



The Mary Stevens Hospice  
Trustees and Directors Annual  
Report including consolidated  
audited financial statement for  
the year ending 31 March 2022

Care | Compassion | Kindness

The Mary Stevens Hospice Limited, Registered Charity Number 517656. Registered Company Number 1963989 (England and Wales)

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## A word from our Chair



I hope you enjoy reading the Trustees Annual Report, which deals primarily with the past 12 months of the Mary Stevens Hospice. These pages contain details of our activities and new initiatives. I wholeheartedly thank the Senior Leadership Team, the staff, the volunteers and the Trustees for their hard work and commitment.

The Covid 19 pandemic was testing for our patients, families, staff, and supporters alike. I am pleased to report that the Mary Stevens family have again risen to the challenge of providing excellent care, while simultaneously raising the funds required to do so. We achieved these thanks largely to our strong platform which we put in place during the pandemic. Innovations we have trialled in staffing and technology as well as our stable financial position meant we could adopt services and reshape the organisation in real time. Looking to the future our priorities now are to deliver outstanding care, to expand the number of patients we care for, to develop and support our workforce and to expand our revenue base. The Board and Senior Leadership Team have been reviewing the strategy and business plans for the next few years. We have an ambitious new growth strategy, and our growth plan includes detailed actions to expand our revenue base to match the cost of service increasing patient numbers. We will selectively add new shops and invest in our existing estate to maintain our best-in-class retail performance. Our fundraising team have delivered an enhanced programme of events and relationship building. We are working with our NHS partners to ensure we become a consultant led service and achieve specialist status.

The Board and Senior Leadership Team are addressing staffing shortages in order to reach more of the people who need us both in the Inpatient Unit and the community. These are two of our most critical challenges for the year ahead. The pandemic has been tough for our incredible staff as elsewhere in the health care system. Accordingly, we are investing in our workforce like never before, to recruit, support, train and retrain and attract the high-quality talent we need to achieve our goals.

Our challenge remains as always to deliver excellent care to everyone in need whilst simultaneously raising

most of the funds to pay for it. The donations of our loyal supporters have enabled the organisation to continue to deliver outstanding care. While unwelcome the pandemic had some collateral benefits, it made our community more aware than ever of the importance of Mary Stevens Hospice and the services it offers. It accelerated the opportunities for innovation such as the No Barriers Here Project which has gained national recognition for its approach to tackling issues around equality, diversity, and inclusion in care provision. The rationale is to promote and demonstrate positive progress in the workplace. Together we can make that change.

Whilst we cannot rest on our laurels, I am confident that with the dedication of our people and the ongoing generosity of our supporters we can continue to help every patient and family who need us. None of this would have been achieved without the increasing work of Mary Stevens staff and volunteers. This team is our key differentiator, they help us each day to deliver on our core mission of outstanding patient and family care. Quite simply the team is the heart of Mary Stevens and I want to recognise and thank every one of them for their efforts over the last year.

The Board and Trustees are the stewards of good Governance, and we must ensure our staff have complete confidence in our Governance standards and in our financial probity and that our corporate processes and procedures are always up to date and fulfil all the appropriate auditing requirements. We are very proud of both the heritage of Mary Stevens and its continued growth for the future.

**Peter Marsh**  
*Chair of Trustees, The Mary Stevens Hospice*

## A word from the CEO



It gives me great pleasure to present this report to you and share both the successes and challenges that the hospice has faced during the past 12 months.

As an independent hospice registered with both Companies House and the Charity Commission, we continued to face significant challenges throughout the year. The Covid-19 pandemic adversely affected our ability to generate income. However emergency central government payments, contingent upon our ability to demonstrate our activity data, had a positive effect on our financial position at the year end.

The level of statutory funding the charity receives, at 17%, is well below the local and national average of 34%. This has been highlighted to commissioners and will form the basis for ongoing negotiations with the new Integrated Care Systems moving forwards.

During this reporting period we successfully collaborated with Continuing Health Care who funded 2 of our Inpatient Beds as part of their admission avoidance program to relieve pressures on the acute health care system.

I am pleased to report that the hospice is now back to normal activities, after the restrictions placed upon us during the pandemic, with appropriate precautions in place for patients, visitors, employees, and volunteers. During the past 18 months we have been operating a Covid management group with responsibility for interpreting guidance related to Covid 19 and managing the risks. This group were highly effective at maintaining the safety of patients, their visitors, and the workforce and I thank them for their commitment.

Emerging from the challenges of the pandemic we have seen successes across the organisation, from a new model of care delivery by the Day Service Team seeing patients accessing dedicated programmes of support to the award winning innovative No Barriers Here approach to advance care planning, whilst the Inpatient Unit and Patient and Family Support Teams have continued to deliver outstanding levels of care to the populations requiring their unique support.

At the time of authoring this report it would be prudent to acknowledge the current global climate, rising utility costs, a decline in the value of investment portfolios and an increase in inflation all have the potential to negatively impact on our service. However, we are confident that the charity remains a going concern from 2022-2023. I continue to be proud of our values and the work ethic of our employees and I thank every person who contributes to making our work possible.

**Claire Towns**  
*Matron and CEO*

## Meet the Trustees

**Peter Marsh (Chair)** Peter's career spanned 44 yrs working in the N.H.S. managing Major Capital Development, the last 15yrs of which Peter was responsible for delivering non-medical facilities over multiple sites. Peter was appointed a Magistrate in 1997. He now chairs Fundraising Governance Committee.

**John Turner (Vice Chair)** Originally from Hereford, John obtained a degree in theoretical physics before qualifying as a chartered accountant, specialising in taxation, and subsequently becoming a partner in Deloitte. Formerly the treasurer of Stourbridge Tennis Club and a West Bromwich Albion season-ticket holder. He chairs the Finance and Resources Committee for The Mary Stevens Hospice.

**Brian Blakemore** Brian has over 40 years' experience in financial services covering Corporate Banking and Private Equity. He has a range of non-executive positions covering venture capital, corporate finance, private equity and online retail. Member and from 2020 Chair of Trading Board of Mary Stevens Hospice.

**Spencer Hodgson** Before retiring, Spencer had 30 years experience as a senior manager, gaining a mix of commercial, operational and administrative/financial experience gained across a range of industries and company sizes in the private and semi-public sectors. Spencer has been a fundraising volunteer for MSH and is a member of the Finance and Fundraising Governance Committees and a Director of The Lottery.

**Angus Lees** Strong commercial background and qualified to MBA standard. Cabinet Member at Dudley MBC holding the portfolio for the West Midlands Combined Authority. Member of the WMCA Overview & Scrutiny Committee, Housing & Land Board, Strategic Economic Development Board & Transport Development Committee. Previously worked within large corporations, and subsequently ran his own company for 11 years.

**Nigel Dace** Nigel worked as a solicitor in private practice for over 40 years, retiring in 2015. During the next year he became a Trustee of Mary Stevens Hospice and values considerably the high regard in which the Hospice is held within and beyond the Stourbridge community. He serves on Governance and Clinical Standards Committee.

**Steve Waltho MBE** Steve is a Dudley Councillor and former Mayor of Dudley with 21 years of public service to date for which, along with a lifetime of charity fundraising, he was awarded the MBE in 2018. He has also served on Health Boards in various capacities and currently serves on both the Fundraising and Trading Board Committees at MSH.

**David Martin** David is a Chartered Accountant with over 30 years of experience working as an accountant in industry and now in practice. Many of his clients are owners of SMEs who he helps to understand the numbers and this experience is proving to be invaluable in his roles as a Trustee of MSH and as a member of the Resources and Fundraising Governance Committees.

**Karen Shakespeare** Karen has 25 years experience as a Customer Service Manager in the Manufacturing, Utility and Logistics industry. She has served as a Councillor on Dudley Council for the past 19 years, much of that time as the Cabinet Member for Environment.

**Dr Jane Flint-Bridgewater** Retired Consultant Cardiologist/Hon. Senior Lecturer; first Clinical Director of Black Country Cardiovascular Network 2003-2008; Trustee British Heart Foundation 2006-2014; Medical Director of Action Heart Prevention and CR Programme 1988-2020; ad hoc adviser to CQC, PHSO to March 2020. Chaired Clinical Standards Committee at MSH 2016 to date.

**Barbara Coles** Barbara is a retired teacher having worked for over forty years in Birmingham and Sandwell schools. Barbara had links with several hospices in past years and seeing the wonderful work they do, was keen to help in some way. Member of the Clinical Standards Committee.

**Andrew Bagnall** Andrew qualified from Guy's Hospital, London as a Registered General Nurse in 1993 and has worked in hospices in both Oxford and Wolverhampton throughout his career. Alongside his extensive clinical knowledge and experience, Andrew has delivered palliative and end of life training across all settings and presently works as a Senior Lecturer at the University of Wolverhampton teaching undergraduate to doctoral level students. As a Trustee at The Mary Stevens Hospice, Andrew is co-opted to the Clinical Standards Committee.

### Chair of the Lottery Board:

**Arthur Baker** Arthur was a senior Finance Director for an international construction company, followed by many years working for a leading London merchant bank. For the ten years prior to retirement he was Chief Executive of a UK Casino company. Arthur is a Director of Lottery, and now Chairs the Lottery Board.

## Summary of Main Activities

At Mary Stevens Hospice we believe that people with progressive, incurable, life-shortening illness should be helped to live as fulfilling a life as possible until achieving a natural, peaceful and dignified death free from pain or anxiety and surrounded by those whom they love.

### Clinical

- Provide care, compassion and kindness for patients, families and carers from a consultant led, multi-disciplinary team.
- Aspire to be a centre of excellence in the provision of specialist palliative and end-of-life care which is safe, caring, effective and responsive to people's needs.
- Provide training and education to improve care at various stages along the patient journey.
- Sustain a diverse, adaptable, well-motivated team of volunteers to support service delivery.

### Fundraising

- Mary Stevens Hospice aims to minimise the cost of fundraising activities.
- To ensure we are making the best use of generous donations we benchmark different fundraising channels and techniques to ensure that they are competitive.
- We work hard to ensure that we can report back to our donors on the results and impacts that their giving achieves for the Hospice.

### Income Generation

- Develop a sustainable income generation model.
- Raise income ethically and in a responsible way.
- Develop an improved range of activities for the Trading subsidiary.
- Develop local fundraising support.
- Develop and implement a revised legacy strategy that encourages people to leave us a gift in their will.
- Recruit corporate supporters.
- Develop strong fundraising links with the local community.
- Promote membership of The Mary Stevens Hospice Lottery.

## Principal Risks and Uncertainties

The Trustees are acutely aware of the need to identify and assess the principal risks and uncertainties faced by the Hospice. A risk register is maintained and is reviewed at all meetings of Trustees. The register extends to 71 separate risks and assesses both the likelihood of a risk occurring and its consequence, enabling the relative significance to be determined. The risks cover clinical, financial and regulatory issues. The principal financial risks and the measures being adopted to minimise them are detailed elsewhere in this report. Risks are also minimised by appropriate training both in clinical areas but also regulatory areas. The impact of the Covid-19 pandemic has necessitated significant operational changes across all departments. Significant financial support from the Treasury was secured for the Hospice sector by Hospice UK which has mitigated negative financial impact on the Hospice. The senior leadership team and Trustees are focused on continued risk to the business as the pandemic creates future uncertainty.

## Our Fundraising Standards

We abide by the Fundraising Code of Practice which covers all aspects of fundraising and good practice. We work hard to protect our supporters' data, as well as evolving our systems to ensure that our supporters can choose how they would like to be contacted and with what types of communication. We have acted to ensure we are fully compliant with The Data Protection Act 2018. The Hospice recognises its duty of care to members of the public and, in particular, to vulnerable persons. The Trustees have approved a Safeguarding Policy and all members of the Fundraising Department and all Trustees are DBS registered. Risk assessments are carried out for all the fundraising events, wherever held. The fundraising department received no formal complaints during the year.

## Strategic Report

### Success and Objectives

As we are focused on developing a new strategy our plans for 2021-2022 do not represent a drastic deviation from our current activity. We sought to build on activities that we believe to be strategically important, these include:

- To continue to invest in and support our workforce.
- Building on innovative ways of working during COVID-19 across all areas and embedding them into practice.
- Focusing on the areas of Income Generation where we believe there is higher growth potential.
- Increasing our focus on diversity and inclusion both across our workforce and in the care and support we provide.
- Continuing to build external relationships, being aware of the move towards greater integration in health systems.
- Become a consultant led provider of specialist palliative care.
- Further improve access to adult and children's bereavement services.
- To participate in palliative care research.

### Successes and Achievements

The following pages highlight the delivery of key projects during 2021 - 2022. Each of these projects has contributed towards the delivery of the Hospice strategic aims.

- Delivered care both face to face and remotely using digital technology.
- Restructured our Trading Company to improve efficiency.
- Developed the hospice legacy strategy.
- Invested in an interactive staff survey giving us the opportunity to improve staff welfare and working conditions, improving morale, retention, and output.
- After a pilot project was completed, the hospice partnered with the local NHS Trust to appoint a joint palliative medicine consultant post.
- Restructured and expanded the bereavement service.
- Produced a film focused on a research study being led by the hospice with people excluded due to identity, culture, ethnicity, and race.
- Received funding to support the delivery of a new study later this year focused on LGBTQIA+ people and communities.

## In Patient Unit

April 2021 - March 2022

The In-Patient Unit (IPU) provides 24-hour care for patients with life limiting illnesses. The multi-disciplinary team provides specialist assessment, treatment and interventions to patients and their families who often have complex difficulties. The care is person centred and holistic and addresses the physical, spiritual, social, and emotional components of a person's health and wellbeing. The aim of care is to enhance a person's quality of life whilst helping them to live as fully as possible.

A significant challenge during this year was the need to restrict the number of people visiting their loved ones at the hospice. This was one of the most difficult challenges for the IPU staff during the reporting period.

Staff are focused on ensuring that they know what matters most to patients and introduced a Goal of the day project. This enabled patients to share with staff what they wanted to achieve daily, whether that be to work with a physiotherapist, manage a symptom, read a book, or put their finances in order.

The IPU team faced several challenges maintaining safe staffing levels during this period due to the ongoing pandemic. However, this led to some new opportunities for development within the team. Health Care Assistants have been supported to train as 2nd checkers for medicines administration. This was underpinned by robust training and competency assessment. The outcome of this piece of work was ensuring patients still received their required medications in a timely manner, if there were reduced numbers of available registered nurses, to reduce symptom burden.

An e-rostering system for managing the staffing rota has been successfully introduced into practice. This has created a more time-efficient method of managing staffing.

For the first time in the hospice the IPU had to utilise agency nurses, the costs of which are reflected in the management accounts, to ensure safe staffing levels were maintained.

With patient comfort at the fore of the Hospice's priorities air conditioning has been installed across all 10 IPU bedrooms. This has also led to an improvement in working conditions for staff who, working in PPE (Personal Protection Equipment) were finding the environment less than ideal.

There are plans now being progressed to upgrade several areas of the IPU which include improved visitor areas, a new overnight room for families and a nurse's office that is accessible to all.

As a care provider rated as Outstanding by the CQC (Care Quality Commission), the team continues to develop to ensure this rating is maintained. There are nurse champions in nutrition, infection prevention, student learning placements, wound care and stoma care.

The Matron has regular engagement calls with the CQC engagement officer to monitor the quality of care.



