



Hurstpierpoint & Sayers Common Parish Council
Email: office@hurstpierpoint-pc.gov.uk
Website: www.hurstpierpoint-pc.gov.uk
Telephone: 01273 833264

Village Centre
Trinity Road
Hurstpierpoint
West Sussex BN6 9UY

SMALL GRANT APPLICATION (Please ensure you are using the correct application form)

Please note that this application should be accompanied by a copy of the financial details of the requesting organisation. Where relevant we will need to see account details showing income, expenditure, and the level of balances. If annual accounts are not available, copies of the bank statements or receipts for expenditure should be enclosed.

1.	Name of Organisation	St Catherine's Hospice
2.	Name, Address and Status of Contact within the organisation	Jemma Byrne, Partnerships Officer for Trusts St Catherine's Hospice Grace Holland Avenue Pease Pottage West Sussex RH11 9SL
3.	Telephone number and Email Address	01293 583075 jemmabyrne@stch.org.uk
4.	Is the Organisation a Registered Charity? If yes, then please provide charity number	Yes Our registered charity number is 281364
5.	Amount of Grant Requested	£500
6.	For what purpose or project is the grant requested, what local need does it address and who would benefit? Please be as detailed as possible about how exactly the funds would be spent. If for a specific project, when would you anticipate that to complete/how long would the funds last? (Continue on a separate sheet if necessary).	We are seeking a grant from Hurstpierpoint and Sayers Common Parish Council to help us care for local adults who are facing death and dying, and support those closest to them. Each year we care for around 2000 people on our wards and out in the community (c. 80%) and 54% live in Sussex. Whilst 65% of our patients have cancer as their primary diagnoses, we care for people affected by life-limiting conditions including motor neurone disease, heart disease, chronic pulmonary conditions and dementia. Your support would help ensure: -local people facing death and dying on our wards, in their own homes and in local care homes get the expert medical care and emotional support they need. -Carers feel supported, reassured and better able to cope with the demands of caring for their loved ones. -Regular visits are made to patients at home to monitor and review their medication, care for wounds and provide advice on managing pain and other symptoms. -Welfare advice and support is provided to ease financial anxieties that patients and families face in a cost-of-living crisis. -Wellbeing support is provided to help people have as good a quality of life as possible in the precious time they have remaining. -Bereavement support and counselling is available to those grieving the death of their loved one.

		<i>"Patricia, one of the hospice doctors, has really helped me. She goes above and beyond and is my number one person at the hospice. She ensures my medication is sorted and has altered it to make me more comfortable. I admire her so much. She's been honest with me but so kind and compassionate too."</i>
7.	What will be the total cost of the project?	We receive around one third of our income from the NHS and rely on the continuing generosity of our supporters and the local community to raise at least £7.5 million each year to fund our vital end of life care services.
8.	If the total cost of the project is more than the grant, how will the residue be financed?	Our fundraising team are doing everything they can to raise the remaining funds needed. They undertake a wide range of activities throughout the year, including community groups and hospice-led fundraising events, regular appeals, corporate sponsorships and run our in-house lottery. We are also incredibly grateful to receive donations from individuals and gifts left in wills. In addition, we raise money through our 13 charity retail shops situated on local high streets and our community café located opposite our new hospice. If the total amount is not raised, we will need to undertake a further cost-saving exercise or utilize more of our charitable reserves, impacting the care we provide and the future sustainability of the charity.
9.	Have you applied for a grant for the same project to another organisation? If so, which organisation and how much?	Yes, we apply to Trusts, Foundations and local Town and Parish Councils in our catchment area of West Sussex and East Surrey on a rolling basis.
10.	Approximately how many/what percentage of those who will benefit are parishioners?	The number of parishioners we care for in Hurstpierpoint and Sayers Common varies each year depending on local need and referrals. With your support we can continue to be there for local people when they need us the most.
11.	Have financial details been enclosed with the grant application?	Yes – please find our latest annual report and accounts attached with this grant application.
12.	Please list any other supporting documents that have been included.	See St Catherine's Hospice additional information document attached with this application form.

You may use a separate sheet of paper to submit any other information which you feel will support this application.

Signed



Date: 10 October 2024

Please return this completed form, together with all relevant accompanying information to:

Office@hurstpierpoint-pc.gov.uk or via post:

Clerk to the Council

Hurstpierpoint & Sayers Common Parish Council

Trinity Road, Hurstpierpoint

West Sussex, BN6 9UY

DATA PROTECTION

We take the protection of your personal data seriously. If you contact or communicate with us we may hold your contact and other details. We will only use this information for the purposes of carrying out our Council business with you. We will not pass your details to any other person or organisation without your express permission. We are registered with the ICO (Information Commissioners Office). For details of our full privacy notices please go to our website.



About St Catherine's Hospice

St Catherine's Hospice charitable objectives are: to relieve suffering, provide comfort and improve the quality of life for people with a progressive life-limiting illness; to relieve the suffering of people facing or experiencing bereavement through the provision of counselling; and to advance research and education in palliative end of life care.

We have been delivering care for over 40 years, and from our new hospice in Pease Pottage for almost a year. The Care Quality Commission continues to rate the care we provide local adults on our wards and in the community across West Sussex and East Surrey as 'outstanding' and fully endorsed our new hospice prior to our transition from Malthouse Road. Alongside clinical, therapeutic and practical care, we offer spiritual guidance, social work support, welfare advice and bereavement support. We have a dedicated telephone advice line for patients, carers and our local health and social care colleagues, providing expert medical guidance and emotional support. Our services are free at the point of access for those in the diverse community we serve, including Hurstpierpoint and Sayers Common.

Our care services

Your support will help our expert teams reach local people who are facing the most difficult time. People who have been diagnosed with a terminal illness and need specialist help managing symptoms such as pain, nausea, or shortness of breath and emotional support that might include counselling or time with our spiritual care team who support people of all faiths and none.

The majority of people choose to be cared for in the familiar surroundings of their own home. Patients who are well enough to travel, visit our new hospice for outpatient appointments including exercise and education classes, one-to-one gym-based exercise sessions and counselling, supporting them to live well and remain as independent as possible.

"The therapy team has been really good. Thanks to their help, I can now walk with a walker and with crutches. I never thought I'd walk again when I left hospital but I've felt a lot better as time has gone on and my legs have got more and more use."

For those staying on our hospice wards, alongside 24-hour specialist medical and clinical care, St Catherine's finds ways to create precious moments that make all the difference to people at the end of life. For example, sipping a favourite drink with a loved one in our beautiful gardens, a relaxing spa bath, a visit from their pet dog, or listening to beautiful melodies performed by our volunteer musicians.

"18 days before Dad died, two of your wonderful nurses wheeled Dad outside, made him a 'Virgin Mary' and we sat together enjoying the sunshine. Can't thank you enough for this special time - I'll treasure the memory forever."

For those grieving the death of their loved one, alongside 1:1 bereavement counselling we offer STEPS an informal 'walk and talk' group, Understanding Bereavement Group sessions and we've recently reintroduced our Time to Remember services, where people can find comfort and solace with others, listen to meaningful readings, and light a candle in remembrance.

The Challenge we're facing

You may have seen in the media recently an announcement that St Catherine's needs to make £1.5 million in cost savings to ensure the sustainability of our future services for our local community, and we are not alone. UK hospices are facing a funding crisis. Cuts are being made to hospice services across the country due to high inflation, government funding in a real-term decline and charity fundraising unable to keep pace with rising costs.

At a time when our care is needed more than ever, with a growing and ageing local population, we're having to make hard decisions about how we scale back our services to what we can realistically afford to provide our community. We have already made some changes to our care provision, including reducing the hours of our community telephone advice line and stopping therapy support for people at home. In addition, in consultation with our staff teams and in close liaison with key NHS partners, we are also running a formal pilot exploring our role in a new integrated community care model, and we intend to make a decision on our longer term community care provision later this year, following evaluation of this pilot.

After a formal consultation with our staff teams, we sadly anticipate the loss of over 40 roles across various departments, including our expert nurses. This update is difficult to share, but we know that these changes and our ongoing review will help to ensure St Catherine's future. There will always be a role for independent hospices alongside NHS services, and we remain committed to ensuring that local people facing death and dying receive the specialist support they need.

Despite the financial challenges we're facing, St Catherine's is committed to offering the same level of services on our wards that we currently run from our new hospice building - 12 beds with a view to open the further 12 when we can afford to do so.

Measuring Success

We receive positive feedback from patients, families and carers on the difference our hospice care services make, and 86% of those asked said they would recommend St Catherine's. The CQC fully endorsed our new hospice and we maintain our care rating of Outstanding. We are also proud to be accredited by Continuing Healthcare Knowledge Systems, recognising our commitment to the highest levels of quality and improvement.

“The nurses were excellent. They were gentle, great communicators and so accurate with what they were saying. It gave Dad an element of control over his pain too which made such a big difference.”

“When I first sat down at the hospice I physically felt my shoulders relax because for the first time in weeks I knew Rachel was in the right place. I’d been on hyper alert in the hospital, watching every machine bleep and every tone change. St Catherine’s took that all away.”

Funding position

Whilst our ambition is to be there for everyone who needs us, St Catherine’s is facing significant pressure on our expenditure budget. High inflation, stemming from global economic factors, has driven up almost all of our costs, and with the cost of living crisis affecting our community, fundraising is increasingly challenging. As our expert teams continue to deliver vital care and support to local people facing the worst of times, we need your help now, more than ever.

On behalf of all of us here, thank you for considering our application.



ST CATHERINE'S HOSPICE
ANNUAL REPORT AND ACCOUNTS
YEAR ENDED MARCH 2024

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INTRODUCTION FROM THE CHAIR OF TRUSTEES AND CHAIR ELECT

An eventful and exciting year for St Catherine's.

The successful completion of a programme begun almost 10 years ago to build our new home on Grace Holland Avenue as we admitted the first person to our wards in December and the closure of Malthouse Road from where we have provided care since our foundation in the 1980s.



Terry O'Leary
Chair of Trustees



Giles Tomsett
Chief Executive



Philip Ingleby
Chair of the Financial Sustainability
Committee and Chair Elect

Those to whom we owe appreciation are too numerous to list here. However we should mention here our predecessors who, envisioned our need to develop a facility to meet the 21st century needs of our community, those in our community who collectively and generously gave some £20million to enable us to realise our vision and the legion of staff, volunteers and partners delivering this foundational programme.

As we settle into our new home and plan the ways in which we will use this amazing gift to continue to provide outstanding care to the people of West Sussex and East Surrey when they most need it, as we give our sincere thanks to all those who made it possible, let us pause to be proud of our collective achievement.

