

18 Related party transactions

During the year, the charitable company entered into transactions for the purchase of services from Board Members as described below

Mr M Green (Board Member), purchase of printing services totalling £22,398 (2011 - £20,242)

All transactions were on normal arms length commercial terms. At the 31st March 2012 a balance was outstanding to Mr Green of £7,426 which has subsequently been paid in full (2011 - £66)

Mr D Campion (Board Member), legal services totalling £nil (2011 - £1,763)

All transactions were on normal arms length commercial terms. At the 31st March 2012 no balance was outstanding to Mr Campion (2011 - £Nil)

The wife of Board Member Mr D Campion is an employee of the Hospice

Income and expenditure account CONSOLIDATED

As at 31 March 2012

AS at 31 March 2012		
	2012	2011
	£	£
Incoming resources		
Community fund raising	63,084	64,039
Corporate / GAYE	16,566	19,006
Donations / covenants	613,068	557,357
Education income	29,394	36,875
Events	252,504	214,389
Grants - NHS and Social Services	485,446	613,747
Grants - NHS Pension	36,767	33,922
Grant making trusts	27,957	32,734
Investment income	87,741	126,128
Legacies	450,455	501,321
Gross income from shops	1,292,129	1,110,853
Lottery income	384,843	375,239
Miscellaneous	13,142	4,053
Registrar's income	23,264	38,773
Restricted fund income	187,032	135,261
	3,963,392	3,863,697
Expenditure direct costs Communications Education costs Fundraising and events Lottery expenses Shop expenses Investment management fees	62,410 3,684 83,543 114,307 351,688 16,980	29,408 3,312 74,736 114,591 338,106 19,119 579,272
Salary costs		
Administration	199,105	173,909
Communications	66,417	65,149
Education	52,404	85,925
Fundraising	377,230	358,917
Medical	398,981	450,775
Nursing	1,131,743	1,224,692
Spiritual and Social	267,480	125,119
Support services	199,110	196,415
	2,692,470	2,680,901
C/Fwd	638,310	603,524

Income and expenditure account CONSOLIDATED

As at 31 March 2012

Income and expenditure continued		
B/Fwd	638,310	603,524
Overheads		
Spiritual & social	11,047	2,632
Office and administration	65,505	77,270
Audit and accounts	12,335	18,955
Professional fees	28,406	36,312
Catering and domestic	68,237	67,913
Electricity, Gas, Oil & Water	57,168	64,473
Maintenance	63,840	67,596
Nursing & medical supplies	39,741	40,829
Staff training, travel and uniform	36,124	36,525
Depreciation	182,016	162,094
VAT	39,185	36,646
Restricted funds expenditure	149,015	88,010
	752,619	699,255
	(114,309)	(95,731)
Unrealised and realised (deficit) / surplus of investments	127,184	85,421
	12,875	(10,310)