## In Patient Unit Figures

April 2021 - March 2022

Admissions - 115



New Referrals - 254



Deaths - 91



Discharges - 50



Hospital  
Avoidance  
10

Pain &  
Symptom Control  
31

Terminal Care  
74

Bed Days  
Occupancy  
2,052

## Day Unit Activity

April 2021 - March 2022

Patients are now attending the service face to face Monday to Friday.

We have been running wellbeing groups for patients with neurological conditions since last year. These are 8 weeks of structured sessions with which we work in collaboration with the community team and the wider hospice team to deliver sessions related to symptom control, managing dietary needs, looking at exercise and movement, spiritual care and aspects of advanced care planning alongside the five ways to wellbeing.



On Wednesday mornings our physio team run a group for patients who need support with managing symptoms related fatigue, anxiety and breathing (known as FAB group). These sessions are run over 8 weeks and look at similar topics to the neuro groups with an emphasis on breathing exercise and relaxation.

Also, on a Wednesday we have an 8-week course of mindfulness. This is a structured program that explores how mindfulness techniques can be used to help patients and relatives find some strategies to cope with the difficulties living with a palliative condition can bring. A monthly Monday drop-in is due to commence September to allow people who have attended the course to continue practicing mindfulness. These sessions run on a rolling program throughout the year.

At the year end we received a grant that will allow us to expand our therapy teams and will

appoint a physio assistant working alongside our regular physio. This will enable us to offer more one to one treatments within the hospice or at home if needed.



The grant has also given us the opportunity to employ a dedicated complementary therapy lead to support our complementary therapy team who are made up of experienced health care assistants with specialist training in complementary therapies. We offer treatment programs to patients and relatives in the day hospice, inpatients unit, as outpatients or occasionally at home where someone is too poorly to attend.

Patients can attend our Thursday monthly sessions which follow on from the neuro and fab groups. These allow the patients to attend for the whole day and offer ongoing support, with access to the clinical team, physio, complementary therapies, social worker, art psychotherapy and spiritual support. There is also a monthly men's and ladies' group which is supported by our social worker, these sessions allow both carers and patients to meet with support from the clinical team but offers a more social experience but structured sessions and have topics ranging from advanced care planning to chocolate making.

We have regular clinic sessions every week where new patients and current patients are seen by one of our medical team and one of the day service nurses to review symptoms, discuss advance care

planning or look at any issues that may require support. Patients can also book individual sessions to support them with holistic care such as physical needs through hydrotherapy bathing, spiritual care, support with funding issues or care needs, advance care planning, symptom management and other issues that patients and relatives may face when living with a palliative condition. We have a list of patients who are not able to physically attend and we support at least weekly with telephone calls to them or their relatives, liaising closely with the community teams and our inpatient unit when necessary.

Having staff experienced and trained in pre bereavement and legacy work we are able to work in groups or with individuals. Patients and families have the opportunity to work with each other and their wider family to create lasting tactile memories in a supportive environment.

The carer support group that is run by the social worker is supported by day services, and we are able to look after a patient if they are not able to be left at home in order for the carer to attend the group.



The motor neurone society have monthly meetings here on Mondays which we support. These are attended by patients and families and patients who are not known to the hospice may also attend these sessions.

We are in the process of looking to restart the PSP (progressive supranuclear palsy) monthly support meetings working with the PSP society who we support to run these sessions. We are in the process of introducing occupational therapy students back into the hospice and

are working with both Coventry and Worcester University to enable this. We have previously had positive experiences working with Coventry prior to Covid 19.

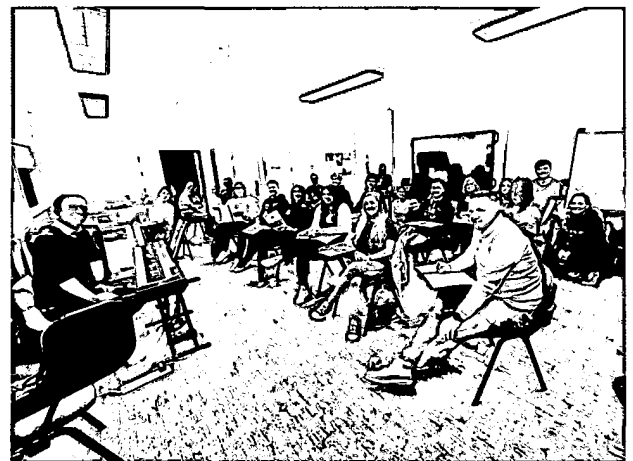
Day hospice has become more focused and working in this new structured way has enabled us to adapt to the restrictions we faced through covid 19 and continue supporting patients and relatives throughout that time. We have grown the service since the restrictions have lifted and we are continuing to expand and meet the needs of more of our communities not only in Dudley borough, but the wider communities of Sandwell, Wyre Forrester and some Worcester patients.



## Trusts that supported us during 2021/22

**The Arnold Clarke Community Trust**  
**The Albert Hunt Trust**  
**Persimmon Homes - Community Champions**  
**Lasletts Charities**  
**EH Smith**  
**Hobson Charity**  
**Wilmcote Charitable Trust**  
**Hospice Aid UK**  
**Baron Davenport's Charity**  
**Hilary Awdry Charitable Trust**  
**C.B and H.H Taylor 1984 Trust**  
**DMBC - Covid Infection Control Grants**  
**Souter Trust**  
**The Grimmitt Trust**  
**Ecclisastical**  
**Lillie C Johnson Charitable Trust**  
**W.G. Edwards Charitable Foundation**  
**The Rest-Harrow Trust**  
**The Mark Benevolent Fund**  
**AF Blakemore - Community Cashback Grant**  
**MK Rose Charitable Trust**  
**The Orange Tree Trust**  
**The Dumbreck Charity**  
**Michael & Anna Wix Charitable Trust**  
**The Eric W Vincent Trust Fund**  
**Skpiron Building Society Charitable Trust**  
**The Roger and Douglas Turner Trust**  
**Sainsbury's Helping Everyone Eat Better Community Grant**  
**The Caron Keating Foundation**  
**The Albert Hunt Trust**  
**The Muntz trust**  
**Co-Op Local Community Fund**  
**The Masonic Charitable Foundation**  
**The Edward Cadbury Charitable Trust**  
**The Anthony and Gwendoline Wylde Memorial Charity**  
**The Eveson Charitable Trust**  
**The Patrick Charitable Trust**

**The Ken Wrigley Memorial Charity**  
**The Jules Thorne Charitable Trust**  
**The Brian Shaw Memorial Trust**  
**Dudley Workforce Capacity Fund**  
**The Ardwick Trust**  
**The Alan Robert Laken Charitable Trust**  
**The Birmingham District Nursing Charitable Trust**  
**The Michael Marsh Charitable Trust**  
**The Inlight Trust**  
**Albright Grimley Charity**  
**GJW Turner Charitable Trust**  
**WED Charitable Trust**  
**The Card Factory Foundation**  
**Orbis Investments (Bucchanan Programme)**  
**DMF Ellis Charitable Trust**  
**B&Q Foundation**  
**The Hedley Foundation**  
**The Hospital Saturday Fund**  
**Edgar E Lawley Foundation**  
**The D'oyly Carte Charitable Trust**  
**Lillie C Johnson Charitable Trust**



## A focus on equity

The Mary Stevens Hospice remain committed as part of their strategic vision and aligned to national palliative care policy and recommendations, including the National Ambitions Framework for Palliative and End of Life Care, to prioritise equitable palliative and end of life care for all. We continued to make progress during the year under report and are progressively being recognised as leaders in this area, making a difference by dismantling barriers and addressing inequalities underserved communities' experience.

### No Barriers Here© - people with learning disabilities

Following a promising start in 2020 No Barriers Here©, a co-produced programme funded by The Masonic Charitable Trust and managed by Hospice UK, continued with the overarching aim of developing a more equitable approach to advance care planning and to support and normalise conversations about death and dying with people with learning disabilities. The team delivered the final two cohorts of workshops



during this period before co-developing and delivering an education programme delivered to health care professionals.

Additional funding produced a film about No Barriers Here© that was launched during October 2021 receiving highly acclaimed praise as an 'inspirational,

important, beautiful, life affirming film'.

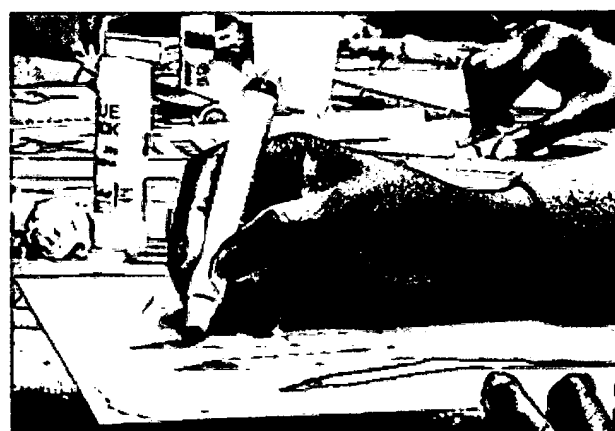
A pivotal and proud moment for the hospice was winning Hospice UK's Tackling Inequalities Award, finalists for The National Learning Disability and Autism Awards 2021 and nominated for an NHS England Improvement Award.



### No Barriers Here© for people excluded by identity, culture, ethnicity or race (ICER)

Leading on from the success of No Barriers Here© the hospice was delighted to be invited to submit a proposal to explore how this approach could be used with other Black, Asian and minority ethnic (BAME) communities. Working in partnership with Dudley Group of Hospitals and other providers, No Barriers Here© ICER was launched April 2021 as a two-year programme funded by NHS Charities Together.

Using the same principles and approach, a co-production team was recruited from across the UK to advise and steer the project. The team meet regularly and provide expert guidance throughout all project phases.



**“I never felt different until I came here (UK). As a migrant, I often don’t feel like I belong, and this is often an issue for me. The meeting felt diverse, inclusive, and safe. It just makes me feel good that this work is being done, helping us, and helping others.”**

In addition to arts-based workshops, education, and plans for future service development, the hospice submitted a successful proposal to lead No Barriers Here© ICER as a qualitative research study. Participant recruitment information for the study workshops was translated into Urdu, Punjabi, Polish and Romanian. The first cohort of the study took place in the year under report with participants successfully recruited all of whom self-identified as people from the Black Migrant community.



**“It’s a great medium to engage people, structurally dismantling racism and discrimination.”**

Community engagement has included the shared role of a community development worker for ethnic minority communities with Compton Care and the hospice leading events during key dates, including Black History Month, Hospice Care Week and Interfaith Week.



## **No Barriers Here© facilitator training**

Building on innovation and in response to training enquiries, a facilitator training package was developed and launched early 2022. The bespoke education programme teaches health care professionals the methods and approach of No Barriers Here©, whilst delegates also undertake three experiential art-based workshops to fully understand the model. The development of the training has expanded and increased the reach of No Barriers Here© across the UK, raising the profile of the hospice in addition to generating an income.

**“I attended the No Barriers Here course in March which was absolutely amazing. The course helped me develop skills and understanding in using arts-based approach to advance care planning. The project is so accessible and inclusive for all. It really is creating a truly personalised care plan and I am so pleased to be using this approach in my practice to support underserved populations.”**

## **Homeless Outreach and Palliative Care Education (HOPE)**

The Mary Stevens Hospice were successful in receiving grant funding to lead a two-year pilot project in the Dudley Borough to support people who are homeless or experiencing structural vulnerability. We are working in collaboration with primary care, housing, homeless support services and third sector organisations as part of a wider pathway being developed in the borough led by Dr Lloyd Baron and in partnership with Dudley Integrated Health Care.



The service aims to identify and support people who require palliative and end of life care, increase access to care, facilitate advance care planning opportunities and bereavement support, whilst providing a key education programme for staff who work with people experiencing homelessness. Direct care, social support and signposting will be provided through community drop-in sessions in collaboration with the pathway team.

## Conferences and publications

We continue to accept opportunities to disseminate and amplify hospice work at conferences, webinars and publications in addition to regional meetings and events. During this timeframe oral presentations have been delivered at:

- Royal College of Occupational Therapists Conference
- Palliative Care for People with Learning Disabilities Annual Conference and webinars
- Public Health Palliative Care International webinar for World Compassionate Communities Day
- 4th Learning Disability Symposium
- Rennie Grove Hospice Annual Conference
- Institute of Health and Social Care Management Annual Conference
- Hospice UK Annual Conference
- South- West Palliative and End of Life Care strategic clinical network
- Speak for Me podcast

## Publications and writing for publication have been published or submitted to:

- Hospice UK Equality in hospice and end of life care: challenges and change report
- Public Health Palliative Care International Newsletter
- Feature in Care Management Matters about the Health and Care Bill, amendments and the impact in the commissioning of specialist palliative care
- Paper submitted to Palliative Medicine Journal
- Co-authored book chapter for the Handbook of Palliative Care 4th edition
- NHS England/ Improvement

## Research

### • The Victoria & Stuart Project-funded by the National Institute of Health Research (NIHR)

The Mary Stevens Hospice are co-applicants of a two-year study aimed at improving end-of-life care planning for people with learning disabilities led by Kingston University and St George's, University of London. The project team includes

Open University, The Mary Stevens Hospice, Voluntary Organisations Disability Group, and Dimensions and MacIntyre.

### • No Barriers Here© ICER

The project includes a qualitative research study led by Dr Jed Jerwood and Gemma Allen funded by NHS Charities Together.