The opening of our new hospice marks the close of a long - and sometimes challenging - chapter in our history but also the opening of a new chapter that will be both exciting and challenging in its own right.

The challenges we face will be in two main categories, financial and systemic.

We already experienced the financial challenge in the past two-three years, emerging from the global pandemic and facing historic levels of cost inflation. While we overcame these difficulties in the context of our new build programme, thanks to the generosity of our community, and the talent of our income generating team, we now face the same difficulties operationally to continue to finance our care services and ideally grow and improve what we do.

We are not alone in this challenge. Many hospices and charities are facing the dual impact of cost inflation and the diminished capacity of the donor base, themselves impacted by economic forces. Compounded, in our case and for many other charities, by the financial constraints on the system within which we operate, in our case the health and social care system.

We have recognised these risks and, in collaboration with hospice colleagues across Sussex and Surrey, we are working with our partners in the health and social care system to develop a sustainable operating model for the future.

In Sussex and Surrey, we work closely with our health and social care partners, general practitioners, district nursing, and social care services. We all support the same people, and the challenge is to integrate our expertise with our partners' so that people experience holistic care as they face dying. We recognise that this integration is not perfect and our clinical leaders are working closely with our system partners to agree the shape of that care in the future.

We have therefore begun parallel activities - internally consulting on how we can reshape our community services and, externally, with NHS partners on developments in community facing statutory provision such as virtual wards, integrated care and other innovations envisaged in the NHS long term plan for care in community settings.

NHS leaders in Surrey and Sussex value the importance of the work we do alongside their teams to support people across the community, and they recognise the important role our beds play in supporting people with high complex needs or for those where care at home is not an option for socio-economic and wider non clinical reasons. With an ageing society and with local hospitals under enormous ongoing pressure, we are keen to see all of our new facility fully utilised.

Recognition though has not led to any improvement in our statutory income which would help us to fully open our new facility at Pease Pottage. We continue to work on this while appreciating the enormous pressure on NHS finances.

There are steps we are taking ourselves to redesign our services in ways we believe will unlock improvement in our statutory funding as we will be a closer partner within the wider integrated local community statutory provision. Aligning more closely with NHS priorities is not inconsistent with

our independent status, in fact it will allow us to focus our charitable funds on areas and aspects of our care and wellbeing services not supported by the national system.

With our NHS partners, we intend to reframe our approach in community care through the design and build of a shared and integrated community model of care so that we optimise our charitable role alongside the work of local GPs and district nurses. Framing this contribution to align to the developing Primary Care Network landscape locally will offer local people improved co-ordination from the entire service. We will report the progress of this joint work next year after the conclusion of our pilot in East Surrey which will run over the summer of 2024.

We are grateful to the clinical directors within St Catherine's working with the local GP Federations and community providers to shape this new approach to the benefit of those we care for.

As I step down after 8 eventful years, looking back on the past, the work that has got us to where we are and looking forward to the future, the challenges and opportunities facing us, let us not overlook the present.

The present is the work that our staff and volunteers do every day to deliver care in our wards and in peoples' homes and the work they do to support and enable that care. Also, the generosity and love of our community who make it all possible. It has been my privilege and my honour to work with these remarkable people these past 8 years, I look forward to supporting their work in the future.

Leading the organisation into that future will be my colleague, Philip Ingleby, our new Chair of Trustees. Philip has been a close colleague for four years and a supporter of St Catherine's before that. I am delighted that our board has appointed him to succeed me, I am confident that we are in very good hands and I wish him every success.

Terry O'Leary Chairman



It is a great privilege to take on the role of Chair of Trustees of St Catherine's Hospice, an organisation that I have come to know well and which is very close to my heart after four years as a Trustee. I would like to pay tribute to the leadership of Terry O'Leary who has taken us through the most challenging period since the Hospice was established, as we navigated the pandemic and moved into our new home at Pease Pottage. We owe Terry an enormous debt of gratitude and I am delighted that he will continue as a supporter. I would also like to thank our other Trustees and Directors who are retiring this year and who have played such an important role in the St Catherine's story.

As Terry highlights, the road ahead will not be straightforward and along with many organisations in the health sector we face challenges, particularly from a funding perspective. Our income, both statutory and voluntary, has not been keeping pace with the increase in our costs and we are addressing this as a matter of urgency: we are engaging with our partners in the NHS and also other hospices in our area but we are having to make some difficult decisions around cost reductions which are currently being implemented.

We need to ensure that St Catherine's has a solid financial base so we can serve our community well into the future, also that we continue to play a pivotal role in the delivery of end of life care within our area, working with our partners in the NHS and elsewhere and ensuring that we fully utilise

the superb new facility we have at Grace Holland Avenue. In this I know that I and my Trustee colleagues can rely on our excellent Management Team led by Giles Tomsett and the commitment of our wonderful staff and volunteers who make this extraordinary organisation so special.

Philip Ingleby Chair of the Financial Sustainability Committee and Chair Elect

"On behalf of our staff, volunteers and those we care for, I would like to thank Terry O'Leary for giving so much of his time, energy and commitment to St Catherine's. It has been an absolute privilege to work alongside Terry for the last 8 years and he can be extremely proud of all that has been achieved for those needing end of life care during his tenure as Chair."

"We are looking forward to continuing our mission with our new Chair, Philip Ingleby and am confident that he will guide and support us as our staff, volunteers and supporters continue to work hard to provide end of life care for our community."

Giles Tomsett Chief Executive



OUR VISION

A world where everyone can face death informed, supported and pain free.

OUR MISSION

Pioneering standards in expert care and support for anyone facing death and bereavement.

OUR VALUES

Integral to all that we do:

Human

We treat people with understanding, patience, respect and above all dignity. We are the welcoming smile, the talk over a cup of tea, the human touch.

Courageous

We stand firm, we do not flinch in the face of hard news, but always with humanity, sensitivity and respect for our community.

Energetic

Whether we're out running a fun run or at the hospice greeting our patients, we bring the energy and the optimism to make the most of every day.

Connected

We are not an island, we thrive on partnerships and working with others, we believe we're better and stronger together.

Expert

We are looked up to by our community and peers as the organisation to go to for knowledge, training, best practice and latest techniques.

OUR STRATEGIC AIMS:

- **Provide a good death for everyone we care for**
- **Focus on wellbeing, including bereavement**
- **Develop models of care**

DELIVERING CARE

OUR SUCCESSES IN THE YEAR

- The hospice clinical teams have moved successfully and smoothly to the new St Catherine's site, settling into the new environment with minimal disruption to the care we provide. We have also used this opportunity to develop new initiatives, for example reconsidering the equipment used in emergencies on the ward.
- We have continued to develop and restructure the teams that provide care, and those who support them, to ensure that clinical staff have increased time to spend on the delivery of care and to meet the needs of all people approaching the end of life.
- We have further progressed working geographically to improve continuity of care and to build closer relationships with external healthcare professionals.
- Our Wellbeing and Therapy teams have launched new groups in our Wellbeing Suite, some focusing on common symptoms seen in people approaching the end of life, and some to offer social opportunities and emotional support.
- We have developed new links with Chestnut Tree House Hospice in Sussex and have worked collaboratively to develop pathways for the transition of young people with life limiting illness to adult palliative care services and how they can be best supported.
- We have been considering how we meet the needs of frail people and have successfully introduced regular use of frailty scores to clinical practice.
- We have created and delivered a Frailty Education Plan for nurses working in care homes, to help those teams understand more about the condition and how best to support those living with frailty.
- With funding from Hospice UK and the Kirby Laing Foundation, we have collaborated with Primary Care Network colleagues to run three five-week programmes to support people to live well with frailty. This covers various aspects including exercise, the importance of medication reviews and advance care planning.

- We have worked closely with colleagues in East Surrey to develop the concept of Ageing and Dying Well Integrated Neighbourhood Teams.

OUR FUTURE PRIORITIES

- We will continue to explore how the clinical teams can work most effectively and efficiently to meet the needs of those we are looking after, working collaboratively with other teams supporting people in the community. This will include a test of a more integrated model of care in two neighbourhoods in East Surrey.
- We will continue to explore what groups and clinics that can be offered for both the people we support and those close to them in our Wellbeing Suite. This will include a further Ageing Well Programme for people with frailty, run with support from the Kirby Laing Foundation via Hospice UK.
- We will continue to work closely with Shooting Star Chase Hospice in Surrey and will jointly build links with hospital paediatric palliative care teams to ensure smooth transition between services.



OUR MEASUREMENT AND IMPACT

- Our latest CQC (Care Quality Committee) inspection was carried out in 2016 with an overall rating of “Outstanding”. We regularly met with our CQC Relationship Manager until the monitoring process changed to maintain our expertise. We worked with CQC to commission our new premises.
- We are accredited with CHKS (Comparative Health Knowledge System) whose framework informs our internal Quality Management System.
- We provide annual submissions to the NHS Data Security and Protection Toolkit to provide assurance that the hospice is practicing good data security and that personal information is handled appropriately.
- 86% of people, families and carers asked said they would recommend St Catherine’s Hospice.
- 100% of families and carers were offered the VOICES bereavement survey.
- We received a total of 19 complaints about our clinical service delivery in the year. Of those 19 complaints, five were upheld and seven were partially upheld. 84% of complaints were responded to within the target of 25 days. We recognise there is room for improving and are working towards this improvement through staff training, reviewing our incident and complaints software and a renewed focus on our governance procedures.



Supporting people facing death and bereavement:

- 70% of people told us where they would like to die.
- Only 16% of the people we supported died in hospital.
- We provided 2,126 one-to-one counselling sessions.

Providing individualised support

- 100% of people we cared for received an individualised assessment and care plan.
- 1,637 people accessed our wellbeing services.
- Multi disciplinary team support was available to 100% of people referred to us and those close to them.

Harm free care

- We have had no acquired MRSA cases this year. We had a number of COVID related cases with an outbreak being declared during the summer of 2023. We were able to manage the outbreak in a way that did not necessitate the closure of the inpatient unit and admissions were able to continue. The last COVID case was in January 2024.
- We now have in place a new service level agreement with Sussex Community NHS Foundation Trust to provide infection, prevention and control (IPC) advice and guidance. Following our transition to Grace Holland Avenue, they completed an IPC audit in February 2024. An internal audit against the national IPC manual was completed in December 2023.
- All employees and volunteers are required to attend safeguarding training and our safeguarding team are on hand to offer continued support across the organisation.
- On the inpatient unit, there was one fall that resulted in moderate harm to a patient and no falls that resulted in severe harm to a patient.
- We submitted 9 Deprivation Of Liberty Safeguards applications during the 12-month period.
- Our training package for Duty of Candour was implemented and compliance with staff completion of this is monitored in governance meetings.