### • PEOLC A Forum for Researchers and people from ethnic and diverse backgrounds

## Education

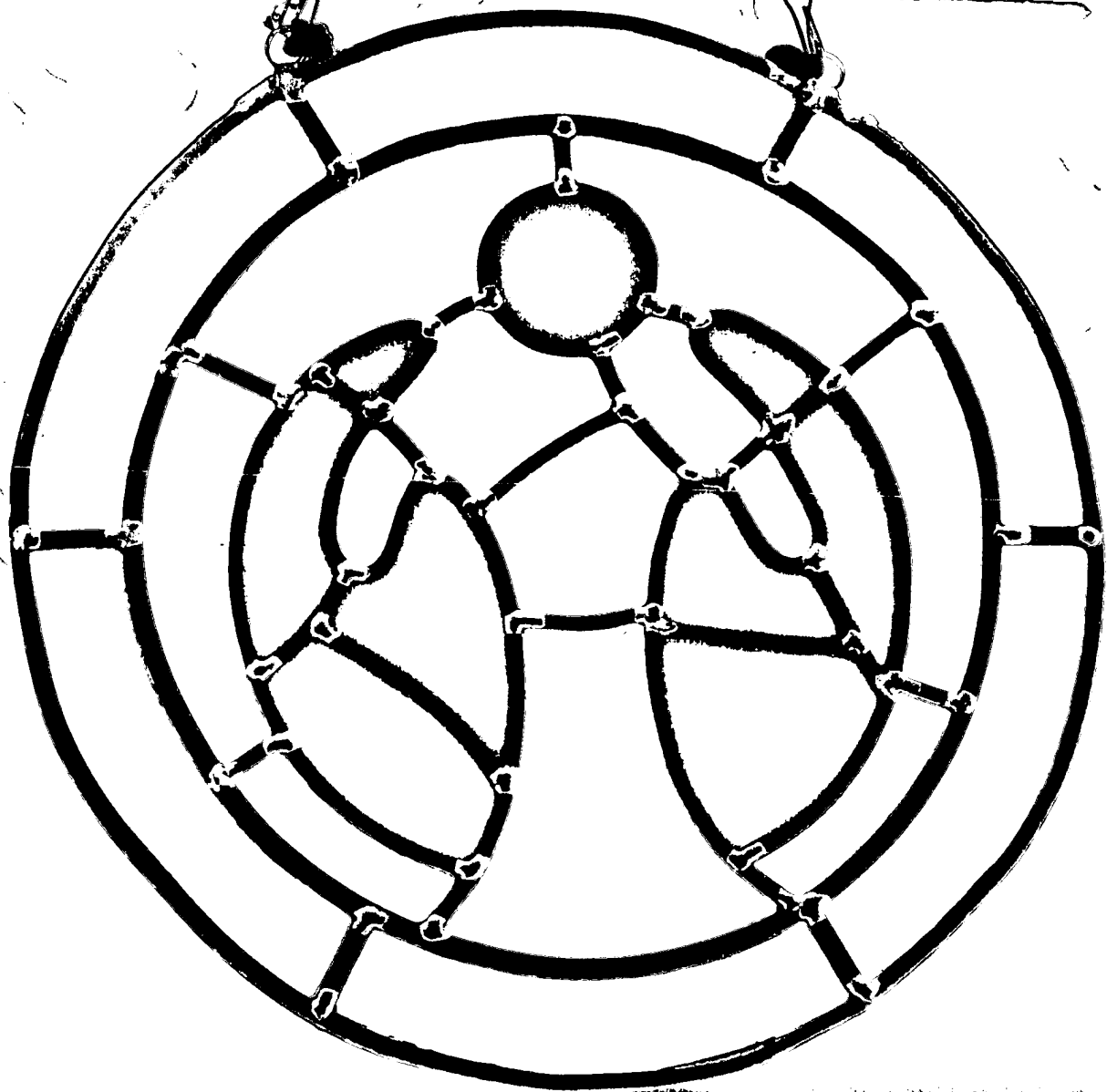
Education has aligned alongside No Barriers Here© with people with learning disabilities and the facilitator training programme during this time, developed and delivered by the Palliative Care Inclusion and Community Partnerships Lead.

Over 200 health care professionals received training around palliative care and people with learning disabilities which included:

- Health concerns and inequalities
- Talking about death and dying with people with learning disabilities
- Palliative and end of life care
- Making reasonable adjustment
- Advance care planning
- Loss, grief and bereavement

The No Barriers Here© facilitator training programme has been commissioned for bespoke delivery across several ICS places in England as well as individual organisation bookings at The Mary Stevens Hospice. Additional education to be delivered in the coming year includes No Barriers Here© ICER and HOPE project.





Leaded Stained Glass Hospice Logo  
Ken Cowley

## Bereavement Service

April 2021 to March 2022

### Summary

Over the past year, more than 150 people have accessed support from our service, whether via individual Supportive Listening sessions, group Hub events, counselling and psychotherapy, legacy work, the Community Companions service or over the phone via the Information Line.

Within our service, our team of 12 staff and volunteers have completed over 350 hours of direct support across the various projects.

Post-covid, it has been important to us to reach out again to local and national organisations and we have newly opened our doors to bereaved individuals in the community whilst continuing to support those whose loved ones have been looked after in the hospice.

We currently reach our beneficiaries via direct and in-house referrals, as well as external links such as GP surgeries and social prescribing teams.

In the early months, the staff team took time to visit a nearby hospice in order to make links and learn from their practice.

We also joined a Patient and Public Involvement research group at the University of Wolverhampton researching Continuing Bonds of connection between the bereaved and the deceased.

As part of our membership of Hospice UK we joined their Bereavement Echo Project which supported peer learning and development between bereavement experts and services.

Locally, we continued to be represented in the Bereavement Matters in Dudley network via online meetings rather than in person (due to the impact of the pandemic) and contributed to the Dying Matters group by engaging in awareness raising activities during Dying Matters week.

Additionally, we contributed to events such as the Tree of Light, National Reflection Day, Grief Awareness Week and via individual invitations

including providing a display at a place of worship and presenting at a local hospital.

### Our Volunteers

As a volunteer-driven service we are lucky to have a team of nine people who have been active in our Supportive Listening project, Information Point and the monthly Hub programme.



Providing them with regular supervision and top-up training as well as pausing to appreciate and celebrate the immense value of their support, is a key element of our service.

Volunteers attended internal and external training relevant to their role. This included hub facilitation training, suicide awareness, data protection, community companions training, mental health awareness and communicating in difficult situations.

**“Helping a person through their grief and supporting them to reinvest in their life can be very rewarding”**



## Our Service

### Supportive Listening

Our supportive listening service provides free face-to-face and/or telephone support sessions on an individual basis. This allows visitors to the service the opportunity to share their story with a carefully selected and trained volunteer.

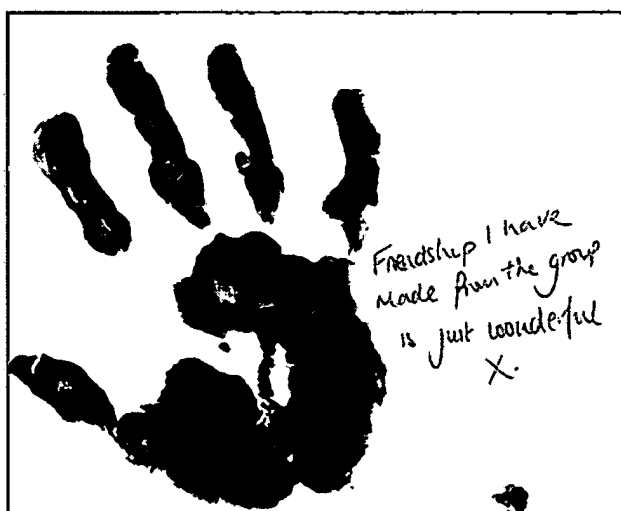
Between April 2021 and March 2022, staff and volunteers carried out 154 hours of supportive listening for 42 people who were bereaved and struggling to manage.

### Bereavement Hub

Our group drop-in sessions give participants the opportunity to meet others who have lost someone close to them. Offering a welcoming environment, this provision supports participants irrespective of how long they have been bereaved.

The hub has seen a total of 127 visits over the year, with many coming back to complete the full 6 sessions, whilst others dipping in or out according to need. The group size increased from around 10 participants per session to around 16 or more each month. In total we supported over 25 people some repeatedly over the 6 months.

Consultation with hub attendees on themes they would like to see at future hubs fed into the development of a hub facilitator training. The training was run in the new year and enabled volunteers to facilitate the current 6 monthly rotating programme which includes a signposting element with literature and short presentations from external organisations.

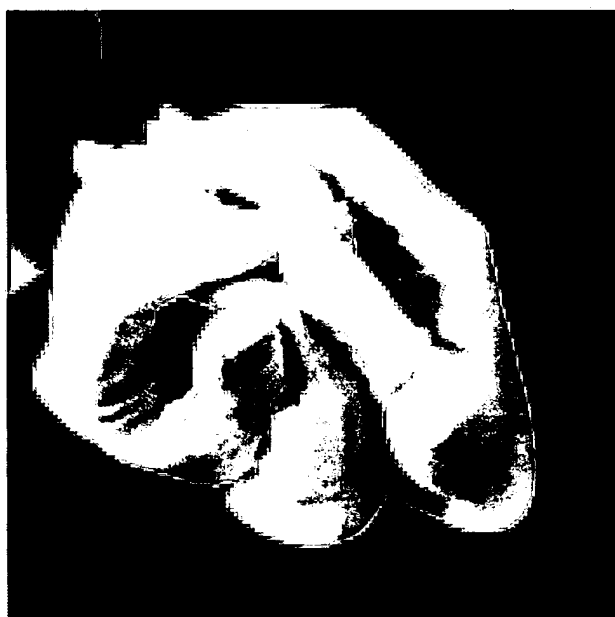


We have received positive feedback from the participants regarding the new structure and the importance of this provision in assisting them on their bereavement journey.

### Legacy

Our pre-bereavement and legacy work is offered to patients, carers, friends and families to enable them to have tangible reminders of their loved ones and the relationship they shared. We offer a variety of options including handprints, treasure boxes for keepsakes and photos; hand-castings, jewellery, teddies, audio and video messages, letters and cards.

We restarted our legacy service for patients,



their carers, and families once lockdown started to ease and hospice regulations allowed us to. Overall we were able to support over 30 people through different means, sometimes in the home and otherwise on the ward or in day unit. We also developed and ran a legacy training for health care professionals on IPU which was well received.

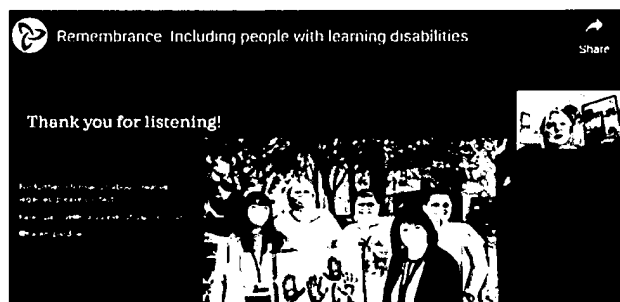
**“Very relaxed and inclusive, learnt a lot. I felt very supported throughout.”**

**“The training was very interesting and useful.”**

One of Bereavement Service Co-ordinators began

linking with a network supporting people with learning disabilities and contributed to a webinar with a section on legacy.

## Bereavement Information Point



In response to feedback from the shop floor that bereaved customers would often ask for information on support.

We piloted a project offering information and signposting once a month from the café area of our High Street shop in Stourbridge.

Building on the experience of the pilot, plans were then developed for later in the year to make it a permanent display feature available as and when customers need it rather than just once a month.



## Telephone Information Line

Our telephone information line offers timely, practical and compassionate information and signposting related to hospice support. The telephone information line is available over 7 days a week between the hours of 8am-4pm.

The service was able to assist callers with signposting and support related to end of life, hospice information and bereavement in more than 30 calls to the Information Line.

## Supporting staff and other professionals



In response to the strain put on staff during covid, as well as the impact of bereavement related to their loved ones, our department put on five monthly wellbeing sessions specifically for employees of the hospice active in the support of patients and families.

We also became involved, via the Bereavement Services Manager, in the new Wellbeing Forum set up within the hospice to input on hospice wellbeing strategy and actions. We began discussions with some of our network partners to host externally run Reflective Sessions for Funeral and Bereavement Professionals at our venue.

## Community Companions

The Community Volunteer Service sat within the bereavement service from March 2021 until recently. During this time the volunteers were stood down due to Covid. Work continued to review the service and more recently the name was changed to Community Companions.

All the existing paperwork was reviewed and updated. In October 2021 volunteers were invited to meet with the new team and to be updated with the changes regarding Covid guidelines. The training content was rewritten and was rolled out in February 2022 to around 20 of the existing volunteers. The project started up toward the

end of the reporting period and initially involved 4 volunteers offering 39 hours of support to 5 service users.

## Counselling and therapy

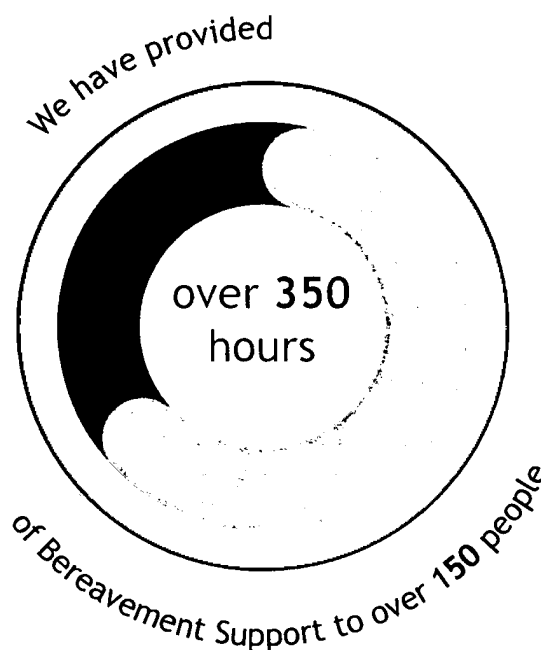


Our in-house therapist and external counsellor completed 103 hours of support for clients who struggle with mental health as well as bereavement. We continued to make referrals from our service to the hospice complementary therapies team in Day Unit as and when where required.

## Children and Young people

Counselling, legacy work and pre-bereavement support was completed with children and young people as well as adults, and we continued to liaise with the Children and Young People's subgroup of Dudley Bereavement Matters network regarding provision for schools. Discussions included looking at a potential move to online support from the jointly-run training for schools that had been offered before the pandemic.

Internally, we began to make plans for a Bereavement Co-ordinator role that could increase our offer within the service.



**"I can't thank her enough for all the help, kindness and support given when it was needed most."**

**"The service was first class."**

**Phone support, one-to-one massage treatments all helped to make me feel alive and human again."**

## Key achievements from education perspective

March 2021 to April 2022

### Palliative Care Champions Training

Along with our existing bespoke Palliative and End of life champions training Days

- Symptom Control at end of life
- Non-malignancy at end of life and palliative care emergencies
- Communication and advance care planning
- Psychological and spiritual care at end of life
- Loss grief and bereavement

The education team have been joined by an experienced lecturer from Wolverhampton University to develop further study sessions - Redefining Palliative and end of life care, Care in the last few Months, weeks, days and hours, The importance of planning ahead.

These study days along with a competency folder are available to hospice staff, acute trust staff Community staff and care home teams. To date over 200 staff have successfully completed this course.

### Nursing and management Competencies

Role specific care and management competencies are important to provide documentary evidence that our organization is developing the nursing team and ensuring high standards of care are being provided for the people we look after. These documents offer proof to the Care Quality Commission (CQC) that we are Safe, Effective, Caring, Responsive and Well lead. The education team support staff to work through these documents in their own timeframe.

### Revalidation

As a professional requirement from the Nursing and Midwifery Council (NMC), every registered nurse must provide proof of revalidation. The education team provide support for staff to complete these requirements and are closely involved with two of the specific elements- Reflective discussion of five pieces of reflection

on their practice, linking these closely to The Code and Confirmation that they have achieved all the mandated requirements. During their first revalidation staff felt worried and felt unsure of the process, some staff even took the step to give up their professional registration but the education team supported and guided staff through the process and now entering the second wave of revalidation they feel much more confident and can now also see the importance of these professional requirements.

From May 2020 the education team, in close working relation to the Project Lead for the ReSPECT in Dudley have been a key part of the implementation group for the ReSPECT process across the whole of the Black Country Health economy- Acute Trust, Community and Primary care and all care homes.

### What is ReSPECT?



ReSPECT is a national initiative to deliver best ethical and legal practice around treatment and escalation of care in an emergency and decisions around Do Not Attempt Cardio-Pulmonary Resuscitation (DNACPR)

ReSPECT is a process where you and the healthcare team talk together and work out a personalised plan for potential future emergency treatment - to ensure that you receive the best possible treatment for your individual situation.

This is Joe's Journey  
<https://youtu.be/SdkncGjihG0> -(6min 25sec)

## Training

The education team has delivered 38, 1-hour webinars - 3 face-to-face sessions - 7 Promotional days - Walkabouts across Acute Trust reaching in excess of 600 staff with other staff accessing e-learning modules or ReSPECT process.org resources or completing their own training. With plans into December to deliver 6 further webinars.

## Resources

National e-learning modules, Information videos for Staff, patients and carers, Information for Patients and carers in many formats (Easy read guides) and other languages are being developed.



### What is Gold Standards framework

GSF is a practical systematic, evidence-based approach to optimizing care for all people nearing the end of life, given by generalist front-line care providers. GSF is all about quality care - quality improvement with training, quality assurance with standards of care and quality recognition with recognised accreditation.

The Hospice and the education team are working closely with Dudley Clinical Commissioning Group (CCG) to support several Care homes in Dudley to achieve GSF accreditation, by practical support to work through the processes at the home and by developing study days for care home managers and staff. These study days have been delivered in partnership with the Enhanced care home team from Dudley's Clinical hub.



Notice distress, listen carefully, respond helpfully

## SAGE & THYME

The education team have been commissioned by Health Education England to deliver a minimum of 24 licensed SAGE & THYME communication workshops-" Notice distress, listen carefully

and respond helpfully" During the pandemic we developed an online version with the national team so we could if needed deliver them in a COVID secure way. We have to date delivered 12 of the commissioned sessions with very positive written feedback from delegates- "Excellent training. I have gained so much knowledge and skills to take away" and "Wish I'd have known about this training years ago, it would have really helped with my previous community nursing role"

## First Aid at work

Our organization was previously buying in an accredited First aid at work trainer to train staff and re-new their certificate every 2-3 years. The education department now has a fully accredited First aid at work trainer to make this ongoing training less costly and more efficient for us.

## Paramedic Training

The education team have been involved in providing End of life training for a pioneering role development program for Paramedics that have been employed within GP surgeries to help speed up appropriate commencement of treatment and ensure people receive treatment where they want it.

Fran Aldridge, Dudley Integrated Health and Care (DIHC) evaluated the day:-"Excellent relevant content that has improved my understanding and confidence around palliative care"

## Collaborative working

The education team attended a collaboration of Midlands Hospice educators/managers to look at what we do now, how we can collaborate in the future, shared resources and what might that look like moving forward.

The education department has hosted several events for Hereford and Worcester Palliative care specialist registrars and Hospice UK.

## **Carers Support**

Following discussions at Social Worker carers group, several bespoke education sessions were developed for carers- People handling, Emergency First aid and care at end of life. Verbal feedback from these on the day was very positive:

**“I have learned more today than 2 years of Occupational and physiotherapy input”**

**“I wish I had known this at the beginning of their illness”**

## **Student Support**

The education team have been providing placements and supporting a number of healthcare students

- Nursing students from Birmingham City University and Wolverhampton University
- Physicians Associate Trainees
- 3rd year medical students
- Social worker students
- Access to nursing students

## **Medical involvement**

As part of their role, the hospice medical team have developed several teaching sessions on medical conditions that commonly access hospice support:

- Chronic obstructive pulmonary disease
- Heart failure
- Lung malignancies
- Primary brain tumours and metastases

## **Mental Health First Aid**

The education department has worked closely with Stellar Mind to provide Mental health first aid training for Mary Stevens Hospice staff and the wider community. We have also been involved in developing a video to highlight the importance of Mental Health First aid.







## Social Work

April 2021 - March 2022

There were 147 referrals received by the hospice social work department during this period.

119 families received individual support from the social work department, 40 carers received one to one support from the social worker. 53 home visits were made. Safeguarding referrals raised coming out of the lockdown period. 34 statutory assessments were carried out.

### Groupwork

10 - 12 people attended the neuro-group in the Day Unit to support them with skills, education and information giving for different neuro-conditions. During the neuro-group a patient informed us that she wishes she could educate the professionals and community about her long-term condition, Parkinson's Disease. We decided to open it up to the rest of the people who attends the Day Unit. We had an overwhelming response and produced an audio-visual in conjunction with a videographer on International Social Worker Day 2022. It is available on the Mary Stevens Hospice Facebook. This project has been nominated for a social work award nationally.



The monthly carers group was well attended (15 - 20 carers per group), supporting carers coming out of lockdown. On recommendation of a carer who attends the carers group we started

a what's app group for carers to support each other when they are not at the hospice. This is very successful.

Men's and women's groups are well attended. (15 - 20 people per group). We have arranged a fashion show with patients and families, as well as the retail department of the hospice. This was a very big success. Patients, families, and staff participated in the modelling of different clothes from different hospice shops. We started functional groups trying out woodwork, pottery, and flower decorations.



### Community work

The Social Work Department was nominated for the CVS Kindness award 2021 and was Highly recommended.

The social worker continues to be the co-presentative from the APCSW in the West Midlands. We arranged a week online national conference focussing on palliative care social work in the UK.



## Social work student placements

The social work department has now successfully provided 6 month placements to undergraduate- and masters students at the hospice. The different aspects of the hospice provide an ideal social work student hub for all students. It would be ideal to develop this further in the future. Our social work students have done well on placement. Two students received a 1:2 (B) on placement. One student also received a 2:2 during her secondary studies and after her placement at Mary Stevens Hospice she ended with a 2:1.



## Feedback for the Social Work Department

**"I would like to officially thank you for the help you kindly gave me with a patient in the IPU. You went the extra mile, and following your intervention, you helped to relieve the stress and tension I was feeling at that time. In so promptly gaining a solicitor to draw up the patient's Will, you not only reduced the pressure on me, but you also helped my family at this very difficult time. I am so incredibly grateful for your specialist service - it made a world of difference. Thank you again."** ~ *Family member of patient in IPU*

**"The social worker went out of her way to support my dad in the IPU, and we would not be able to do it without her support."** ~ *Daughter of Sheikh patient in IPU*

**"I have been very anxious and isolated before I came to Mary Stevens Hospice. Since I attended the neuro-group I met new people and has learnt a lot. The social worker arranged for me to be referred to a consultant through my GP surgery and arranged a package of care."** ~ *Person with lived experience, attending Day Unit.*

**"The social worker has been very proactive especially during the lockdown period. She was the only professional we saw during that period."** ~ *Patient in the community.*

## Spiritual Care

April 2021 - March 2022

### Spiritual Care Team

- Changes in Day Services (see below) had a major impact on the work of our Spiritual Care Volunteers. Many used to come alongside patients weekly and lead the popular Midday Prayers.
- In the Autumn we hosted a lunch for all these volunteers to thank them for their service. This also provided an opportunity to explore new possibilities.
- Our Volunteer Services Coordinator joined us for part of the meeting, outlining developments within the PAFSS Team - not least in relation to Bereavement Support.
- The time together concluded with a shared reflection. Almost all found the overall experience very helpful and have 'moved on' - one way or another.
- Two Volunteers (now called Volunteer Chaplains) resumed visits to the In-Patient Unit. Their support for patients, families, and members of staff has been gratefully received.

### Day Services Unit

- The DSU Team reflected during the Covid pandemic on what they/ we provide for patients and carers. They have since developed a dynamic range of opportunities.
- I now lead regular group sessions on Spiritual Care, which have been well-received. These have sometimes led to further conversations and also funeral requests.
- Similar material proved effective in training days with the tranche of new volunteers.
- I have also used the resource with a patient support group at the Whitehouse in Dudley.

### In Patient Unit

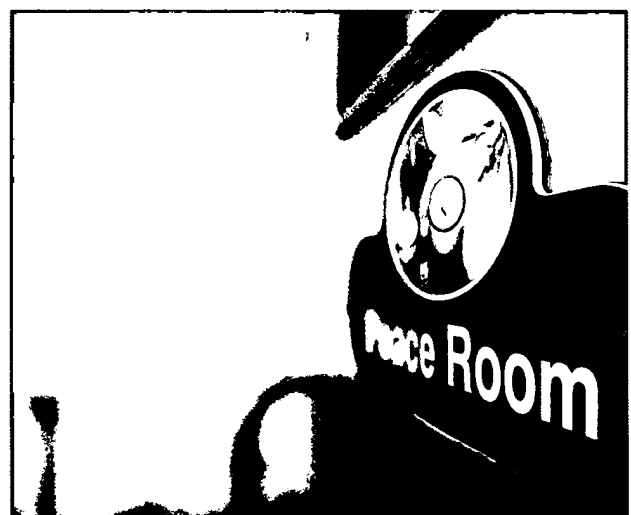
- I aim to meet each patient and members of their family, offering whatever help is

appropriate and making referrals as required. Likewise providing support for colleagues.

- The Volunteer Chaplains and I maintain close contact and have developed a simple, effective and confidential way of updating one another on our work.
- We are glad to welcome fourth year medical students for a day's experience on a regular basis. I now offer them a short session on Spiritual Care - something barely mentioned in their training.

### Bereavement Support

- It has been good to work more closely with our Bereavement Team. This included helping them with the Day of Reflection (23rd March), leading times of shared reflection.
- We hope to provide more interactive opportunities of this kind in future.
- We are also liaising more frequently on the support offered to individuals and families.
- I update a list of those who have died every 1-2 weeks, displayed in both Peace Rooms.
- Arrangements are also made for our Book of Remembrance to be viewed by family members.



- During the year I was honoured to conduct 13 funeral services on behalf of the hospice.
- Whenever possible, funeral service booklets are uploaded to SharePoint for staff to view.

## 30th Anniversary Celebration

- 70-80 people attended this event at St Mary's Church, Oldswinford, which replaced the traditional Midsummer service in 2021.
- Alongside music and poetry, we shared news about the hospice and were treated to an inspiring address from one of our new Trustees on the importance of hospice care.
- Those present lit candles in memory of their loved ones.
- Volunteers representing different spiritualities concluded the event with their blessings.

## Tree of Light

- 350-400 people attended our Tree of Light event at the hospice, with some 80-90 joining in the same programme of readings, music and candle-lighting at St Mary's Church, Oldswinford a few days later.
- Our Fundraising Team, together with the Director of Operations & Support, organized replacement lights for our iconic tree.



## Christmas Concert

- Ongoing concerns about Covid made organizing this fund-raising event complicated.

- Nevertheless, over 90 people paid to enjoy an evening of Christmas music on 16th December at St Mary's Church, Oldswinford - which provided excellent acoustics.
- The programme included carol-singing for all, an award-winning brass band, choir and soloists.

## Wassail!

- 35-40 staff and volunteers enjoyed a memorable (and dry!) evening in February, as we 'wassailed' our iconic Tree of Light for the third year in a row.
- Once again guided by our Pagan Adviser, blessings that reflected different spiritual paths were conferred on both tree and hospice.
- Refreshments were served from the Education Centre, while those present enjoyed live music.

## Hospice Choir

- Following the Covid pandemic, I was asked to bring the largely volunteer hospice choir together for the Summer Fayre on 4th September.
- Around this time, we were delighted to welcome a new volunteer with exceptional musical skills and infectious enthusiasm as our leader.

## Networking

- As part of my role, I am continuing to co-ordinate the Midlands Group of the Association of Hospice & Palliative Care Chaplains. We have over 40 people on the mailing list, from Grimsby to Milton Keynes and Shrewsbury to Leicester!
- AHPCC offers support and insights into best practice.
- Most meetings have been held via Zoom but we managed a 'hybrid' in October, when a small group gathered at Mary Stevens Hospice.
- During the year two local Anglican priests joined me for a week's placement. The first was exploring chaplaincy during her sabbatical; the second completing her curacy in a pioneering 'resource' church who has a particular interest in hospices.

# Fundraising

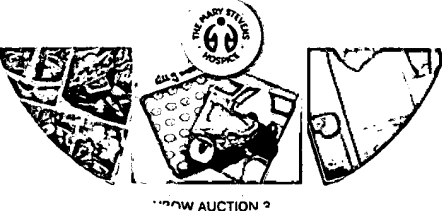
April 2021 - March 2022

2021 - 2022



## Rainbow Auction

Revenue £3,247.83  
Corporate Sponsorship £0  
Gross £3,247.83  
Expenditure £0



Mary Stevens Hospital  
Rainbow Auction

SEPTEMBER 2021



## Summer Fayre

Amount raised: £17,278.61  
Event £15,885.50  
Corporate Sponsorship £3,000  
Gross £18,885.50  
Expenditure £1606.89

SUMMER 2021



## Ice Cream Parlour

Amount raised: £6,027.25  
Event £5,526.56  
Corporate Sponsorship £1,000  
Gross £6,526.56  
Expenditure £499.31

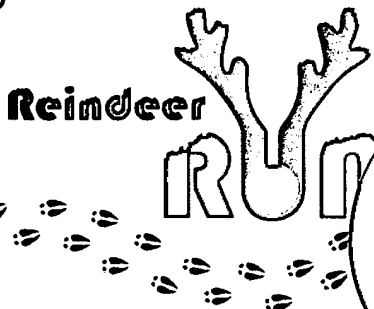
NOVEMBER 2021



## Tree of Light

Amount raised: £11,436.13  
Event £11,260.86  
Corporate Sponsorship £1,000  
Gross £12,260.86  
Expenditure £824.73

NOVEMBER AND DECEMBER 2021



## Reindeer Run

Amount raised: £15,417.99  
Event £12,004.47  
Corporate Sponsorship: £5,000  
Gross £17,004.47  
Expenditure £1,886.48

## Corporate fundraising engagement

Coventry Building Society  
Squire Patton Boggs  
Vantage 365  
Ian Perks Estate Agents  
S&R Construction  
Bob Richardson Tools  
Gravity Risk - ongoing  
Brandenburg - ongoing  
Horderns Removals  
Metro bank  
Masstemp  
Stourbridge Rotary

**MAY AND NOVEMBER 2021**



The Mary Stevens Hospice  
**Make a Will Month**

**Make a Will Month**

Amount raised: £5,235.00  
Event £5,235.00  
Corporate Sponsorship £0  
Gross £5,235.00  
Expenditure £0

**DECEMBER 2021**



**Santa Jog**

Amount raised: £9,922.84  
Event £9,726.56  
Corporate Sponsorship £1,000  
Gross £10,726.14  
Expenditure £803.72

**Christmas Coffee Morning**

Amount raised: £1,481.20  
Event £1,481.20  
Corporate Sponsorship £0  
Gross £1,481.20  
Expenditure £0

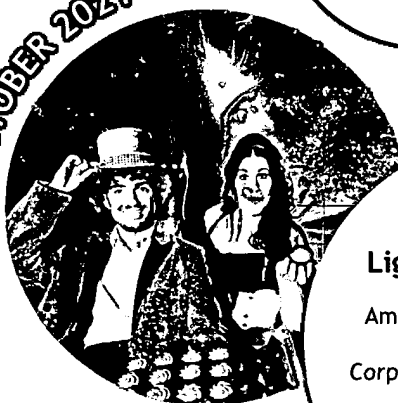
**Santa Trail**

Amount raised: £5,443.13  
Event £5,456.24  
Corporate Sponsorship £500  
Gross £5,956.24  
Expenditure £513.11

**Festive Fiddle**

Amount raised: £3,587.78  
Event £3,748.78  
Corporate Sponsorship £750  
Gross £4,498.78  
Expenditure £911.00

**OCTOBER 2021**



**Light the Night Walk**

Amount raised: £11,436.13  
Event £10,260.86  
Corporate Sponsorship £2,000  
Gross £12,260.86  
Expenditure £824.73

**Treecycle**

Amount raised: £22,656.19  
+ £5,795.75 in GiftAid  
Event £22,857.10  
Corporate Sponsorship £2,500  
Gross £25,357.10  
Expenditure £2,700.91

**JANUARY 2022**



**FEBRUARY 2022**



**Snow White & the Seven Dwarfs**

Amount raised: £34,000  
Event £58,142.00  
Corporate Sponsorship £6,645  
Gross £64,787.00  
Expenditure £30,787.00

# Snow White and the Seven Dwarfs Pantomime

February 2022



## Corporate support:

PRG UK | Brookes Forgings | Horderns Removals | Alloy Wire International | The Lee, Shaw Partnership  
McDonalds, Stourbridge | Black Country Audio | Burnt Toast SFX | Snow Business UK  
Mac-Dec Productions | UK Productions | Imagine Theatre





## **Estates & Facilities**

**April 2021 - March 2022**

The Estates & Facilities team continue to maintain, improve and enhance the overall infrastructure of the Hospice with a small team responsible for general maintenance, feeding, cleaning and laundry.