“IT’S AN HONOUR TO BE THE FIRST PERSON HERE”

It was an emotional day when we finally opened our doors to the first patient at Pease Pottage. It marked the last stage of our transition from Malthouse Road into our new home on Grace Holland Avenue.

The first person onto our state-of-the-art wards was Peter Griggs, who was warmly welcomed by St Catherine’s Chief Executive, Giles Tomsett, Ward Manager, Shelley Goshawk, and members of our clinical team.

After settling into his room Peter said, “I was quite overcome when I arrived, it’s an honour to be the first person here. The room is so lovely and spacious and I love being able to look out into the garden. It’s really beautiful and very comfortable too.”

Peter spent a few days on our Meadow Ward before successfully returning home, as planned. We caught up with Peter’s daughter Rhoda, who reflected on the whole experience:

“We felt so privileged that Dad was the first patient into the new hospice. We are a travelling funfair family and coming from our background we can be discriminated against. So, for Dad to be first was quite overwhelming.

“The minute you walk through those doors it’s like massive arms wrapping around you. I knew that I was safe and Dad was safe.

“Everyone has time for you, you’re not just a number, you are a person. Every day the staff not only looked after Dad, they also checked I was ok. People would come and talk to us. It’s not just the nurses – it’s the receptionists, the chefs, the cleaners, everyone. There’s not one person who isn’t lovely.

“Dad’s still talking about the food – he was telling a friend the other day that the food was really beautiful. Dad is a bit of a funny eater, but the chef spoke to him and checked what he wanted to eat and if there was anything else he wanted.

“My mum died last March and since then Dad said he’d not been living, he’d been existing. But St Catherine’s felt like a big, lovely family and they



helped to get Dad back to how he used to be. He was smiling and laughing and being himself again.

“We were all worried when we found out Dad was going into the hospice – it felt like the final stage, but now we know there’s nothing to be scared about. It’s wonderful that Dad was well enough to come home again. Even though I can’t give him 24-hour care like the hospice, the staff have reassured me and given me all the details for who to contact if I have any problems.

“Dad still can’t get over it – he tells every person he speaks to that he was the first person to be cared for in the new hospice and he says, “How lucky was I?”. He keeps saying it’s like a five-star hotel!”

Peter later returned to the hospice where he died peacefully surrounded by his family in January 2024. We’re very grateful to them for letting us share his story, and offer our sincere condolences to everyone who knew this remarkable man.

"I love my job! I think this is the best job in the world. I love coming to work. I know I'm making a difference for people.

We can make time for people. If they need me for 20 minutes, I give them 20 minutes. But if they need longer, I can give them more time. Ultimately, I chose to become a nurse to help people and I feel I am doing that. "

Tim Wallington, Senior Staff Nurse

2581 PATIENTS AND FAMILIES
WERE SUPPORTED IN THE
COMMUNITY AND **254** IN THE
INPATIENT UNIT



WE PROVIDED **3,951** DAYS OF
INPATIENT CARE, WITH AN
AVERAGE BED OCCUPANCY
LEVEL OF **92%** AND AN
AVERAGE LENGTH OF STAY
OF **17** DAYS



OUR COMMUNITY TEAMS
MADE **4354** HOME VISITS
AND **30578** TELEPHONE
CALLS OF WHICH **8739**
WERE PLANNED CALLS
WITH PATIENTS OR CARERS

**REACHING
THOSE WHO
NEED US**



WE MADE **3591** VISITS
TO PEOPLE'S HOMES
SUPPORTING IN
PRACTICAL CARE



WE PROVIDED **295**
PEOPLE WITH SOCIAL
CARE SUPPORT



STRATEGIC SUPPORT 1

QUALITY AND EXPERTISE

Build on our current level of expertise and demonstrate that we are CQC Outstanding.

OUR SUCCESSES IN THE YEAR

- We have reviewed our governance structures including updating all policies and procedures to ensure they are appropriate for our new site and that they will support us to maintain our CHKS accreditation.
- We have been involved in the development and pilot use of a pan-Sussex medication administration chart which we hope will be launched this summer.
- We have continued to develop the electronic patient record software “SystmOne”, improving integration between different healthcare systems, such as the pathology software at SASH (Surrey and Sussex Healthcare NHS Trust). We have optimised our use to maximise efficiency and communication with those that we look after and healthcare colleagues.
- We have continued to develop our medical training posts. This has supported the implementation of the Palliative Medicine Higher Specialty Training Programme and has also allowed us to provide more community experience for those doctors placed with us as part of their General Practice training programme.

- CQC registration of the new hospice was granted without any required remedial actions.
- All staff and patients were able to transition to the new hospice in line with planned timings.
- Water, fire, infection, prevention control, environmental health and insurance inspections of the new facility had no significant remedial actions required.

OUR FUTURE PRIORITIES

- We will review the information that we provide to the people we are looking after, those that are close to them and for other healthcare professionals, considering the content and the format that this takes.
- We are exploring opportunities to gain more immediate feedback from the people we support and those looking after them, both on the care that we provide and how we can improve in the future.

OUR MEASUREMENT AND IMPACT

- The new building is fully compliant to regulatory requirements. Informal feedback about the facilities from people we support has been overwhelmingly positive.

The people we care for:



**64% HAD
A CANCER
DIAGNOSIS**



**MALE = 46%,
FEMALE = 54%**



**45% LIVE IN
SURREY AND
54% LIVE IN
SUSSEX**



**65% ARE 75
OR OVER, AND
6% WERE AGED
UNDER 55**



**1637 PEOPLE
ACCESSED OUR
WELLBEING
SERVICES**

STRATEGIC SUPPORT 2

INCOME GENERATION

Empower our community to raise the money needed to provide the best possible hospice care, now and in the future.

FUNDRAISING

Our successes in the year

- Our community and events fundraising has returned to pre-pandemic levels, despite the ongoing impact of the cost-of-living crisis and peoples' propensity to give.
- We successfully recruited a team of over 50 trekkers to take on the 'Trek to Petra' in November 2024, with a second week required to meet the popular demand.
- We celebrated running our lottery for 25 years, with over £16 million raised in this time.
- Prior to opening to patients, we welcomed over 1,000 supporters to our new home at Pease Pottage in the Autumn. We hosted guided tours and events, as well as a special Open weekend where we invited the community along for self-guided tours, helping to demonstrate the impact of their support, particularly over the last 10 years.
- We returned to the water alongside our corporate supporters for the first Dragon Boats Festival event following the pandemic.
- Our volunteer led Golf Society raised over £31,000 meaning the society are on track to raise £250,000 since the society began.
- We hosted 239 corporate volunteers to build an ambitious garden trail in our new hospice grounds.
- We completed fundraising for our new building including securing a six-figure trust donation.

Our future priorities

- We will continue to build back and maximise our income opportunities to support the organisation in the delivery of our services, enabling exceptional standards of care.

- We will look for ways to attract new donors across the communities we serve, as well as stewarding of our existing supporters.
- We will use events and face-to-face activities to engage with communities across our patch and to demonstrate our commitment to everyone in West Sussex and East Surrey.
- We are committed to being insight led, and we will consider both internal and sector-wide trends and insight to make informed key planning decisions.

Our measurement and impact

- Our incredible donors gave over £8 million to deliver our care services and complete the build of our new site at Grace Holland Avenue.
- For every £1 spent on fundraising activity we raised £5 including legacy donations.
- We are registered and regulated by the Fundraising Regulator and Gambling Commission and fundraise in accordance with the Charities Act.
- We received and managed five complaints in the year about our fundraising activity against four complaints in the prior year (2022/23).



RETAIL

Our successes in the year

- We are so grateful for all those in the community who shop, donate or give their time by volunteering in our charity shops. We are delighted to have seen so many of you over the year and have received some fantastic donations! Overall, our charity shops have seen a good year in terms of money raised and we have seen an increase in both income and customer numbers.
- This year saw our first full year of trading in our new shop in Carfax, Horsham. This has proven a hit with the community and shown us how a change in location or size of shop can make a big difference with an increase in income of 89% compared to last year. It is fantastic to see our pre-loved bridal and prom offerings doing so well and since the shop opening, Catherine's Bridal has taken over £20,000 and sold 574 items.
- Following this success we have used the same model to inform our retail plans and have recently opened a new shop in East Grinstead, just a few doors down from the old shop, but with larger premises and again featuring preloved Catherine's Bridal. Early results are hugely promising and we are seeing a 120% increase in our first 4 weeks of opening!

Our future priorities

- As we look to the year ahead, we are hopeful the positive performance of our new shops continue and we will explore opportunities for larger shop premises across our patch.
- We have begun working with an organisation called 'Recycle your Cycle', who collect abandoned bikes across the UK and then work with the prison service to create bicycle repair shops in prisons, helping those in need to gain new skills and improve their employment prospects. Once refurbished the bikes are then supplied to charities to sell for additional funds. These have been introduced in a selection of our charity shops and are proving extremely popular to date and we will look to expand this in the months ahead.
- We are working with the online platform Shopiigo and World of Books to support our online retail offering.

Our measurement and impact

- We saw a 25% increase in shop sales over the year
- 2,257 people signed up to gift aid their shop donations.
- We sold over 136,000 items of clothing, over 76,000 books and nearly 5,000 items of furniture across our shops.
- This means we saved over 2 million kg CO2 Emissions and over 1 million trees absorbing CO2.



STRATEGIC SUPPORT 3

PEOPLE

Maximise professional and personal achievement of our people through focused and recognised contribution, in an inclusive, value-led culture.

Our successes in the year

- We have continued to develop the knowledge base and competency of our staff, by taking opportunities for our senior staff to work alongside and observe less experienced colleagues both in people's homes and on the ward. We are using competency frameworks for our clinical staff to identify gaps in skills and knowledge which will be used to plan our developmental training.
- Schwartz Rounds have successfully been re-launched offering a forum to reflect on the emotions and demands of working in a hospice environment delivering palliative and end of life care.
- We have built new relationships with Mid-Sussex Council and developed current relationships with Crawley, to continue to provide a healthy supportive workplace for all our staff teams.



- We have continued to develop our equality, diversity and inclusion (EDI) provision by continuing with our EDI group developing an inclusion policy and delivering deaf awareness training.
- We rolled out the Charity Retail Learning (CRL) system for trading colleagues, alongside bespoke volunteer management training for managers.
- It was our most successful year for volunteer enquiries, with over 940 people enquiring to volunteer, converting to 355 new starters; alongside our most successful round of trustee recruitment activities, attracting 60 enquiries and 30 applications.
- We reviewed and updated our lone working procedures, providing safe and practical steps for our employees and volunteers.
- We increased wellbeing support for all employees around change in preparation for the move to our new home on Pease Pottage.
- We inducted 100% of hospice staff and volunteers into our new home before moving in. This included orientation to the building, health and safety as well as learning how to use new equipment.
- We implemented a new learning management system for our staff and volunteers as part of a collaboration with four other Sussex Hospices.
- We acknowledged the impact of change with our move to our new home at Pease Pottage and as such ran 'Wellbeing January' providing opportunities for employees to attend massage sessions, wellbeing lunch and breakfast options and fruit bowls in break out areas, yoga sessions, walking groups and wellbeing MOT's.
- We have developed our recruitment practices to ensure we are inclusive.
- We have benchmarked salaries and roles to ensure we are paying the correct salaries for roles, whilst acknowledging the broader difficult financial environment.

Our future priorities

- We will develop and utilise digital systems for recruitment to improve efficiencies and user experience for applicants and recruiters.
- We will develop our volunteer roles, looking at new and innovative opportunities, and further develop our Alumni programme for engagement of past volunteers.
- We are exploring increasing our awareness and meeting the criteria to be 'disability confident level 3'.
- We are reviewing all the structures of our teams to ensure they are fit for purpose, efficient and affordable.
- We will continue to develop our relationship in the community to ensure we remain an employer of choice.
- We will review our access to training during 24-25 against EDI criteria.
- We will invite our staff to complete our bi-annual staff survey and act on any findings and improvements needed from this.

OUR MEASUREMENT AND IMPACT

Volunteering

- We have 868 active volunteers and recruited 355 new volunteers.
- We processed enquiries from 940 people wanting to volunteer (nearly 100% increase on 22/23)
- 44% of our new starters are under 25
- 55 volunteers received Long Service Awards for reaching milestones of between 5 and 35 years, with a combined service of over 629 years.

Learning, Education and Development

- 106 new starters were inducted to the organisation.
- 92% compliance to our statutory and mandatory for role training which is 3,290 modules.
- 303 external delegates received our training.

Human Resources

- Employee turnover reduced to 17% from 20% last year.
- Absence across the organisation is under 4% again, a reduction on last year. Considering the impact of covid and winter pressures and the relocation to our new home this is a real success.
- We are now reporting on EDI data on staff and volunteers.



STRATEGIC SUPPORT 4

BRAND AND MARKETING

Everyone in our community to know about St Catherine's and want to support us.

Our successes in the year

- We celebrated our 40th anniversary and invited our community to share memories in a time capsule which was buried at our new hospice.
- We shared engaging updates on the progress of our new hospice and organised public tours, building excitement towards the opening in December. Alongside our construction company Barnes Construction we were able to facilitate over 2,000 people visiting our site before it was opened (including a month of supporter activity in November 2023 which attracted 1,000 people).
- We gave our community the chance to say goodbye to our Malthouse Road site with an open week held in October and a book to capture important memories.

- We launched a new website with a patient focussed approach, simplified design and improved performance.

Our future priorities

- We will continue to utilise opportunities to engage with our community, particularly under-represented groups, and promote positive conversations around death and dying.

Our measurement and impact

- We gave our community many opportunities to be involved in a momentous year for St Catherine's, and recognised the emotional aspect of our transition to a new home.
- We have grown our social media communities by 4% and continue to generate good engagement.





CAPTURING 40 YEARS OF OUR CARE

Thanks to your unwavering support, 2023 is a significant year in the history of St Catherine's. Not only did we celebrate 40 years since we began providing expert care in 1983, but it is also the year we moved into our new home in Pease Pottage and said farewell to our hospice in Malthouse Road.

To capture this momentous milestone year and pay tribute to the last four decades of care, we buried a time capsule in the reflective garden of the new hospice.

Our hope is that the time capsule will be uncovered in another 40 years' time when we are celebrating our 80th anniversary in 2063! Within the reflective garden there will be a plaque highlighting where it is located for our future hospice community to see.

The time capsule was filled to the brim with memorabilia, historical documents, photos of Royal visits from The Queen Mother, Princess Diana and The Duchess of Kent, charity merchandise and even a trowel that was used to help build our new hospice.

However, most poignant of all the items were the personal testimonies, including photos, memories and even poems. There were memories of parents,

husbands, wives, partners, daughters, sons and friends whom St Catherine's has had the privilege of caring for at the end of their lives and their memory will live on with this capsule. Our sincere thanks to everyone who sent in a contribution.

At a small time capsule ceremony, our Chief Executive Giles Tomsett said:

"Let us hope that when this time capsule is opened in 40 years' time, the next generation will have continued our cause to ensure that there is the best end of life care for everyone and that all local people face death informed, supported and pain free."

"I have no doubt that, thanks to the drive, determination, imagination, and passion for our work, St Catherine's will continue to lead the way with exceptional local palliative and end of life care services – grounded in its founding principles of outstanding care, compassion and understanding."

Our time capsule represents all that has gone before us and everyone who has had a part to play in this incredible organisation so far, like you. It also marks the end of an era and the start of an exciting new chapter in our history as we transition from Malthouse Road into our new home on Grace Holland Avenue.



Burying the time capsule at our new hospice.



HRH The Queen Mother laying our original foundation stone in 1982

STRATEGIC SUPPORT 5

INFRASTRUCTURE AND RESOURCES

Optimise the value of charitable funds through effective and efficient use of all charity resources.

Our successes in the year

- We successfully managed the close down of the Malthouse Road site and its ongoing maintenance whilst vacant.
- We managed the transition of the Site Service Team to Grace Holland Avenue, while running teams across both sites when needed.
- We developed and launched new operating standards.
- We delivered health and safety inductions to our new site and implemented new fire procedures and learnings from Fire Drill.
- We opened the Woodgate Cafe and Community Hub, quickly establishing a client base and the leasing of the meeting space to regular bookers.
- The Woodgate Café & the main hospice kitchen both achieved five-star hygiene rating.

Our future priorities

- We will continue to work in partnership with Crawley Borough Council to complete the sale of Malthouse Road whilst respecting the local community and those with an emotional connection to our old site. This is a vital part of our organisation's future cash flow.
- We will develop a clear maintenance schedule for Grace Holland Avenue, including a decoration programme for the next five years.
- We will be ready to increase our room occupancy once resources and funding is available, ensuring we have capacity within our teams.
- We will have a clear business plan for the Woodgate Café and demonstrate an increase in profitability.

- We will work with Income Generation to engage supporters to help maintain the five-acre site.
- We will explore maximising the use of space at our new home including exploring third party options.

Our measurement and impact

- We successfully retained our workforce during the transition to our new home.
- Our new building has improved service delivery and our ability to be even more flexible around meeting patients and their loved ones needs, such as holding events like weddings within the grounds.
- The procurement of modern catering equipment supports a more varied selection of menus, and new housekeeping equipment ensures compliance with IPC standards.
- Overwhelmingly positive feedback from patients and families enhances our reputation and our ability to raise funds from supporters.

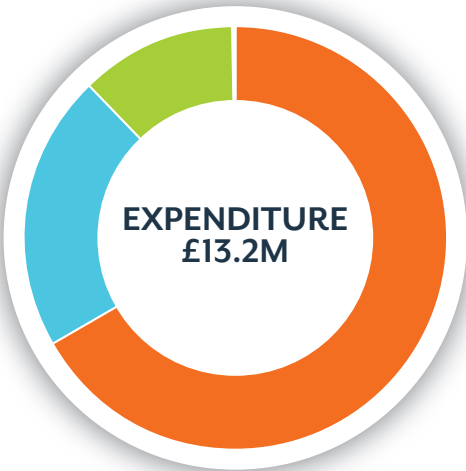


OUR FINANCIAL PERFORMANCE 2023/24

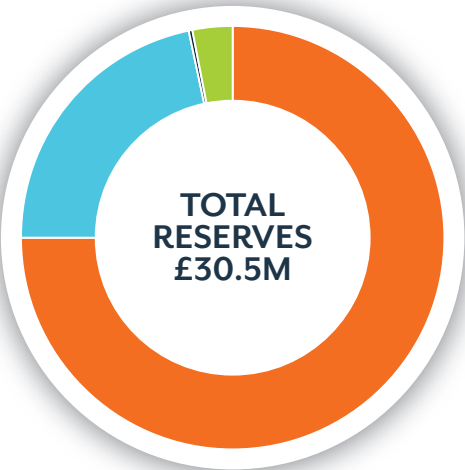
OPERATIONAL INCOME AND EXPENDITURE



- £4.0m Charitable Activities
- £3.6m Legacies
- £3.5m Donations
- £3.0m Trading Activities
- £0.3m Investment Income
- £0.3m Net Gains on Investments
- £0.2m Other Income



- £8.8m Charitable Activities
- £2.8m Trading Activities
- £1.6m Donations



- 22.8m Unrestricted Fixed Assets
- 6.6m Unrestricted Free Reserves
- 1.0m Designated
- 0.1m Restricted



- £4.6m Investments
- £1.8m Cash & Equivalents
- £0.2m Current Asset Investments

We have seen our income rise this year as a result of increased legacies, which, while supporting our cost base as we have transitioned to our new hospice at Grace Holland Avenue, Pease Pottage, we are cognisant that the reliance on this welcomed income stream is treated with caution, given its obvious variability.

Our retail shops have continued to perform well, with a full years trading at our flagship in Horsham, allowing us to monitor the new model and opening another larger premises in East Grinstead for the financial year 2024/25.

In the year we also opened our coffee shop and function rooms as part of the local community provision, which whilst carrying expected losses in the first year, has been well supported as we see activity grow.

We have continued to be impacted by pandemic changes in operation and the cost of living crisis which are softening our fundraising income streams as we are experiencing increased costs, especially salary related increases in tandem with minimal statutory funding increases.

As we said last year, we have focused the last year on rebuilding our services to support our move to our new hospice to meet our strategic aims and long term sustainability and this has continued to pose pressure on our cost base during this financial year. We have monitored this closely and will be taking actions during the financial year 2024/25 to address our performance in the current economic climate.

Following the completion of our new hospice in November 2023, we have capitalised the full cost of our asset and are holding the net book value of the site at Malthouse Road, pending its sale. We are continuing to work with Crawley Borough Council with the sale of our current site, providing the final funds required for the project which are currently supported by our free reserves.