In this period we have continued to improve some of the infrastructure to those that we support and enhanced the ambience of the hospice outside area.

Projects have included:

### **Laundry**

The equipment used in our laundry was inefficient, costly to maintain and was in much need of replacement. After seeking various options we replaced all the equipment in the laundry with industrial standard washers and dryers. The equipment now in use is more energy efficient and requires less maintenance.

### **Tree of Light**

The Tree of Light is the large tree in our grounds that is covered in lights that individuals can sponsor in memory of their loved ones. With the assistance of staff from Dudley Metropolitan

Borough Council we stripped the tree of the old lights, which were beginning to look tired and hung new lights. When the tree was lit for the first time at our Tree of Light Ceremony in November 2021 the reward to everyone attending was palpable. With staff, volunteers, loved ones and their families present, the gasp from the crowd was evidence enough to know we had been successful in enhancing a very special tree.

### **Air Conditioning**

With climate change and the comfort of those we care for very much at the forefront of our minds, in December 2021 we had air-conditioning fitted to each of the ten patient rooms in our In-Patient Unit (IPU). This much-needed enhancement will benefit all our IPU patients as climate change continues to show its effects.

### **Hospice Garden**

The Hospice garden has always been a great place for patients, visitors and our staff to sit in to enjoy some peace, quiet and tranquillity. The Estates Team took it upon themselves to improve what was already a lovely area and spent weeks creating a fishpond and stream in the garden. This allows everyone to not only enjoy the view



but also gain from the therapeutic benefits of listening to flowing water, which evidence has shown can help reduce stress significantly.

## Staff Health & Wellbeing

Our top priority will always be to our patients and their loves ones, but without the excellent staff we have to support them that level of care would not be possible. In this period we have continued to take vital steps to improve the Health & Wellbeing of our very loyal workforce by introducing a number of initiatives.

These have included:

- The formation of the MSH Health & Wellbeing Steering Group.
- Committing ourselves to following through on the West Midlands Combined Authority (WMCA) Thrive at Work Scheme.
- Training a number of staff to be Mental Health First Aiders.
- The introduction of a much enhanced Employee Assistance Programme (EAP).
- Completion of a Health Needs Analysis, which was completed by just over 75% of our workforce. This gave us a good indication on areas we need to target in the coming period.

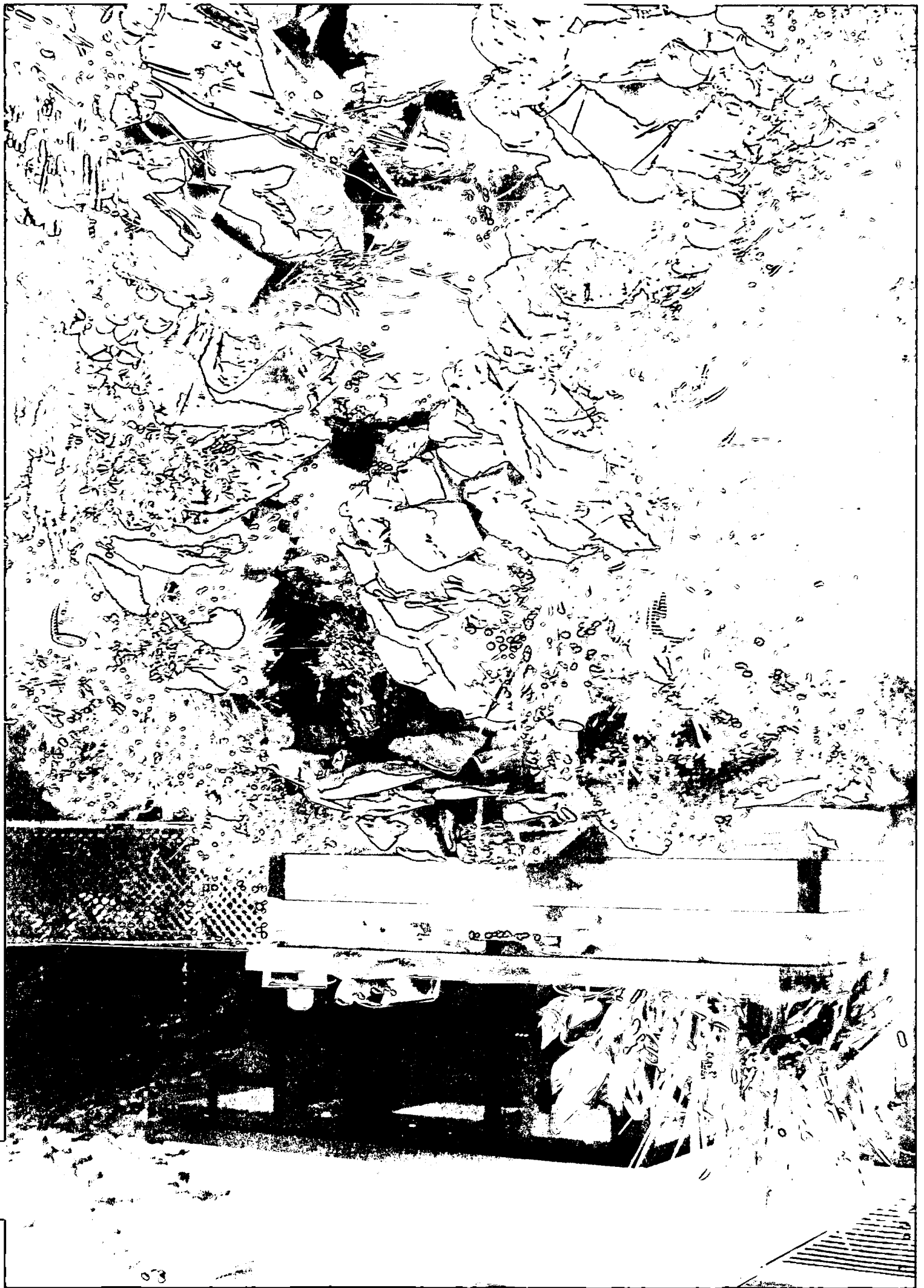
Our aim is to not only improve the Health & Wellbeing of our current staff, but also to be seen as an employer of choice in order to attract new staff to the Hospice.

## Cyber/Data Security

We hold a lot of personal data for those we care for, those that support us and our staff/ volunteers, so it is vital that we take active steps to continually maintain and enhance our cyber resilience. For the second year running we have attained Cyber Essentials Plus accreditation, the highest level of certification offered under the Government backed Cyber Essentials scheme. We have also successfully completed the NHS Data Security and Protection Toolkit where we were classed as exceeding the expected standards.

These accreditations demonstrate our commitment to data protection and cyber security. Our plan for the year ahead is to continue with further enhancements to our security by introducing Multi Factor Authentication; this not only enhances security but also will improve the accessibility of information to those that need it, when they need it and where they need it.





## Trading Report

April 2021 to March 2022

Our first full year (almost) of being open for business after Covid, started with the unknown. Would we actually trade all year, how would our donors, customers and volunteers feel about life trying to return to 'normal', even the definition of normal was open to interpretation! But open we remained, slowly a rhythm of life returned. Covid has never gone away; something we are very aware of, and wary of in Trading.

### The Year

Our start was excellent, for a week, then we crashed! It was a very difficult year to judge, with business being all peaks and troughs, a sure sign of variable footfall, as people had differing priorities through their year. But we developed, and grew, so that by year end we had exceeded expectation achieving +41% against our budget. A remarkable outcome that was only achieved through dedication and teamwork from all the Trading Team.

### Zero to Landfill 2025



This project started in 2019, as part of my 100 Day Review and subsequent Five-Year Plan, work has not been hindered by Covid, delayed yes. With the implementation of central sorting in our Distribution Centre, this a real sea changer, enabling us to define the pathway for end life products.

We now recycle all cardboard, wood, ceramics, metal, plastics (that can be recycled in the UK) DVDs, CDs, failed electrical items. Of course, all

the products we sell in our shops are pre-loved, so they are being given a second or third life, being saved from a worse fate!

All this amounts to having reduced our landfill by 80%, a fantastic achievement! However as with all things, the last 20% will now be the real challenge.



### Christmas

Christmas for 21/22 had perhaps more of a meaning for many after the pandemic, a time to remember, but also a time for hope.

We introduced a new calendar in A4 format, with wonderful pictures of Shropshire and nature. Our cards were all new images and additional local scenes, the diaries had a whole new look and format with great colours, so much so all sold out in entirety.

Thank you to all our customers and donors who made 21/22 a success for Trading, and so enabled us to contribute to the great work that our hospice does in the Borough of Dudley.



## Structure, Governance and Management

### Governing Document

The Mary Stevens Hospice Limited is a registered charity, number 517656 and is a company limited by guarantee governed by its Memorandum and Articles of Association dated 4 March 1986, as amended up to 2018. As outlined in our Articles of Incorporation, Mary Stevens Hospice exists first and foremost to promote welfare and relief of suffering so far as such purpose is charitable.

### Recruitment and appointment of new Trustees

Diversity considerations have been focussed upon at Governance Committee and Main Board. Current policy includes advertising to recruit diverse interest in serving on the Board moving forward. Both Chair and CEO may be approached to discuss the role and responsibilities, and an induction programme is provided after interview.

### Organisational Structure

The Hospice is governed by the Directors who form the Board of Trustees. The Directors are volunteers who have or have had careers in a wide variety of business and professional activities. They usually come from the Dudley Metropolitan Borough and its surrounding districts. All elected Directors are also Trustees; the names of the Directors are listed below. Two councillors are nominated by Dudley Metropolitan Borough Council to serve as Directors/Trustees. All nominees are subject to ratification by the Board of Trustees. The Charity is organised so that the Board of Directors of the Company meet regularly, with governance subcommittees (Hospice Governance, Finance & Resources, Clinical Standards, Fundraising Governance and Remuneration) reporting to it, whilst individual directors liaise with senior leadership on a regular basis. The CEO and her Senior Leadership Team are responsible to the Board of Directors for the day-to-day running of The Mary Stevens Hospice and the implementation of policies and strategies decided by the Board.

### Statement of Public Benefit

Trustees aim to observe the 2017 3rd edition Charity Governance Code to support continuous improvement in purpose, leadership, integrity, decision making and risk control systems, Board effectiveness, Board diversity and transparent accountability. The charity operates a system of sub committees, each committee being focused on a particular aspect of the charity's operations. That system is frequently reviewed and changes have recently been introduced to the style of main board meetings to improve their effectiveness. The charity's objective and its principal activity is that of providing palliative and end-of-life care for those with progressive incurable life shortening illness. The activities of the Hospice are of benefit to the public generally and the Trustees actively encourage the availability of the services to all members of the public irrespective of race, gender or any other discriminatory factor. That system is frequently reviewed, and changes have been made to the style of Main Board meetings, independent Chairmanship of Lottery and Trading Boards established, and all Governance Committees strengthened in the 19/20 year. The Trustees confirm that they have complied with the duty in section 17 of the Charities Act 2011 to have due regard to public benefit guidance.

## Reference and Administrative Details

**Registered Company Number: 1963989 (ENGLAND & WALES)**

**Registered Charity Number: 517656**

**Charity's Principal Address & Registered Office**

**221 Hagley Road | Oldswinford | Stourbridge | DY8 2JR**

### **Trustees**

Dr E J Flint-Bridgewater

B Coles

N Dace

S Waltho

Cllr K Shakespeare

S Hodgson

Cllr A Lees

P Marsh

J Turner

D Martin

B Blakemore

A Bagnall

There are no corporate Trustees and no Trustees hold title to any property belonging to the Charity.

### **Group Chief Executive**

C Towns BSc (Hons) Palliative Care

### **Matron & Registered Manager**

C Towns BSc (Hons) Palliative Care

### **Our Advisers**

**Auditors:** Crowe U.K. LLP, Black Country House, Rounds Green Road, Oldbury, B69 2DG

**Solicitors:** Higgs & Sons, 3 Waterfront Business Park, Brierley Hill, West Midlands, DY5 1LX  
Wall James Chappell, 15-23 Hagley Road, Stourbridge, West Midlands, DY8 1QW

**Bankers:** NatWest Bank PLC, 141 High Street, Stourbridge, West Midlands, DY8 1BF  
Barclays, 1 Snowhill, Queensway, Birmingham, B4 6GN

**Investment Advisers:** Canaccord Genuity Wealth, Slip House, Princes Drive, Worcester WR1 2AB

## Financial Review

The financial results for the year ended 31 March 2022 are given in the audited Financial Statements attached to this report. Those accounts and the related notes have been prepared in accordance with the relevant law and the Charities SORP (FRS102).

The year's results were again affected by the Covid 19 pandemic. The impact of the pandemic lessened later in the year, but it continued to impede the delivery of our services and the Hospice's various fundraising activities.

The financial result for the year was a break-even position with a surplus on operations of £7,259 being offset by a loss of £7,563 in the value of the Hospice's listed investments. The result for the previous year was a surplus on operations of £202,290 and a gain of £222,829 in relation to the investment portfolio.

The costs of providing patient care were well controlled and fell to £3,004,765 from £3,157,954 in the preceding year. The Covid related Government support received was however greatly reduced. In the year to 31 March 2021 £2,279,387 was received in total in the form of NHS grants, furlough income and rates relief. The total received for the current year was £397,953.

The year saw an important improvement in legacy income, from £342,773 last year to £823,079. Other donations and grants remained similar to the previous year falling by £202 to £631,946 while the amount received from the local Clinical Commissioning Groups rose from £504,039 to £538,032.

The Hospice's retail shops were again impacted by the need for enhanced health and safety measures and the general reduction in high street activity. Sales nevertheless improved to £1,365,126, still below pre-pandemic levels but sufficient to realise a welcome and hard-earned profit of £191,775, compared to a loss of £24,943 in the previous year.

The Lottery company experienced a small decrease in turnover but through improving its operating model succeeded in generating a profit of £265,667, only £1,900 less than the previous year.

The Hospice's group position improved slightly during the year. An increase in cash reserves of £27,863 resulted in cash reserves of £983,511 at the year end. The Hospice also had an investment portfolio at the year end of £1,422,476 (£1,430,044 on 31 March 2021), held in listed securities.

The Hospice continues to face challenges in establishing its long-term viability. The economic turbulence brought about by Russia's war with Ukraine and the consequent increases in energy prices and in general inflation will force the Hospice to confront increased costs while simultaneously putting pressure on its income sources. The level of legacy income continues to show improvement and the retail shops and the lottery are proving resilient but the Hospice's long-term viability will require some improvement in support from the NHS Commissioners. This will depend in part on the Hospice's ability to obtain specialist palliative care status and the increase in collaborative working within the Integrated Care Regime which is currently being established by the NHS. The Hospice continues to forge closer links within the healthcare community to assist in these aims.

The Trustees continue to monitor carefully the resources of the Hospice as its long-term financial viability is their primary concern.



## Reserves Policy

The total funds of the group at the year end were £6,077,000 (2020 £6,078,000) of which £1,198,000 were restricted (2020 £1,158,000). Funds of £3,712,000 (2020 £3,842,000) were designated for specific purposes of a possible Hospice at Home service £200,000 (as last year) and fixed assets, £3,512,000 (2020 £3,642,000) the latter being capable of being realised only by a disposal of fixed assets. Unrestricted free reserves of the group at the year-end were £1,167,000 (2020 £1,077,000).

Reserves are unspent, unrestricted income and are held to assist in the management of the Hospice's cash requirements. This is important as approximately 85% of the Hospice's income is from volatile sources, namely donations, fundraising events and legacies.

Charities hold reserves only to ensure that they can continue to satisfy their charitable aims. The Hospice has sought to have reserves equivalent to 6 months' running costs, and did so on 31 March 2019.

The year to 31 March 2022 saw a small improvement in free reserves to £1,167,000 but insufficient to attain that target.

## Investment Policy

The Trustees have responsibility for the Hospice's investment policy and have delegated the management of the investment portfolio to professional investment advisers. The appointment of the advisers is reviewed at least every 5 years.

The advisers seek to achieve a reliable income, to assist in meeting the continuing costs of running the Hospice, by maintaining a balanced approach between income and capital growth. The advisers are instructed not to invest in assets which could be detrimental to the Hospice's charitable objects and to make no direct investments in tobacco companies.

Following a review of the investment policy with the advisers in 2019 the Trustees moved the risk category from level 6 to level 5 (on a scale that

runs from 1 to 9, with 1 being the most cautious). That move rebalanced the portfolio to include a higher proportion of fixed interest investments so reducing the volatility. On 31 March 2022 approximately 23 % of the fund was invested in debt and fixed interest, 65% in equities and 12% in alternatives, with a small cash balance.

There remains the need to accept some short-term volatility, but the adoption of risk category 5 is still considered appropriate. During the year the fund fell in value from £1,430,000 to £1,422,000 and produced an income yield of approximately 4%.

## Going Concern

We have set out in the Trustees Report a review of the financial performance, risk management policies, the reserves position and other factors likely to affect future development, including the economic uncertainty on income. The impact of covid-19 was central to these assessments. Our Trustees have concluded that with agreed adjustments to our plans along with

ongoing financial risk management, we believe there are no material uncertainties that call into doubt the charity's ability to continue. The financial statements have therefore been prepared on the basis that the charity is a going concern. More information is included in the accounting policies.

## Trustees / Directors Indemnity Policy

Insurance arrangements are in place with AXA Insurance PLC to indemnify Trustees/Directors. The policy number is LS BDX 6985610/0108 and the indemnity limit is £3,000,000. The premium paid was £1,598.63

### Pay & Remuneration

Remuneration of personnel and senior management is approved by the remuneration committee constituted as below. Whilst we are aware of NHS pay scales, we do not at this time offer matched salaries, but a comparable system which is governed by our financial constraints as an independent Hospice.

A 1.5% general pay rise was awarded across the organisation once again in April 2020.

### Membership of the Remuneration Committee

CEO Claire Towns, Peter Marsh (Chair), John Turner (Vice Chair Finance & Resources Committee), Dr Jane Flint Bridgewater.

### Quorum of Meetings

All present for annual meeting to make above decisions and any exceptional individual awards.

### Accountability

To Finance and Resources and Governance Committee and Main Board

## Statement of Trustee Responsibilities

The Trustees (who are also the directors of The Mary Stevens Hospice Limited for the purposes of company law) are responsible for preparing the Report of the Trustees and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Company law requires the Trustees to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements, the Trustees are required to:

- ☒ Select suitable accounting policies and then apply them consistently
- ☒ Observe the methods and principles in the charity SORP
- ☒ Make judgements and estimates that are reasonable and prudent
- ☒ Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in business

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

In so far as the Trustees are aware:

- ☒ There is no relevant audit information of which the charitable company's auditors are unaware
- ☒ 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

Exemptions from disclosure  
Nil.

The Board of Trustees declare that they have approved the Trustees' report incorporating the Directors' Report and the Strategic Report.

Signed on behalf of the charity's Trustees

Signature:

Position:

*Peter Marsh*  
*Chair*

Full Name:

Date:

*PETER MARSH*  
*07/12/22*

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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE MARY STEVENS HOSPICE**

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**Opinion**

We have audited the financial statements of The Mary Stevens Hospice (the 'parent charitable company') and its subsidiaries (the 'group') for the year ended 31 March 2022 which comprise the Consolidated statement of financial activities, the Consolidated balance sheet, the Company balance sheet, the Consolidated statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the Group's and of the parent charitable company's affairs as at 31 March 2022 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.

**Basis for opinion**

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

**Conclusions relating to going concern**

In auditing the financial statements, we have concluded that the Trustee's 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 or the parent charitable company's ability to continue as a going concern for a period of at least twelve months from when the financial statements are authorised for issue.

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

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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE MARY STEVENS HOSPICE**  
**(CONTINUED)**

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**Other information**

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

We have nothing to report in this regard.

**Opinion on other matters prescribed by the Companies Act 2006**

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

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

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

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

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

- 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.

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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE MARY STEVENS HOSPICE**  
**(CONTINUED)**

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**Responsibilities of trustees**

As explained more fully in the Trustee's responsibilities statement, 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:

We obtained an understanding of the legal and regulatory frameworks within which the charitable company operates, focusing on those laws and regulations that have a direct effect on the determination of material amounts and disclosures in the financial statements. The laws and regulations we considered in this context were the Charities Act 2011 together with the Charities SORP (FRS 102) and the Companies Act. We assessed the required compliance with these laws and regulations as part of our audit procedures on the related financial statement items.

In addition, we considered provisions of other laws and regulations that do not have a direct effect on the financial statements but compliance with which might be fundamental to the charitable company's ability to operate or to avoid a material penalty. We also considered the opportunities and incentives that may exist within the charitable company for fraud. The key laws and regulations we considered in this context were CQC regulations, General Data Protection Regulation, health and safety legislation, taxation legislation and employee legislation.

Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any. We identified the greatest risk of material impact on the financial statements from irregularities, including fraud, to be within the timing and completeness of income recognition and the override of controls by management. Our audit procedures to respond to these risks included enquiries of management and the Finance and Audit Committee about their own identification and assessment of the risks of irregularities, sample testing on the posting of journals, designing audit procedures over income, reviewing accounting estimates for biases, reviewing regulatory correspondence with the Charity Commission, and reading minutes of meetings of those charged with governance.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some

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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITOR'S REPORT TO THE MEMBERS OF THE MARY STEVENS HOSPICE**  
**(CONTINUED)**

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material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations (irregularities) is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it. In addition, as with any audit, there remained a higher risk of non-detection of irregularities, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. We are not responsible for preventing non-compliance and cannot be expected to detect non-compliance with all laws and regulations.

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 its members, as a body, for our audit work, for this report, or for the opinions we have formed.

*Kerry Brown*

**Kerry Brown (Senior statutory auditor)**

for and on behalf of

**Crowe U.K. LLP**

Statutory Auditor

Black Country House

Rounds Green Road

Oldbury

West Midlands

B69 2DG

Date: 15 December 2022

**THE MARY STEVENS HOSPICE**  
(A company limited by guarantee)

**CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND  
EXPENDITURE ACCOUNT)  
FOR THE YEAR ENDED 31 MARCH 2022**

	Note	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £	Total funds 2021 £
<b>Income from:</b>					
Donations and legacies	4	1,571,189	281,789	1,852,978	3,254,308
Charitable activities	5	538,032	-	538,032	504,039
Other trading activities	6	2,213,025	-	2,213,025	1,358,603
Investments	7	53,505	-	53,505	53,445
Other income		105,397	-	105,397	40,656
<b>Total income</b>		<b>4,481,148</b>	<b>281,789</b>	<b>4,762,937</b>	<b>5,211,051</b>
<b>Expenditure on:</b>					
Raising funds	8	1,750,913	-	1,750,913	1,850,807
Charitable activities	9	2,762,732	242,033	3,004,765	3,157,954
<b>Total expenditure</b>		<b>4,513,645</b>	<b>242,033</b>	<b>4,755,678</b>	<b>5,008,761</b>
<b>Net (expenditure)/income before net (losses)/gains on investments</b>		<b>(32,497)</b>	<b>39,756</b>	<b>7,259</b>	<b>202,290</b>
Net (losses)/gains on investments		(7,568)	-	(7,568)	222,829
<b>Net movement in funds</b>		<b>(40,065)</b>	<b>39,756</b>	<b>(309)</b>	<b>425,119</b>
<b>Reconciliation of funds:</b>					
Total funds brought forward		4,919,517	1,158,219	6,077,736	5,652,617
Net movement in funds		(40,065)	39,756	(309)	425,119
<b>Total funds carried forward</b>		<b>4,879,452</b>	<b>1,197,975</b>	<b>6,077,427</b>	<b>6,077,736</b>

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

The notes on pages 52 to 76 form part of these financial statements.



**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**  
**REGISTERED NUMBER: 1963989**

**CONSOLIDATED BALANCE SHEET**  
**AS AT 31 MARCH 2022**

	Note	2022 £	2021 £
<b>Fixed assets</b>			
Tangible assets	14	4,526,815	4,685,706
		<u>4,526,815</u>	<u>4,685,706</u>
<b>Current assets</b>			
Stocks	15	250	4,052
Debtors	16	413,864	376,341
Investments	17	1,422,476	1,430,044
Bank and cash balances		983,511	955,648
		<u>2,820,101</u>	<u>2,766,085</u>
Creditors: amounts falling due within one year	18	(342,179)	(405,554)
<b>Net current assets</b>		<u>2,477,922</u>	<u>2,360,531</u>
<b>Total assets less current liabilities</b>		<u>7,004,737</u>	<u>7,046,237</u>
Creditors: amounts falling due after more than one year	19	(927,310)	(968,501)
<b>Net assets excluding pension asset</b>		<u>6,077,427</u>	<u>6,077,736</u>
<b>Total net assets</b>		<u><u>6,077,427</u></u>	<u><u>6,077,736</u></u>


**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**  
**REGISTERED NUMBER: 1963989**

**CONSOLIDATED BALANCE SHEET (CONTINUED)**  
**AS AT 31 MARCH 2022**

	Note	2022 £	2021 £
<b>Charity funds</b>			
Restricted funds	20	1,197,975	1,158,219
Unrestricted funds			
Designated funds	20	3,712,006	3,842,407
General funds	20	1,167,446	1,077,110
Total unrestricted funds	20	4,879,452	4,919,517
<b>Total funds</b>		<b>6,077,427</b>	<b>6,077,736</b>

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

The financial statements were approved and authorised for issue by the Trustee and signed on their behalf by:

  
**Mr P Marsh**  
Chair of Trustees  
Date:

07/12/22

The notes on pages 52 to 76 form part of these financial statements.

**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**  
**REGISTERED NUMBER: 1963989**

**COMPANY BALANCE SHEET**  
**AS AT 31 MARCH 2022**

	Note	2022 £	2021 £
<b>Fixed assets</b>			
Tangible assets	14	4,471,852	4,610,187
<b>Current assets</b>			
Debtors	16	676,325	628,789
Investments	17	1,422,476	1,430,044
Cash at bank and in hand		613,546	598,061
		<u>2,712,347</u>	<u>2,656,894</u>
Creditors: amounts falling due within one year	18	(221,501)	(248,013)
<b>Net current assets</b>		<u>2,490,846</u>	<u>2,408,881</u>
<b>Total assets less current liabilities</b>		<u>6,962,698</u>	<u>7,019,068</u>
Creditors: amounts falling due after more than one year	19	(889,810)	(921,001)
<b>Total net assets</b>		<u><u>6,072,888</u></u>	<u><u>6,098,067</u></u>

**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**  
**REGISTERED NUMBER: 1963989**

**COMPANY BALANCE SHEET (CONTINUED)**  
**AS AT 31 MARCH 2022**

	Note	2022 £	2021 £
<b>Charity funds</b>			
Restricted funds	20	1,197,975	1,158,219
Unrestricted funds			
Designated funds	20	3,657,043	3,766,888
General funds	20	1,217,870	1,172,960
Total unrestricted funds	20	4,874,913	4,939,848
<b>Total funds</b>		<b>6,072,888</b>	<b>6,098,067</b>

The company's net movement in funds for the year was £(25,179) (2021 - £450,062).

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

The financial statements were approved and authorised for issue by the Trustee and signed on their behalf by:

*Peter Marsh*  
**Mr P Marsh**  
 Chair of Trustees  
 Date:

The notes on pages 52 to 76 form part of these financial statements.

**THE MARY STEVENS HOSPICE**  
(A company limited by guarantee)

**CONSOLIDATED STATEMENT OF CASH FLOWS**  
**FOR THE YEAR ENDED 31 MARCH 2022**

	2022 £	2021 £
<b>Cash flows from operating activities</b>		
Net cash used in operating activities	89,456	234,209
<b>Cash flows from investing activities</b>		
Dividends, interests and rents from investments	53,505	53,445
Profit/loss on disposal of tangible fixed assets	(54)	6,326
Purchase of tangible fixed assets	(81,354)	(52,472)
Disposal of investments	-	150,000
<b>Net cash (used in)/provided by investing activities</b>	<b>(27,903)</b>	<b>157,299</b>
<b>Cash flows from financing activities</b>		
Repayments of borrowing	(33,690)	(15,336)
New loans	-	50,000
<b>Net cash (used in)/provided by financing activities</b>	<b>(33,690)</b>	<b>34,664</b>
<b>Change in cash and cash equivalents in the year</b>	<b>27,863</b>	<b>426,172</b>
Cash and cash equivalents at the beginning of the year	955,648	529,476
<b>Cash and cash equivalents at the end of the year</b>	<b>983,511</b>	<b>955,648</b>

The notes on pages 52 to 76 form part of these financial statements

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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2022**

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**1. General information**

The Mary Stevens Hospice (the Charity) is a Company Limited by Guarantee (registered number 1963989), registered in England and Wales. Its charity registration number is 517656. The registered office and principal place of business is 221 Hagley Road, Oldswinford, Stourbridge, DY8 2JR.

Its principal activities are end of life care for people as well as provision of education and training in end of life care to healthcare professionals in the surrounding areas.

**2. Accounting policies**

**2.1 Basis of preparation of financial statements**

The financial statements have been prepared in accordance with the Charities SORP (FRS 102) - Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The Mary Stevens Hospice meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

The Consolidated statement of financial activities (SOFA) and Consolidated balance sheet consolidate the financial statements of the Group and its subsidiary undertaking. The results of the subsidiary are consolidated on a line by line basis.

The Group has taken advantage of the exemption allowed under section 408 of the Companies Act 2006 and has not presented its own Statement of financial activities in these financial statements.