Our resultant net income was £1.7m in the year of which £0.7m is attributable to unrestricted net income. Our free general reserves position was £6.6m as at 31st March 2024, after allowing for the pending asset disposal of Malthouse Road.

FINANCIAL OUTLOOK 2024/25

Operational Performance

Our forecasts set in February 2023 delivered an outlook for 2023/24 with a loss of £1.2m, which was overachieved given the greater legacy income received in the year. We continue to monitor performance and review our forecasts on a quarterly basis, ensuring risks and opportunities are reflected so we are able to take measured decisions.

Our budget for the financial year 2024/25 expects a loss in the year of £2.4m moving our free general reserves position to £5.6m. This position assumes the completion of the sale of Malthouse Road and prudent forecasting of legacy income, in accordance with our five-year forecast.

FUTURE SUSTAINABILITY

There are three key areas of focus set out by the Trustees to ensure our strategic delivery is delivered in a financially sustainable manner and are reflected in our forecasts.

FOCUS AREA 1: RISK

Risk 1: Changes in population demographics and service need (QC oversight)

As our population ages and those who are approaching end of life do so with a greater complexity of need, the demands on our services require enhanced skills for an increasing number of people, and without action we risk not being able to meet this need in a safe and effective way

In response, we built our new hospice and have expanded our teams to support this demographic change. We are cognisant that, in responding to this increasing need, we must ensure to make the best possible use of our expert clinicians, working in collaboration with health and social care colleagues working in primary, community and secondary care. We also need to work collaboratively in providing wellbeing support and signposting to other specialist and/or voluntary organisations where appropriate. Without this collaborative work, we cannot effectively respond to this changing and increasing need.

Risk 2: Our positioning in the healthcare system

We have a current reliance on inadequate NHS grants and poorly specified block contracts to support the delivery of our core services in the hospice and community. Compounding this statutory funding is not matched with appropriate annual inflationary increases. This, along with the agenda for change increases and doctor salary considerations in the NHS, results in a real time decrease year on year, impacting on our ability deliver our services and to recruit and retain key clinical roles.

Effective engagement with our statutory partners means that realistic forecasts are maintained whilst continuing to make the case for sustainable funding models. We are currently working to integrate with our system partners via a pilot which will roll out if successful to join services at PCN level, removing lengthy referral processes and having a joined-up approach to patient care. This approach will help us to identify a service driven cost model in an attempt to agree an efficient and sustainable funding formula for future contracting with the NHS.

Risk 3: The economic climate impact upon income generation

The current cost of living crisis in tandem with other world events has impacted not only our cost base but also our ability to raise funds at the level needed to support this cost base as the propensity for giving from our community of supporters has been impacted during this time. Our largest cost is our staff, which with the NHS agenda for change and National Living Wage impacts, annual inflationary salary increases have needed to be above those forecast.

We have been fortunate that the last few years we have seen pandemic government support, which has now ceased. Our financial position is modelled with a current and 5 year forecast process aligned with our monthly management accounts reporting and budget holder's review, additionally reviewed quarterly by our Board of Trustees. Income generation streams are routinely monitored and forecasts updated in line with market conditions. It is against this background that we now have to forecast revenue and consequently size our organisation to ensure future sustainability of the charity and core services.

Risk 4: Reliance on legacy income

A significant income stream for St Catherines, is that of legacies. However, its variable nature, requires prudent forecasting to ensure we are not over reliant.

Although legacies will remain an important part of our portfolio we have to adopt a conservative approach to any forecast. We are working on a revised legacy strategy, including being part of the Hospice UK national legacy marketing campaign and will begin foresight work shortly.

Risk 5: Poor leadership of the organisation

In the current operational environment, the lack of good leadership would lead to us being unable to navigate currently identified external factors, an inability to potentially identify and react to new risk factors in a timely manner and to provide adequate strategic thinking, direction and mitigations to ensure our future sustainability.

Our major control mechanism for this is the Integrated Governance Framework. Clear structures and transparent succession plans, allowing for open and effective utilisation of leadership resources across the organisation.



Risk 6 - Failure to meet regulatory requirements

Through ineffective leadership, training, monitoring or extraordinary circumstances that may lead to non-compliance recognised by external regulatory bodies, affecting our ability to operate our care services or fundraise.

A full suite of audit and compliance measures are in place, cognisant that cyber and intellectual property matters are now very much at the forefront of organisational compliance and security. The Information Governance structure is being bolstered by senior leadership focus and updated organisational roles alongside the ongoing regulatory assurance audits. Effective insurance is also in place to allow swift and effective access to support should any incidents occur.

FOCUS AREA 2: RESERVES

St. Catherine's reserves policy is to maintain free reserves at a level that is sufficient to protect services from the potential financial impact of known significant risks over the short to medium term. The focus of this policy is aligned to Free General Reserves as these reserves support operational activities.

The Trustees have agreed that in order to set a relevant free general reserves policy level which is in the charities best interests, a risk centered approach is most valid.

The Trustees recognise that as a healthcare organisation, the risk of full closure has always been low, given that alternative arrangements would be made to continue operations, which is addressed in our Business Continuity Plan. However, as we emerge from the pandemic and navigate the current cost of living crisis, complacency in this regard would be foolish. We have therefore adapted our policy to include the scenario where insolvency and redundancy for all staff is modelled and sits firmly in our strategic risk register.

The Trustees regularly review the hospice's strategic risk register which forms part of the Governance Framework.

Following appraisal of operational performance over the course of our current forecast period to FY 2028, the risks and opportunities associated with this and the redundancy and working capital exposure requirements, the Trustees have approved a free reserves requirement of between £9.1m and £3.1m.

Our free reserves as at 31st March 2024 were £6.6m, (31st March 2023: £8.4m). The calculation of free reserves is set out in Note 19 to the accounts.

The net movement in reserves in the year is set out in Notes 19 to 22 to the accounts.

FOCUS AREA 3: INVESTMENTS

The overall investment objective, which represent reserves held consistent with the reserves policy, is to provide financial security and stability, recognising that the charity is exposed to a degree of financial risk due to the variable and uncertain nature of its fundraising and NHS income. The Trustees seek to produce the best financial return within an acceptable level of risk.

Investments are divided into those expected to be held for a short-term (0-3 years) and long-term time horizon (3 years plus). The investment funds have separate return objectives.

Short Term Funds:

The Trustees require short term funds to support all known capital, operational, designated fund and restricted fund requirements in the next 3 years.

The investment objective for the short-term fund is to achieve a return in excess of short-term bank rates through investing in one or more Common Deposit Funds authorised by the Charity Commission with a Fitch rating of at least AAA.

Long Term Funds:

The Trustees require all funds in excess of the short term fund to be deposited in long term funds.

The investment objective for the long-term fund is capital preservation with some potential for capital appreciation, with a return over a rolling 5 years which exceeds CPI +2%.

The Trustees have adopted an ethical investment policy to ensure that its investments do not conflict with its aims or lead to reputational damage.

The Financial Sustainability Committee has responsibility for agreeing the investment strategy, setting benchmarks and monitoring the investment assets on a quarterly basis.

A formal evaluation of each fund managers' performance and consideration of the need to undertake full market testing is undertaken every 3-5 years.

Note 14 gives further information on the Investment position as at 31 March 2024.

Going Concern

Our five year forecasts have been reviewed in support of our strategic ambitions whilst modelling risk and cash management. We have acknowledged that the risks we now face are largely outside of our immediate control but have a significant impact on our ability to meet our ambitions whilst maintaining free reserves and cash management in the short to medium term.

As a result the Trustees have agreed an organisational restructure with a view to reducing our cost base by £1.5m, in tandem with concerted efforts, through an initial pilot, to work in a more integrated manner with our statutory partners to drive not only efficiencies but greater patient satisfaction. To this end we have provided £0.35m of designated funds to support restructuring costs that are expected in the coming year.

Whilst this cost saving does not address the full impact of forecast shortfalls, the Executive Team and Trustees are comfortable that our reserves position will support this level of saving and allow us to maintain services at an acceptable level which can be dialled up as and when the economy and other identified risk areas outside of our control improve.

Having reviewed and formally agreed the forecasts and cashflows prepared in February 2024, together with the Executive's business plan, the Trustees believe, to the best of their knowledge, that the charity remains a going concern for at least the 12-18 month period from the date of approval of the financial statements.

Structure, Governance and Management

The directors are also the Trustees of the charity for the purposes of company law and as such are responsible for the management of the hospital's affairs and its future strategy. The Trustees are required to hold at least four Board meetings a year. There are five committees, chaired by a Trustee which are attended by the appropriate Senior Management Team Member(s), which meet prior to and feed into each Board meeting.

- Financial Sustainability Committee (includes income generation activity)
- Joint People and Development Committee and Board Effectiveness Committee

- Quality Committee
- New Build Project Board (Chaired by VP)
- Remuneration Committee (Chief Executive remuneration only)

Rotation, recruitment, appointment and induction of Trustees

The Trustees consider it essential that the Board is strong, well-balanced and effective comprising members with the requisite professional skills and experience in healthcare or local services to properly represent users of the charity's services. Looking forward, the Board will carefully consider how it increase its diversity and inclusion to better meet the needs of the local population.

Trustees are recruited through local advertising and a robust selection process. Trustees serve for a maximum of two terms of four years each.

An induction programme is provided to all new directors. They are advised of their responsibilities as directors and Trustees, including their legal obligations under charity and company law and the charity Commission guidance on public benefit, given copies of the charity's governing documents, and are appraised of the charity's aims and activities, current financial performance and its plans for the future. All Trustees receive an annual performance review and are encouraged to attend appropriate external training events where these will facilitate the undertaking of their role.

The General Meeting was held in person this year, where the Trustees provided an overview of our achievements and future plans, allowing additional challenge to the Trustees and the organisation, on behalf of the community.

Senior Management Team

The Board delegates the day-to-day management of the hospice to the Chief Executive, and the officers of the company:

The charity has set up a clear pay progression arrangement for its senior leaders which reflects arrangements in place for all staff and managers. As the charity strives to make its reward offer as competitive as it can afford, it will continue to consider managers and senior management remuneration. The pay points for the Senior Management Team are now in place having recently been set, using benchmarks for similar sized charities. Pay progression for these senior officers is delegated to the Chief Executive. The Chief Executive's pay also progresses over several pay points and progression is agreed by the charity's Remuneration Committee.

The Senior Management Team meets weekly, rotating meetings to review strategy and business plan delivery, the quality management system across all activities, risk management and operational service performance, including budgetary review and regular reforecasting. The SMT have been trialling the closer engagement of the charity's senior managers recognising the risk that the pandemic might impact the availability of leaders at any time. This pilot has proven very successful and will be consolidated within the charity's Integrated Governance Framework.

Information is cascaded to the Heads of Department and key managers in two monthly interactive update sessions and to staff through appropriate all staff meetings, awards events and departmental team meetings. In the last year all meetings were held virtually. Trustees are invited to attend these meetings periodically to assure themselves of the quality of communication, education and training that is being provided.

Charitable Objectives

The hospice's charitable objectives which were set by the Trustees, with due regard to the Charity Commission's guidance on public benefit, are:

- To relieve suffering, provide comfort and improve quality of life for people with progressive life limiting illness:

- To relieve the suffering of people facing or experiencing bereavement by the provision of counselling; and
- To advance research and education in palliative and end of life care.

Statement of Directors Responsibilities

The Board of Directors is responsible for the approval of the annual accounts, ensuring compliance with the Charities Act 2011, the Companies Act 2006 and the Memorandum and Articles of Association and Accounting and Reporting Statement of Recommended Practice applicable in the UK and republic of Ireland, FRS 102.

Company law requires the directors to prepare financial statements for each financial year which give a true and fair view of the state of affairs of the charitable company and the group and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period.

The company has chosen in accordance with section 414C(11) of the Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2013 to set out within the company's strategic report the Company's Strategic Report Information required by Schedule 7 of the Large and Medium Sized Companies and Groups (Accounts and Reports) Regulation 2008. This includes information that would have been included in the business review and details of the principal risks and uncertainties.

In preparing those financial statements, the directors are required to:

- select suitable accounting policies and then apply them consistently.
- ensure compliance with the methods and principles in the Memorandum and Articles of Association and Accounting and Reporting Statement of Recommended Practice applicable in the UK and Republic of Ireland, FRS 102 which was effective from 1st January 2019.
- make judgements and estimates that are reasonable and prudent.
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements; and

- prepare the financial statements on a going concern basis unless it is inappropriate to presume that the company will continue in business.

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

In so far as the directors are aware:

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

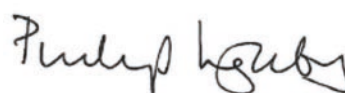
Details of directors' interests in contracts and related party transactions are given in note 10 to the accounts.

STATEMENT AS TO DISCLOSURE TO THE AUDITORS

In so far as the Trustees are aware, there is no relevant audit information of which the charitable company's auditor is unaware, and the Trustees have taken all steps they ought to have taken to make themselves aware of any relevant audit information and to establish that the auditor is aware of that information.

The auditor, Kreston Reeves LLP, has indicated their willingness to continue in office. A motion reappointing the auditor will be proposed at the next Board meeting.

The Report of the Board of Trustees, incorporating the strategic report, was approved by the Board on 3rd September 2024 and signed on its behalf by:



Philip Ingleby
Chair of Board of Trustees



OUR TRUSTEES, SENIOR MANAGEMENT TEAM AND ADVISORS

Our Trustees

Philip Ingleby	Chair of the Board of Trustees from June 2024 Chair of Financial Sustainability Committee
Gregory Andrews	Chair of Quality Committee from February 2023
Nicola Neal-Smith	Chair of Board Effectiveness Committee
Richard Griffin	
Diana Riley	
Julia Elliot	Appointed June 2024
Jonathan Ellis	Appointed June 2024
Gary Needle	Appointed June 2024
Tom Lay	Appointed June 2024
Renee Hobson	Appointed June 2024
Terence O'Leary	Resigned June 2024 Chair of the Board of Trustees & Chair Remuneration Committee
Alison Livesley	
Catherine Blackburn	
Kate Midgley	Resigned June 2024 Chair of People and Development Committee
John Abbott	Resigned June 2024
Yolanda Fernandes	Resigned May 2024

Co-Optee

Andrew Wates OBE DL	Resigned March 2024 Vice President
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Our Senior Management Team

Giles Tomsett	Chief Executive
Sam Farr	Director of Care Services
Paula McGoveney	Director of Income Generation and Marketing
Cathy Heard	Finance Director
Elly Powis	People and Site Services Director
Patricia Brayden	Resigned September 2024 Medical Director
Paul Rycroft	Resigned May 2024 New Build Delivery and Collaboration Director

Our Advisors

Independent auditors:

Kreston Reeves LLP, Springfield House,
Springfield Road, Horsham, West Sussex
RH12 2RG

Principal bankers:

Barclays Bank Plc, 90-92 High Street,
Crawley, West Sussex RH10 1YX

Solicitors:

DMH Stallard LLP, Gainsborough House,
Pegler Way, Crawley, West Sussex
RH11 7FZ

Investment Advisors:

Sarasin & Partners LLP, Juxon House,
100 St Paul's Churchyard, London
EC4M 8BU

Rathbone Brothers plc, 1 Curzon Street,
London, W1J 5FB

Registered Office:

Grace Holland Avenue, Pease Pottage,
West Sussex, RH11 9SL

Company Number: 01525404

Charity Registration Number: 281362

INDEPENDENT AUDITORS REPORT TO THE MEMBERS OF ST CATHERINE'S HOSPICE LIMITED

Opinion

We have audited the financial statements of St Catherine's Hospice Limited (the "parent charitable company") and its subsidiary (the "group") for the year ended 31 March 2024 which comprise the Consolidated Statement of Financial Activities, the Group and Hospice Balance Sheets, the Consolidated Cash Flow Statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and parent charitable company's affairs as at 31 March 2024, and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

The other information comprises the information included in the Trustees' 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.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the Trustees' Annual Report (incorporating the Strategic Report and the Directors' Report) for the financial year for which the financial statements are prepared is consistent with the financial statements; and
- the Strategic Report and the Directors' 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 group and parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Strategic Report and the Directors' Report.

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

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

Responsibilities of trustees

As explained more fully in the Trustees' responsibilities statement, the trustees (who are also the directors of the parent 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 and 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 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:

Capability of the audit in detecting irregularities, including fraud

Based on our understanding of the charity and sector as a whole, and through discussion with the directors and other management (as required by auditing standards), we identified that the principal risks of non-compliance with laws and regulations related to Care Quality Commission (CQC) regulations, restrictions imposed by charity law on the use of restricted funds, health and safety and employment law. We considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006, the Charities Act 2011 and Charities SORP (FRS 102)

2019 and consider other factors such as sales tax and payroll taxes. We communicated identified laws and regulations throughout our team and remained alert to any indications of non-compliance throughout the audit. We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls) and determined that the principal risks related to posting inappropriate journal entries to increase revenue or reduce expenditure, management bias in accounting estimates and judgemental areas of the financial statements such as legacy income recognition. Audit procedures performed by the engagement team included:

- Discussions with management and assessment of known or suspected instances of non-compliance with laws and regulations (including health and safety) and fraud, and review of the reports made by management; and
- Reviewing correspondence with relevant tax and regulatory authorities including the most recent CQC inspection reports; and
- Assessment of identified fraud risk factors; and
- Challenging assumptions and judgements made by management in its significant accounting estimates; and
- Performing analytical procedures with automated data analytics tools to identify any unusual or unexpected relationships, including related party transactions, that may indicate risks of material misstatement due to fraud; and
- Confirmation of related parties with management, and review of transactions throughout the period to identify any previously undisclosed transactions with related parties outside the normal course of business; and
- Reading minutes of meetings of those charged with governance; and
- Identifying and testing journal entries, in particular any manual entries made at the year end for financial statement preparation.

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

As part of an audit in accordance with ISAs (UK), we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- Identify and assess the risks of material misstatement of the financial statements, whether due to fraud or error, design and perform audit procedures responsive to those risks, and obtain audit evidence that is sufficient and appropriate to provide a basis for our opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- Obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the group's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the trustees.
- Conclude on the appropriateness of the trustees' use of the going concern basis of accounting and, based on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that may cast significant doubt on the group's or parent charitable company's ability to continue as a going concern. If we conclude that a material uncertainty exists, we are required

to draw attention in our auditor's report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our conclusions are based on the audit evidence obtained up to the date of our auditor's report. However, future events or conditions may cause the group or parent charitable company to cease to continue as a going concern.

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation (ie. gives a true and fair view).

We communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that we identify during our audit.

Use of our report

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

Kreston Reeves LLP

Lucy Hammond BSc FCA (Senior Statutory Auditor)

For and on behalf of Kreston Reeves LLP, Chartered Accountants and Statutory Auditor

Chichester

Date: **12 September 2024**



Financial Statements

Statement of Financial Activities (incorporating an income and expenditure account) for the year ended 31 March 2024

		Restricted	Designated	Unrestricted	Total Funds 2024	Total Funds 2023
	Note	£'000's	£'000's	£'000's	£'000's	£'000's
Income						
Donations & Legacies	2	1,343	0	5,768	7,111	6,985
Trading Activities	4	0	0	2,957	2,957	2,755
Charitable Activities	5	0	0	3,955	3,955	3,118
Investments	3	0	0	308	308	279
Other Income		0	0	243	243	180
Total Income		1,343	0	13,231	14,574	13,317
Expenditure						
Fundraising & Investment Activities		0	15	1,578	1,593	1,462
Trading Activities		0	21	2,732	2,753	2,171
Charitable Activities		235	84	8,527	8,846	7,521
Total Expenditure	6	235	120	12,837	13,192	11,154
Net Income / (Expenditure) on Operational Activities	7	1,108	(120)	394	1,382	2,163
Net Gains / (Losses) on Investments	14,15	0	0	318	318	(388)
Net Income / (Expenditure) for the Year	8	1,108	(120)	712	1,700	1,775
Transfer Between Funds	20,21	(7,683)	(10,948)	18,631	0	0
Net Movement in Funds		(6,575)	(11,068)	19,343	1,700	1,775
Funds B/F as at 1st April		6,704	12,039	10,049	28,792	27,017
Funds Carried Forward as at 31st March		129	971	29,392	30,492	28,792

All gains and losses arising in the current and previous year have been recognised in the Statement of Financial Activities and arise from continuing activities.

The prior year comparators for each fund included above are included in notes 27 to 31

The notes on pages 34 to 56 form part of these financial statements.