**2.2 Going concern**

The Trustee Report sets out a review of the financial performance of the Hospice, its risk management policies and its reserves position as well as describing the factors that have significantly affected the years results. The Covid-19 pandemic has greatly affected the activities of the Hospice but the very significant government support has brought about an improvement in the Hospices financial position. That support has assisted the Trustees in concluding that these accounts be prepared on the basis that the Hospice is a going concern.

The Trustees nevertheless remain aware that the long term issues remain. In a competitive health care economy, with staff shortages in all sectors, the costs of providing our services are expected to continue to rise. The reserves held by the Hospice will assist in meeting these demands but work continues to make more secure all source of income, from trading subsidiaries top legacies, fundraising initiatives and Governmental support.

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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2022**

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**2. Accounting policies (continued)**

**2.3 Income**

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

The recognition of income from legacies is dependent on establishing entitlement, the probability of receipt and the ability to estimate with sufficient accuracy the amount receivable. Evidence of entitlement to a legacy exists when the company has sufficient evidence that a gift has been left to them (through knowledge of the existence of a valid will and the death of the benefactor) and the executor is satisfied that the property in question will not be required to satisfy claims in the estate. Receipt of a legacy must be recognised when it is probable that it will be received and the fair value of the amount receivable, which will generally be the expected cash amount to be distributed to the company, can be reliably measured.

Grants are included in the Consolidated statement of financial activities on a receivable basis. The balance of income received for specific purposes but not expended during the period is shown in the relevant funds on the Balance sheet. Where income is received in advance of entitlement of receipt, its recognition is deferred and included in creditors as deferred income. Where entitlement occurs before income is received, the income is accrued.

Income tax recoverable in relation to investment income is recognised at the time the investment income is receivable.

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

**2.4 Expenditure**

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

Expenditure on raising funds includes all expenditure incurred by the Group to raise funds for its charitable purposes and includes costs of all fundraising activities events and non-charitable trading.

Expenditure on charitable activities is incurred on directly undertaking the activities which further the Group's objectives, as well as any associated support costs.

All expenditure is inclusive of irrecoverable VAT.

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**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2022**

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**2. Accounting policies (continued)**

**2.5 Taxation**

The company is considered to pass the tests set out in Paragraph 1 Schedule 6 of the Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the company is potentially exempt from taxation in respect of income or capital gains received within categories covered by Chapter 3 Part 11 of the Corporation Tax Act 2010 or Section 256 of the Taxation Chargeable Gains Act 1992, to the extent that such income or gains are applied exclusively to charitable purposes.

**2.6 Government grants**

Government grants relating to tangible fixed assets are treated as deferred income and released to the Consolidated statement of financial activities over the expected useful lives of the assets concerned. Other grants are credited to the Consolidated statement of financial activities as the related expenditure is incurred.

**2.7 Tangible fixed assets and depreciation**

Tangible fixed assets costing £1,000 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

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

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

Depreciation is provided on the following bases:

Motor vehicles	- 25% on cost
Fixtures and fittings	- 20% on cost
Computer equipment	- 25% on cost

Leasehold buildings prior to 2018 are depreciated on a straight line basis from the date the building is brought into use until the end of the original lease in October 2040 (this lease has since been extended). Leasehold buildings capitalised from 2018 are depreciated on a straight line basis over 50 years.

**2.8 Stocks**

Stocks are valued at the lower of cost and net realisable value after making due allowance for obsolete and slow-moving stocks. Cost includes all direct costs and an appropriate proportion of fixed and variable overheads.

**2.9 Debtors**

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



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**THE MARY STEVENS HOSPICE**  
**(A company limited by guarantee)**

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2022**

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**2. Accounting policies (continued)**

**2.10 Cash at bank and in hand**

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

**2.11 Liabilities and provisions**

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

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

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised in the Consolidated statement of financial activities as a finance cost.

**2.12 Financial instruments**

The Group 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.

**2.13 Pensions**

In respect of former qualifying National Health Service personnel the Company continues their participation in the NHS defined pension scheme. Other contracted staff are offered an opportunity to participate in a separate defined contribution scheme. Employer's contributions payable to both schemes for the year are charged in the Statement of Financial Activities.

**2.14 Fund accounting**

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

Designated funds comprise unrestricted funds that have been set aside by the Trustee for particular purposes. The aim and use of each designated fund is set out in the notes to the financial statements.

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

Investment income, gains and losses are allocated to the appropriate fund.

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**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2022**

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**2. Accounting policies (continued)**

**3. Critical accounting estimates and areas of judgement**

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.

Critical accounting estimates and assumptions:

The Company makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. The estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year are discussed below.

Critical areas of judgement:

Accrued income includes legacy income amounts. In recognising accrued legacy income, the Trustees have considered the probability of receiving each legacy. Each legacy is carefully assessed to determine an appropriate allowance which reflects the possibility of not subsequently receiving the full legacy income amounts that the Charity is aware of. The allowance is based on the circumstances behind each legacy and the probability of receiving the income.

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**4. Income from donations and legacies**

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £
Donations	350,157	281,789	631,946
Legacies	823,079	-	823,079
NHS Grants and contracts for patient care	328,368	-	328,368
Furlough Income	69,585	-	69,585
	<u>1,571,189</u>	<u>281,789</u>	<u>1,852,978</u>

The group has been eligible to claim additional funding in the year to 31 March 2022 from the furlough support scheme provided by the government in response to the coronavirus outbreak (CJRS) whereby the company furloughed staff. The funding received relates to staff costs included in note 12.

In the prior year, the group was also been eligible for Business Rates Relief Grants awarded by the government to provide support for shop rates.

	<i>Unrestricted funds 2021 £</i>	<i>Restricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Donations	346,756	285,392	632,148
Legacies	342,773	-	342,773
NHS Grants and contracts for patient care	1,103,079	284,800	1,387,879
Furlough income	496,849	-	496,849
Business Rates Relief	394,659	-	394,659
	<u>2,684,116</u>	<u>570,192</u>	<u>3,254,308</u>

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**5. Income from charitable activities**

	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Local Clinical Commissioning groups - Patient care	538,032	538,032
	<u>538,032</u>	<u>538,032</u>
	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Local Clinical Commissioning groups - Patient care	504,039	504,039
	<u>504,039</u>	<u>504,039</u>

**6. Income from other trading activities**

**Income from fundraising events**

	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Fundraising events	365,765	365,765
Shop income	1,365,126	1,365,126
Lottery income	482,134	482,134
	<u>2,213,025</u>	<u>2,213,025</u>

Included in Shop income is £220,962 (2021: £96,420) of gift-aided donated goods and £55,241 (2021: £24,410) of gift aided amounts.

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**6. Income from other trading activities (continued)**

**Income from fundraising events (continued)**

	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Fundraising events	383,718	383,718
Shop income	475,549	475,549
Lottery income	499,336	499,336
	<u>1,358,603</u>	<u>1,358,603</u>

**7. Investment income**

	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Investment income	51,968	51,968
Bank interest	96	96
Interest receivable	1,441	1,441
	<u>53,505</u>	<u>53,505</u>

	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Investment income	52,237	52,237
Bank interest	886	886
Interest receivable	322	322
	<u>53,445</u>	<u>53,445</u>

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**8. Expenditure on raising funds**

**Costs of raising voluntary income**

	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Costs of raising voluntary income	106,200	<b>106,200</b>
Costs of raising voluntary income - wages and salaries	185,445	<b>185,445</b>
Costs of raising voluntary income - NI	8,077	<b>8,077</b>
Costs of raising voluntary income - pension costs	9,478	<b>9,478</b>
	<u>309,200</u>	<u><b>309,200</b></u>

	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Costs of raising voluntary income	166,806	166,806
Costs of raising voluntary income - wages and salaries	160,263	160,263
Costs of raising voluntary income - NI	9,600	9,600
Costs of raising voluntary income - pension costs	9,600	9,600
	<u>346,269</u>	<u>346,269</u>

**Fundraising trading expenses**

	<b>Unrestricted funds 2022 £</b>	<b>Total funds 2022 £</b>
Fundraising trading expenditure	648,704	<b>648,704</b>
Fundraising trading expenditure - wages and salaries	749,114	<b>749,114</b>
Fundraising trading expenditure - pension costs	23,285	<b>23,285</b>
Fundraising trading expenditure - depreciation	20,610	<b>20,610</b>
	<u>1,441,713</u>	<u><b>1,441,713</b></u>

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**8. Expenditure on raising funds (continued)**

**Fundraising trading expenses (continued)**

	<i>Unrestricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Fundraising trading expenditure	636,433	636,433
Fundraising trading expenditure - wages and salaries	815,843	815,843
Fundraising trading expenditure - pension costs	23,192	23,192
Fundraising trading expenditure - depreciation	29,070	29,070
	<u>1,504,538</u>	<u>1,504,538</u>

**9. Analysis of expenditure on charitable activities**

**Summary by fund type**

	<b>Unrestricted funds 2022 £</b>	<b>Restricted funds 2022 £</b>	<b>Total 2022 £</b>
Patient care	<u>2,762,732</u>	<u>242,033</u>	<u>3,004,765</u>

	<i>Unrestricted funds 2021 £</i>	<i>Restricted funds 2021 £</i>	<i>Total 2021 £</i>
Patient care	<u>2,601,735</u>	<u>556,219</u>	<u>3,157,954</u>

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**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

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**10. Analysis of expenditure by activities**

	<b>Activities undertaken directly 2022 £</b>	<b>Support costs 2022 £</b>	<b>Total funds 2022 £</b>
Patient care	2,713,230	291,535	<b>3,004,765</b>

	<i>Activities undertaken directly 2021 £</i>	<i>Support costs 2021 £</i>	<i>Total funds 2021 £</i>
Patient care	2,857,321	300,633	3,157,954



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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**10. Analysis of expenditure by activities (continued)**

**Analysis of direct costs**

	<b>Total funds 2022 £</b>	<i>Total funds 2021 £</i>
Staff costs	2,291,961	2,476,728
Depreciation	206,876	192,894
Management	214,393	187,699
<b>Total 2022</b>	<b>2,713,230</b>	<b>2,857,321</b>

**Analysis of support costs**

	<b>Total funds 2022 £</b>	<i>Total funds 2021 £</i>
Depreciation	12,813	13,667
Management	207,712	221,219
Support	45,654	48,495
Governance costs	25,356	17,252
<b>Total 2022</b>	<b>291,535</b>	<b>300,633</b>

**11. Net income/(expenditure)**

	<b>2022 £</b>	<i>2021 £</i>
Depreciation of tangible fixed assets	240,299	242,738
Auditors remuneration		
- audit	16,800	16,020
- other services	1,350	1,300
Pension costs	137,129	152,989
Operating Lease Rentals - Property	268,198	286,151

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**12. Staff costs**

	<b>Group 2022 £</b>	<i>Group 2021 £</i>	<b>Company 2022 £</b>	<i>Company 2021 £</i>
Wages and salaries	<b>2,939,473</b>	<i>3,133,834</i>	<b>2,190,359</b>	<i>2,317,991</i>
Social security costs	<b>190,758</b>	<i>208,403</i>	<b>190,758</b>	<i>208,403</i>
Contribution to defined contribution pension schemes	<b>137,129</b>	<i>152,989</i>	<b>113,844</b>	<i>129,797</i>
	<b><u>3,267,360</u></b>	<i><u>3,495,226</u></i>	<b><u>2,494,961</u></b>	<i><u>2,656,191</u></i>

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

	<b>Group 2022 No.</b>	<i>Group 2021 No.</i>
Average number of employees	<b><u>149</u></b>	<i><u>188</u></i>

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

	<b>Group 2022 No.</b>	<i>Group 2021 No.</i>
In the band £80,001 - £90,000	<b>1</b>	<i>1</i>

The key management personnel of the charity trust comprise the trustees and senior management team. The total amount of employee benefits (including employer pension contributions) received by key management personnel for their services to the charity was £309,418 (2021: £295,182).

**13. Trustee's remuneration and expenses**

During the year, no Trustees received any remuneration or other benefits (2021 - £NIL).

During the year ended 31 March 2022, no Trustee expenses have been incurred (2021 - £NIL).

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**14. Tangible fixed assets**

**Group**

	Long-term leasehold property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
<b>Cost or valuation</b>					
At 1 April 2021	6,303,135	32,905	580,769	163,559	7,080,368
Additions	-	-	81,354	-	81,354
Disposals	(2,008)	-	(1,494)	-	(3,502)
At 31 March 2022	<u>6,301,127</u>	<u>32,905</u>	<u>660,629</u>	<u>163,559</u>	<u>7,158,220</u>
<b>Depreciation</b>					
At 1 April 2021	1,818,964	14,396	430,379	130,923	2,394,662
Charge for the year	155,743	4,627	65,534	14,395	240,299
On disposals	(1,825)	-	(1,731)	-	(3,556)
At 31 March 2022	<u>1,972,882</u>	<u>19,023</u>	<u>494,182</u>	<u>145,318</u>	<u>2,631,405</u>
<b>Net book value</b>					
At 31 March 2022	<u>4,328,245</u>	<u>13,882</u>	<u>166,447</u>	<u>18,241</u>	<u>4,526,815</u>
At 31 March 2021	<u>4,484,171</u>	<u>18,509</u>	<u>150,390</u>	<u>32,636</u>	<u>4,685,706</u>

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**14. Tangible fixed assets (continued)**

**Company**

	Long-term leasehold property £	Fixtures and fittings £	Computer equipment £	Total £
<b>Cost or valuation</b>				
At 1 April 2021	6,097,358	434,410	93,596	6,625,364
Additions	-	81,354	-	81,354
At 31 March 2022	<u>6,097,358</u>	<u>515,764</u>	<u>93,596</u>	<u>6,706,718</u>
<b>Depreciation</b>				
At 1 April 2021	1,652,890	299,648	62,639	2,015,177
Charge for the year	145,290	61,586	12,813	219,689
At 31 March 2022	<u>1,798,180</u>	<u>361,234</u>	<u>75,452</u>	<u>2,234,866</u>
<b>Net book value</b>				
At 31 March 2022	<u>4,299,178</u>	<u>154,530</u>	<u>18,144</u>	<u>4,471,852</u>
At 31 March 2021	<u>4,444,468</u>	<u>134,762</u>	<u>30,957</u>	<u>4,610,187</u>

**15. Stocks**

	Group 2022 £	Group 2021 £
Finished goods and goods for resale	<u>250</u>	<u>4,052</u>

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**16. Debtors**

	<b>Group 2022 £</b>	<i>Group 2021 £</i>	<b>Company 2022 £</b>	<i>Company 2021 £</i>
<b>Due within one year</b>				
Trade debtors	35,136	104,951	35,136	99,842
Amounts owed by group undertakings	-	-	330,167	274,715
Other debtors	33,899	28,506	16,588	20,365
Prepayments and accrued income	281,527	208,115	250,689	199,098
Tax recoverable	63,302	34,769	43,745	34,769
	<u>413,864</u>	<u>376,341</u>	<u>676,325</u>	<u>628,789</u>

**17. Current asset investments**

	<b>Group 2022 £</b>	<i>Group 2021 £</i>	<b>Company 2022 £</b>	<i>Company 2021 £</i>
Listed investments	<u>1,422,476</u>	<u>1,430,044</u>	<u>1,422,476</u>	<u>1,430,044</u>

Within cash deposits the amount of £24,078 (2021: £24,078) in respect of funding for Registrars in Palliative care is held on behalf of designated hospices in the West Midlands region as part of a collaborative working arrangement. Mary Stevens Hospice act only as custodians of the funds and has no ownership of the funds or authority concerning the allocation of funds. The hospice conducts transactions when properly authorised by the appropriate authority in accordance with agreed protocols. Any interest earned on this sum will be retained by Mary Stevens Hospice to offset administrative costs involved in overseeing these funds. The liability for these funds is shown under other creditors.