Financial Statements

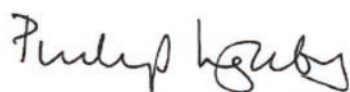
Balance Sheets as at 31 March 2024

Company Registration No. 01525404

		Group		Hospice	
		31 March 2024	31 March 2023	31 March 2024	31 March 2023
	Notes	£'000	£'000	£'000	£'000
Fixed Assets					
Tangible Assets	13	21,461	2,669	21,461	2,669
Assets Awaiting Disposal		1,290	0	1,290	0
Construction in Progress - Pease Pottage	13	0	13,398	0	13,398
Investments	14	4,649	7,316	4,699	7,366
		<u>27,400</u>	<u>23,383</u>	<u>27,450</u>	<u>23,433</u>
Current Assets					
Investments	15	248	493	248	493
Stock	16	3	7	0	0
Debtors	17	2,449	1,739	2,520	1,740
Cash at Bank		1,825	5,370	1,731	5,291
		<u>4,525</u>	<u>7,609</u>	<u>4,499</u>	<u>7,524</u>
Current Liabilities					
Creditors: amounts falling due within one year	18	1,425	2,180	1,424	2,180
Net Current Assets		<u>3,100</u>	<u>5,429</u>	<u>3,101</u>	<u>5,344</u>
Total Assets less Current Liabilities		<u>30,500</u>	<u>28,812</u>	<u>30,525</u>	<u>28,777</u>
Creditors: amounts falling due greater one year	11	8	20	8	20
Total Net Assets		<u>30,492</u>	<u>28,792</u>	<u>30,517</u>	<u>28,757</u>
The Funds of the Charity					
Restricted Funds	20	129	6,704	129	6,704
Designated Funds	21	971	12,039	971	12,039
Unrestricted Funds	21	29,392	10,049	29,417	10,014
Total Funds	22	<u>30,492</u>	<u>28,792</u>	<u>30,517</u>	<u>28,757</u>

The unconsolidated net income of the Hospice in 2023/24 was £1,758,000 (2022/23 £1,744,000).

The Financial Statements on pages 31 to 56 were approved by the Board of Directors and authorised for issue on 3rd September 2024 and are signed on its behalf by:



Philip Ingleby
Trustee / Director

The notes on pages 34 to 56 form part of these financial statements.

Financial Statements

Consolidated Cash Flow Statement as at 31 March 2024

		31 March 2024 £'000	31 March 2023 £'000
	Notes		
Cashflows from Operating Activities			
Net Cash provided by / (used in) Operating Activities	25a	440	3,269
Cashflows from Investing Activities			
Divestment of Investments		3,200	6,000
Divestment of Current Asset Investments		266	3,300
Purchase of Investments		0	0
Purchase of Property, Plant & Equipment		0	(173)
New Build Construction in Progress		(7,451)	(10,868)
Net Cash provided by / (used in) Investing Activities		(3,985)	(1,741)
Change in Cash & Equivalents in the Reporting Period		(3,545)	1,528
Cash & Equivalents at the beginning of the Reporting Period		5,370	3,842
Cash & Equivalents at the end of the Reporting Period	25b	1,825	5,370

The notes on pages 34 to 56 form part of these financial statements.

Accounting Policies

Principal Accounting Policies

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

Basis of Accounting

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (Second Edition, effective 1 January 2019) – (Charities SORP (FRS102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006.

The hospice meets the definition of a public entity under FRS 102. Assets and liabilities are initially recognised at historical cost unless otherwise stated in the relevant accounting policy notes.

Legal Status of the Charity

The charity is a company limited by guarantee and has no share capital. In the event of the charity being wound up the liability in respect of the guarantee is limited to £1 per member.

Going Concern

Having given prioritised oversight of, the financial forecasts, cashflows and risk register during the year in response to the pandemic and its impact on future aspirations, the Trustees have realigned the hospice's future strategic direction to meet short to medium term constraints. The Trustees, therefore, consider that there are no material uncertainties about St Catherine's Hospice Limited's ability to continue as a going concern for the foreseeable future. The charity's free reserves position is currently within its reserves policy requirements which has been agreed on a risk-based profile. Medium-term forecast projections indicate that the charity's free reserves remain within its policy's acceptable limits.

Material Areas of Judgement

The most significant area of judgement and key assumptions that affects items in the accounts is the estimation of income from Legacies. The estimated value of each outstanding legacy at 31 March is calculated in accordance with the principles set out in the Donation, Grants and Other Income section below. Another significant area of assumption is in respect of depreciation of Fixed Assets. The rates of write down are shown in the Tangible Fixed Assets section below. The Trustees are satisfied that these write down rates are a reasonable reflection of the expected useful life of the assets in each class.

Group Financial Statements

These financial statements consolidate the results of the charity and its wholly-owned subsidiary St Catherine's Hospice Trading (Sussex) Limited on a line by line basis. A separate statement of financial activities, or income and expenditure account, for the charity itself is not presented because the charity has taken advantage of the exemptions afforded by section 408 of the Companies Act 2006.

Fund Accounting

Unrestricted funds are available to spend on activities that further any of the purposes of the charity. Designated funds are unrestricted funds of the charity which the Trustees have decided at their discretion to set aside to use for a specific purpose. Restricted funds are donations where the donor has specified they should only be used for particular areas of the hospice's work. The aim and use of each designated and restricted fund is set out in the notes to the financial statements. Investment income, gains and losses are allocated to the appropriate fund.

Donated Assets

Tangible assets donated to the hospice are recorded at the original estimate of their value to the company.

A donation of land was received in 2019/20 and accounted for in accordance with this policy ensuring the valuation was a fair value, carried out by external professional valuers, as defined within FRS102 being the "amount for which an asset could be exchanged, a liability settled, or an equity instrument granted could be exchanged, between knowledgeable, willing parties in an arm's length transaction".

Tangible Fixed Assets

Fixed assets other than donated assets are stated at historical cost. All assets costing more than £2,000 are capitalised.

Depreciation is provided on all tangible fixed assets, other than freehold land, at rates calculated to write down each

Accounting Policies

asset to its estimated residual value evenly over its expected useful life, as follows:-

Freehold buildings	2% per annum on cost
Extensions and refurbishments	10% per annum on cost
Equipment (excluding leasehold improvements)	25% or 17% per annum on cost
Leasehold improvements	calculated on remaining length of lease
Computer Equipment	25% per annum on cost
Motor vehicles	25% per annum on cost

Taxation

The company is considered to pass the tests set out in the Finance Act 2010 and therefore meets the definition of a charitable company for UK corporation tax purposes. Accordingly, the company is potentially exempt from taxation on income or capital gains to the extent that such income or gains are applied exclusively to charitable purposes.

Operating Leases

Rental costs under operating leases are charged to the general fund operating account in equal annual amounts in accordance with the terms of the lease. Any benefits received or receivable as an incentive to sign an operating lease are recognised on a straight-line basis over the period of the lease.

Pension Contributions

The charity operates a defined contribution pension scheme, the assets of which are held separately from those of the charity in independently administered funds chosen by individual staff. Some staff participate in the NHS defined benefit pension scheme. Any resulting liabilities on this scheme would be met by the State. Therefore, contributions payable for the year in relation to either scheme are charged in the Statement of Financial Activities.

The company also participates in a multi-employer scheme which provides benefits to some 950 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the company to obtain sufficient information to enable it to account for the scheme as a defined benefit scheme. Therefore, it accounts for the scheme as a defined contribution scheme.

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

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

The charity is also making additional payments into the fund in order to eliminate the deficit. These payments commenced in April 2013 and are currently scheduled to continue until January 2025. To recognise the future liability and in accordance with FRS 102 the Trustees have agreed to make a provision for the present value of the outstanding deficit contributions.

Further details including the current buy-out debt amount and value of the provision are given in Note 11.

Donations Grants and Other Income

Income is recognised in the Statement of Financial Activities when the charity is entitled to the funds, any performance conditions attached to the item(s) of income have been met, it is probable that the income will be received and the amount can be measured reliably.

Where income has related expenditure (as with fundraising or contract income) the income and related expenditure are reported gross in the Statement of Financial Activities.

- In the event that a donation or grant is subject to fulfilling performance conditions before the charity is entitled to the funds the income is deferred and not recognised until it is probable that those conditions will be fulfilled in the reporting period. Income from Gift Aid reclaims is recognised for any donations with relevant Gift Aid certificates recognised in income for the year. Any amounts of Gift Aid not received by the year end are accounted for in income accrued in debtors.
- Income from NHS contracts, government or other grants, whether capital or revenue in nature are recognised

Accounting Policies

when the charity has entitlement to the funds, any performance conditions have been met, it is probable that the income will be received and the amount can be measured reliably.

- Income, including sponsorship received in advance for a future fundraising event or for a grant received relating to the following year is deferred until the criteria for income recognition is met.
- Items donated for resale through the retail shops are included in the accounts when the items are sold.
- Investment income is included when receivable and the amount can be measured reliably, usually when the notification of interest payable is received from the bank. Dividends are recognised once the dividend has been declared and notification has been received of the amount due.
- Income from legacies is determined on a case by case basis in accordance with the following principles. Pecuniary legacies are recognised once probate has been granted and notification has been received that payment will be received. Residuary legacies are recognised once probate has been granted, provided that sufficient information has been received to enable valuation of the hospice's entitlement with sufficient certainty; amounts receivable are included at 90% of their valuation, to reflect the sector's experience of the uncertainty inherent in the administration of estates, subject to further reduction to reflect the impact of other factors such as the valuation of unrealised estate assets or subsequent adverse movements in property and investment markets. Where legacies have been notified to the charity or the charity is aware of the granting of probate and the criteria for income recognition have not been met then the legacy is treated as a contingent asset and disclosed if material.
- All subscriptions for the lottery draws are deferred, with income drawn down each week. All other income received in one period but relating to future periods is shown as deferred income under creditors.

Donated Goods and Services

Donations of goods and services, including seconded NHS doctors, are recognised when the charity has control over the item, any conditions associated with the donated item have been met, the receipt of economic benefit from its use is probable and the economic benefit can be reliably measured. These items are included in income at the estimated value of the gift to the charity when received based on the amount the charity would have been prepared to pay had it been required to purchase them.

Volunteers

The value of the services provided by volunteers is not incorporated into these financial statements. Further details of their contribution are provided in note 12.

Expenditure

Expenditure is included in the Statement of Financial Activities on an accruals basis once there is a legal obligation to make a payment, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is categorised under the following headings:

Costs of raising funds comprises fundraising costs incurred in seeking donations, grants and legacies; investment management fees; costs of fundraising activities including the costs of goods sold, shop costs, commercial trading and their associated support costs. Fundraising costs do not include the costs of disseminating information in support of the hospice's charitable activities.