**THE MARY STEVENS HOSPICE**  
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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**18. Creditors: Amounts falling due within one year**

	<b>Group 2022 £</b>	<b>Group 2021 £</b>	<b>Company 2022 £</b>	<b>Company 2021 £</b>
Bank loans	67,006	59,505	57,006	57,005
Trade creditors	85,661	79,591	72,350	28,733
Other taxation and social security	16,856	80,410	-	69,096
Other creditors	24,245	24,078	24,245	24,078
Accruals and deferred income	148,411	161,970	67,900	69,101
	<b>342,179</b>	<b>405,554</b>	<b>221,501</b>	<b>248,013</b>
			<b>Group 2022 £</b>	<b>Group 2021 £</b>
Deferred income at 1 April 2021			138,224	143,197
Resources deferred during the year			125,139	138,224
Amounts released from previous periods			(138,224)	(143,197)
			<b>125,139</b>	<b>138,224</b>

Deferred income comprises lottery income received in advance by Mary Stevens Hospice Lottery Limited and project funding received in advance in Mary Stevens Hospice.

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**19. Creditors: Amounts falling due after more than one year**

	<b>Group 2022 £</b>	<i>Group 2021 £</i>	<b>Company 2022 £</b>	<i>Company 2021 £</i>
Loans	<b>927,310</b>	<i>968,501</i>	<b>889,810</b>	<i>921,001</i>

Included within the above are amounts falling due as follows:

	<b>Group 2022 £</b>	<i>Group 2021 £</i>	<b>Company 2022 £</b>	<i>Company 2021 £</i>
<b>Between one and two years</b>				
Bank loans	<b>67,006</b>	<i>67,005</i>	<b>57,006</b>	<i>57,005</i>
<b>Between two and five years</b>				
Bank loans	<b>198,518</b>	<i>201,018</i>	<b>171,018</b>	<i>171,018</i>
<b>Over five years</b>				
Bank loans	<b>661,786</b>	<i>700,478</i>	<b>661,786</b>	<i>692,978</i>

There are two loans in this year's accounts.

The first loan was drawn down in December 2018 and is repayable over a term of 25 years. The total amount drawn down was £1,000,000 and repayment commenced on 21 January 2018. Repayment is paid interest only for the first twelve months, followed by monthly installments of £5,084 (including interest).

Interest is charged at 2.65% per annum over the Bank of England base rate.

The loan is secured by means of a legal mortgage and fixed and floating charge over 221 Hagley Road, Oldswinford, Stourbridge, DY8 2JR and any property or undertaking of The Mary Stevens Hospice.

The second bank loan is a term loan repayable in monthly installments over a 6 year term and bears interest at 2.5% per annum.

There is an unlimited guarantee in place for Mary Stevens Hospice Trading Company Limited and Mary Stevens Hospice Lottery Limited. There is a charge over 221 Hagley Road, Stourbridge, DY8 2JR on the bank accounts.

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**20. Statement of funds**

**Statement of funds - current year**

	Balance at 1 April 2021 £	Income £	Expenditure £	Gains/ (Losses) £	Balance at 31 March 2022 £
<b>Unrestricted funds</b>					
<b>Designated funds</b>					
Fixed assets	3,642,407	-	(130,401)	-	3,512,006
Hospice at home	200,000	-	-	-	200,000
	<u>3,842,407</u>	<u>-</u>	<u>(130,401)</u>	<u>-</u>	<u>3,712,006</u>
<b>General funds</b>					
General Funds	<u>1,077,110</u>	<u>4,481,148</u>	<u>(4,383,244)</u>	<u>(7,568)</u>	<u>1,167,446</u>
<b>Total Unrestricted funds</b>	<u>4,919,517</u>	<u>4,481,148</u>	<u>(4,513,645)</u>	<u>(7,568)</u>	<u>4,879,452</u>
<b>Restricted funds</b>					
Donations	114,920	276,789	(208,543)	-	183,166
Restricted fixed assets	1,043,299	5,000	(33,490)	-	1,014,809
	<u>1,158,219</u>	<u>281,789</u>	<u>(242,033)</u>	<u>-</u>	<u>1,197,975</u>
<b>Total of funds</b>	<u>6,077,736</u>	<u>4,762,937</u>	<u>(4,755,678)</u>	<u>(7,568)</u>	<u>6,077,427</u>

**Restricted funds**

The restricted funds relate to donations received for specific expenditure that have not yet been expensed.

**Designated funds**

The Hospice re-development and extension fund is earmarked for the Phase 3 development of the Hospice which commenced in June 2017.

The Hospice at Home fund is earmarked for the potential establishment of a "Hospice at Home" service in the future.

The fixed asset fund represents value embodied in the charity's buildings and equipment.



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**20. Statement of funds (continued)**

**Statement of funds - prior year**

	<i>Balance at 1 April 2020 £</i>	<i>Income £</i>	<i>Expenditure £</i>	<i>Transfers in/out £</i>	<i>Gains/ (Losses) £</i>	<i>Balance at 31 March 2021 £</i>
<b>Unrestricted funds</b>						
<b>Designated funds</b>						
Fixed assets	3,807,032	-	(170,619)	5,994	-	3,642,407
Hospice at home	200,000	-	-	-	-	200,000
	<u>4,007,032</u>	<u>-</u>	<u>(170,619)</u>	<u>5,994</u>	<u>-</u>	<u>3,842,407</u>
<b>General funds</b>						
General Funds	<u>501,339</u>	<u>4,640,859</u>	<u>(4,281,923)</u>	<u>(5,994)</u>	<u>222,829</u>	<u>1,077,110</u>
<b>Total Unrestricted funds</b>	<u>4,508,371</u>	<u>4,640,859</u>	<u>(4,452,542)</u>	<u>-</u>	<u>222,829</u>	<u>4,919,517</u>
<b>Restricted funds</b>						
Donations	76,087	285,392	(246,559)	-	-	114,920
Additional Bed Funding	-	284,800	(284,800)	-	-	-
Restricted fixed assets	<u>1,068,159</u>	<u>-</u>	<u>(24,860)</u>	<u>-</u>	<u>-</u>	<u>1,043,299</u>
	<u>1,144,246</u>	<u>570,192</u>	<u>(556,219)</u>	<u>-</u>	<u>-</u>	<u>1,158,219</u>
<b>Total of funds</b>	<u>5,652,617</u>	<u>5,211,051</u>	<u>(5,008,761)</u>	<u>-</u>	<u>222,829</u>	<u>6,077,736</u>

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**NOTES TO THE FINANCIAL STATEMENTS  
FOR THE YEAR ENDED 31 MARCH 2022**

**21. Summary of funds**

**Summary of funds - current year**

	Balance at 1 April 2021 £	Income £	Expenditure £	Gains/ (Losses) £	Balance at 31 March 2022 £
Designated funds	3,842,407	-	(130,401)	-	3,712,006
General funds	1,077,110	4,481,148	(4,383,244)	(7,568)	1,167,446
Restricted funds	1,158,219	281,789	(242,033)	-	1,197,975
	<u>6,077,736</u>	<u>4,762,937</u>	<u>(4,755,678)</u>	<u>(7,568)</u>	<u>6,077,427</u>

**Summary of funds - prior year**

	Balance at 1 April 2020 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 March 2021 £
Designated funds	4,007,032	-	(170,619)	5,994	-	3,842,407
General funds	501,339	4,640,859	(4,281,923)	(5,994)	222,829	1,077,110
Restricted funds	1,144,246	570,192	(556,219)	-	-	1,158,219
	<u>5,652,617</u>	<u>5,211,051</u>	<u>(5,008,761)</u>	<u>-</u>	<u>222,829</u>	<u>6,077,736</u>

**22. Analysis of net assets between funds**

**Analysis of net assets between funds - current year**

	Unrestricted funds 2022 £	Restricted funds 2022 £	Total funds 2022 £
Tangible fixed assets	3,512,006	1,014,809	4,526,815
Current assets	2,636,935	183,166	2,820,101
Creditors due within one year	(342,179)	-	(342,179)
Creditors due in more than one year	(927,310)	-	(927,310)
<b>Total</b>	<u>4,879,452</u>	<u>1,197,975</u>	<u>6,077,427</u>

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**NOTES TO THE FINANCIAL STATEMENTS  
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**22. Analysis of net assets between funds (continued)**

**Analysis of net assets between funds - prior year**

	<i>Unrestricted funds 2021 £</i>	<i>Restricted funds 2021 £</i>	<i>Total funds 2021 £</i>
Tangible fixed assets	3,642,407	1,043,299	4,685,706
Current assets	2,651,165	114,920	2,766,085
Creditors due within one year	(405,554)	-	(405,554)
Creditors due in more than one year	(968,501)	-	(968,501)
<b>Total</b>	<b>4,919,517</b>	<b>1,158,219</b>	<b>6,077,736</b>

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

	<b>Group 2022 £</b>	<i>Group 2021 £</i>
Net income/expenditure for the year (as per Statement of Financial Activities)	<b>(309)</b>	425,119
<b>Adjustments for:</b>		
Depreciation charges	<b>240,299</b>	235,631
Gains/(losses) on investments	<b>7,568</b>	(222,829)
Dividends, interests and rents from investments	<b>(53,505)</b>	(53,445)
Decrease/(increase) in stocks	<b>3,802</b>	(182)
Decrease/(increase) in debtors	<b>(37,523)</b>	21,516
Decrease in creditors	<b>(70,876)</b>	(171,601)
<b>Net cash provided by operating activities</b>	<b>89,456</b>	234,209

**24. Analysis of cash and cash equivalents**

	<b>Group 2022 £</b>	<i>Group 2021 £</i>
Cash in hand	<b>983,511</b>	955,648

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**25. Analysis of changes in net debt**

	At 1 April 2021	Cash flows	Other non- cash changes	At 31 March 2022
	£	£	£	£
Cash at bank and in hand	955,648	27,863	-	983,511
Debt due within 1 year	(59,505)	59,505	(67,006)	(67,006)
Loans due after 1 year	(968,501)	-	41,191	(927,310)
Liquid investments	1,430,044	-	(7,568)	1,422,476
	<u>1,357,686</u>	<u>87,368</u>	<u>(33,383)</u>	<u>1,411,671</u>

**26. Pension commitments**

Staff may opt to join a defined contribution pension scheme, the assets of which are held separately from those of the charity in independently administered funds. The employer's contribution to this scheme is between 3% and 6.5% (2021: 3% and 6.5%) of pensionable pay. Future contributions are expected to be at a similar level.

Staff previously employed by the National Health Service and who were members of the NHS Superannuation Scheme continue to be members of that scheme. The NHS scheme is a defined benefit pension scheme. However, the scheme is a multiple employer scheme and the group is unable to identify its share of the underlying assets and liabilities. The scheme is therefore accounted for as a defined contribution scheme. Contributions are charged to the SOFA so as to spread the cost of pensions over employees' working lives with the charity.

Details of the benefits payable under these provisions can be found on the NHS Pensions website at [www.pensions.nhsbsa.nhs.uk](http://www.pensions.nhsbsa.nhs.uk).

The employer's contribution to the scheme is 14.38% (2021: 14.38%) of pensionable pay.

The pension cost charges, representing employer's contributions to both schemes, amounted to £137,129 (2021: £152,989). This is net of a NHS pension contribution of £43,563 (2021: £43,563) received as part of the Dudley CCG grant. Contributions totalling £Nil (2021: £Nil) were payable at the year end and are included in other creditors.

No trustee qualified for benefits under either of these schemes.

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**FOR THE YEAR ENDED 31 MARCH 2022**

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**27. Operating lease commitments**

At 31 March 2022 the Group and the company had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	<b>Group 2022 £</b>	<b>Group 2021 £</b>	<b>Company 2022 £</b>	<b>Company 2021 £</b>
Not later than 1 year	<b>185,969</b>	<i>202,590</i>	<b>6,484</b>	<i>16,180</i>
Later than 1 year and not later than 5 years	<b>392,253</b>	<i>586,768</i>	<b>20,753</b>	<i>26,169</i>
Later than 5 years	<b>69,553</b>	<i>115,617</i>	<b>-</b>	<i>1,410</i>
	<b>647,775</b>	<i>904,975</i>	<b>27,237</b>	<i>43,759</i>

**28. Members' liability**

Each member of the charitable company undertakes to contribute to the assets of the company in the event of it being wound up while he/she is a member, or within one year after he/she ceases to be a member, such amount as may be required, not exceeding £1 for the debts and liabilities contracted before he/she ceases to be a member.

**29. Related party transactions**

There have been no other related party transactions that require disclosure other than the transactions with the subsidiary companies, The Mary Stevens Hospice Trading Company Limited and Mary Stevens Hospice Lottery Limited, as set out below:

Income from donated goods under the retail Gift Aid scheme are sales which were processed by The Mary Stevens Hospice Trading Company Limited on behalf of the Charity and are included under retail income.

The subsidiary companies also made a gift aid distribution to the Charity as disclosed in Note 30.

The balance outstanding at the year end owed from The Mary Stevens Hospice Trading Company Limited was £155,645 (2021 - £134,841).

The balance outstanding at the year end owed from Mary Stevens Hospice Lottery Limited was £174,522 (2021 - £139,874).

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**NOTES TO THE FINANCIAL STATEMENTS**  
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**30. Principal subsidiaries**

The Charity has two wholly owned trading subsidiaries which are registered and incorporated in England.

The following were subsidiary undertakings of the company:

<b>Names</b>	<b>Company number</b>	<b>Registered office or principal place of business</b>	<b>Principal activity</b>
The Mary Steven Hospice Trading Company Limited	02648133	221 Hagley Road, Oldwinsford, Stourbridge, DY8 2JR	Sells goods and gift aids taxable profits to The Mary Stevens Hospice
Mary Stevens Hospice Lottery Limited	03885815	221 Hagley Road, Oldwinsford, Stourbridge, DY8 2JR	Runs a lottery and gift aids taxable profits to The Mary Stevens Hospice

The financial results of the subsidiaries for the year were:

<b>Name</b>	<b>Income</b>	<b>Expenditure</b>	<b>Profit/(Loss) for the year</b>	<b>Net assets/(liabilities)</b>
The Mary Stevens Hospice Trading Company Limited	1,447,496	1,255,721	191,775	-
Mary Stevens Hospice Lottery Limited	482,165	216,498	265,667	4,539

At the end of the financial year, Mary Stevens Hospice Lottery Limited made a gift aid distribution of £265,740 (2021: £267,567) and The Mary Stevens Hospice Trading Company Limited made a gift aid distribution of £166,832 (2021: £nil).



Hospice Care - 01384 443010 | Fundraising - 01384 377778 | Lottery - 01384 860011  
Trading & Recycling Centre - 01384 671149 | Telephone Advice & Support Service - 01384 445417  
Bereavement Information Hub - 01384 443010

Report produced by Beth Wheeler, Graphic Designer



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