Expenditure on charitable activities includes the costs of providing specialist palliative care and support to patients, their families and the wider community; research and other educational activities undertaken to further the purposes of the charity and their associated support costs.

Support costs comprise those costs which are incurred directly in support of expenditure on the objects of the hospice and include governance cost, finance and office costs. Governance costs are those costs incurred in connection with complying with constitutional and statutory requirements of the charity. Where practicable irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Support costs are allocated to each of the activities on a variety of bases, principally headcount, floor area or time spent on activities depending on the nature of the support costs, to best allocate the costs to each attributable heading. More details on the analysis and basis of allocation is given in note 6.

Financial Instruments

The hospice only has financial assets and liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at their transaction value and subsequently measured at their settlement value.

Investments

Investments are a form of basic financial instrument and are initially recognised at their transaction value and subsequently measured at their fair value as at the balance sheet date using the closing quoted market price, except

Accounting Policies

for the shares in the trading subsidiary which are carried at cost. The Statement of Financial Activities includes the net gains and losses arising on revaluation and disposals throughout the year.

All gains and losses are taken to the Statement of Financial Activities as they arise. Realised gains and losses on investments are calculated as the difference between sales proceeds and their opening carrying value or their purchase value if acquired during the financial year. Unrealised gains and losses are calculated as the difference between the fair value at the year end and their carrying value. Realised and unrealised investment gains and losses are combined in the Statement of Financial Activities.

The charity does not acquire put options, derivatives or other complex financial instruments. The main form of financial risk faced by the charity is that of volatility in equity and bond markets due to wider economic conditions, the attitudes of investors to investment risk and changes in sentiment concerning equities and other instruments within particular sectors.

Stock

Stock of goods for resale is valued at the lower of cost and estimated selling price less selling costs. Stock donated for resale are not included in the financial statements until they are sold because the Trustees consider it impractical to be able to assess the amount of donated stocks as there are no systems in place to record these until they are sold and undertaking a stock take would incur undue cost and income loss for the charity which would far outweigh the benefits.

Debtors

Trade and other debtors are recognised at the settlement amount due after any discounts offered. Prepayments are valued at the amount prepaid net of any discounts due. Accrued income and tax recoverable is included at the best estimate of the amounts receivable at the balance sheet date.

Cash at Bank and in Hand

Cash at bank and cash in hand includes cash and short term highly liquid deposits with a short maturity of 95 days or less from the date of acquisition or opening of the account.

Creditors

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

Supporting Notes to Financial Statements

1 Income

Income derives from the group's principal activities carried on wholly in the United Kingdom.

2 Income from Fundraising Activities

	Restricted £'000's	Designated £'000's	Unrestricted £'000's	2024 £'000's	2023 £'000's
Donations	6	0	2,010	2,016	1,962
Legacies	0	0	3,591	3,591	3,048
Other Grants	77	0	167	244	149
Donations in Kind	111	0	0	111	0
Capital Appeal - Pease Pottage	1,149	0	0	1,149	1,826
	1,343	0	5,768	7,111	6,985

3 Income from Investments

	2024 £'000	2023 £'000
Listed Investment Income	151	157
Interest Received -Investments held as Current Assets	8	26
Interest Received – Bank and Other	149	96
	308	279

4 Income from Trading Activities

	2023 £'000's	2023 £'000's
Retail	1,682	1,412
Lottery	1,006	987
Fundraising Events	269	356
	2,957	2,755

Supporting Notes to Financial Statements

5 Income from Charitable Activities

	2024 £'000	2023 £'000
Surrey ICB Income		
NHS Block Contract / Grant Surrey	1,723	1084
NHS Contribution to Drug Costs	59	61
NHS Contribution to Lymphoedema Service	0	0
Pension Rebate	36	36
Consultant Income	47	24
Notional Income supporting seconded Junior Doctors	415	290
Seconded Nursing to NHS	25	
Research Grant	0	0
	2,305	1,495
Sussex ICB Income		
NHS Block Contract / Grant Sussex	1,042	989
NHS Community Support Pilot - Sussex	319	319
Pension Rebate	36	36
Income for Inpatient Beds from Continuing Healthcare (CHC) - Sussex	53	49
West Sussex Bed Days	17	0
NHS Contribution to Drug Costs	74	68
Urgent Response	85	21
	1,541	1,461
COVID 19 Hospice UK (HUK) Support	0	0
COVID 19 Clinical Commissioning Group (CCG) Support	0	125
Education Income	24	16
	3,955	3,118

Statutory income from Surrey Heartlands CCG included an expedited receipt of £600k, in 2021/22, in support of additional staffing and agency costs during the height of Omicron which was offset in the 2022/23 contractual agreement.

Supporting Notes to Financial Statements

6 a) Expenditure

	Direct Costs £000's	Support Costs £000's	Depreciation £000's	Total 2024 £000's	Total 2023 £000's
Fundraising / Investment Activities					
Donations, Legacies & Grants	1,131	378	48	1,557	1,386
Capital Appeal - Pease Pottage	0	0	0	0	41
Investment Management	36	0	0	36	35
	1,167	378	48	1,593	1,462
Trading Activities					
Retail Shops	1,376	596	52	2,023	1,788
Lottery Costs	250	136	5	391	178
Fundraising Events	67	262	9	339	205
	1,693	994	66	2,753	2,171
Charitable Activities					
Inpatient Services	2,951	1,374	109	4,434	3,913
Community Services	2,638	718	98	3,454	3,010
Wellbeing Services	344	417	46	807	346
Education	50	91	10	151	253
	5,983	2,599	263	8,846	7,521
	8,844	3,971	377	13,192	11,154

b) Analysis of Support Costs in a) above

	Facilities & Hospitality £000's	Support Services £000's	Corporate Comms £000's	Governance £000's	Support Costs Total £000's
Fundraising / Investment Activities					
Donations, Legacies & Grants	91	190	69	28	378
	91	190	69	28	378
Trading Activities					
Retail Shops	148	368	24	55	596
Lottery Costs	91	13	29	2	136
Fundraising Events	91	96	61	14	262
	330	478	114	72	994
Charitable Activities					
Inpatient Services	410	817	24	122	1,374
Community Services	114	505	24	76	718
Wellbeing Services	159	203	24	30	417
Education	34	40	11	6	91
	718	1,565	82	235	2,599
	1,140	2,233	265	335	3,971

Supporting Notes to Financial Statements

7 Trading Operations

The wholly owned trading subsidiary, St Catherine's Hospice Trading (Sussex) Limited, UK company registration number 02822993, pays all its eligible profits to the charity under Gift Aid, where these are not covered by losses brought forward. The company manages the sale of purchased goods through the hospice retail shops as well as the collaboration agreements with St Peter and St James Hospice for Finance support and St. Wilfrid's Hospice for IT support. Notice has been served on the collaboration agreements which will terminate during 2024/25. In June 2023, the trading company also undertook to operate the community hub for the community surrounding its new location, which includes the operation of the coffee shop and management of two interlocking function rooms. Losses in the first and second year are expected, with projections seeing breakeven and future viability from year three.

The charity owns the entire issued share capital of 50,000 shares of £1 each.
A summary of the trading results is shown below.

	2024 £'000	2023 £'000
Turnover	449	227
Cost of Sales	97	30
Gross Profit	352	197
Other Operating Expenses (net)	376	163
(Loss) / Profit on Ordinary Activities	(24)	34
Donations under Gift Aid	35	4
(Loss) / Profit retained in the Subsidiary	(59)	30
Profit Brought forward	85	54
Profit Carried forward	26	85

8 Net Income / Expenditure

	2024 £'000	2023 £'000
Net Income / (Expenditure) is stated after charging:		
Tangible Fixed Asset Depreciation and amounts Written Off in the Period		
Owned Assets	343	159
Operating Lease Rentals - Equipment	21	23
Operating Lease Rentals - Shops & Office	351	380
Auditors Remuneration - Audit	26	18
Auditors Remuneration – Tax Business	0	0

Supporting Notes to Financial Statements

9 Employees

	2024 FTE's	2023 FTE's
Average Weekly FTE's		
Fundraising	26	22
Retail	27	26
Inpatient Services	45	50
Community Services	46	41
Wellbeing Services	8	0
Education	0	3
Support Services	56	50
	207	192

The hospice employs a significant number of staff on a part-time basis. The average of number of paid staff in the charity and group in 2023/24 was 250 (2022/23: 243).

	2024 £'000	2023 £'000
Staff Costs		
Salaries	8,325	6,961
Social Security Costs	788	676
Other Pension Costs	693	570
	9,806	8,207

The hospice made ex gratia payments to staff in 2023/24 of £24,000 (2022/23 £22,000). Pension costs for 2023/24 are £693,000 (2022/23 479,000), net of NHS funding. Included in the staff costs above is £415,000 (2022/23 £291,000) in respect of seconded NHS doctors paid from NHS funds.

The number of employees who received emoluments in the following ranges was:

	31 March 2024 £'000	31 March 2023 £'000
£60,001 - £70,000	3	2
£70,001 - £80,000	4	1
£80,001 - £90,000	1	3
£90,001 - £100,000	1	2
£100,001 - £110,000	3	1
£110,001 - £120,000	1	1
	13	10

All of the above higher paid employees are accruing retirement benefits under schemes treated as defined contribution schemes. The company made pension contributions of £120,000 on behalf of these staff in 2023/24 (2022/23 £91,000).

The hospice considers that the key management personnel comprise the senior management team – who are the Chief

Supporting Notes to Financial Statements

Executive and 6 other key Directors. The total employee benefits of the key management staff were £676,000 (2022/23 £751,000).

10 Related Party Transactions

During the year no Trustees received any remuneration or benefits in kind (2022/23 £Nil). Moreover, no Trustees received any reimbursement of travel expenses (2022/23 £Nil). Donations from Trustees to the charity amounted to £13,000 in 2023/24 (2022/23 £24,000).

The charity provided services during the year to its wholly owned trading subsidiary, St. Catherine's Hospice Trading (Sussex) Limited. The charge for those services amounted to £27,000 (2022/23 £26,000). No donation was made under gift aid from the trading subsidiary in the year, given first year expected losses in the set up of the Community Hub at Grace Holland Avenue (2022/23 £3,790).

There were no other related party transactions in the current year or previous year.

11 Pension Contributions

The hospice participates in a defined benefit pension scheme operated by The Pensions Trust.

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

Deficit contributions

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

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

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

Deficit contributions

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

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

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

Present Value of Provision	2024 £'000	2023 £'000	2022 £'000
Present Value of Provision	8	20	31

Supporting Notes to Financial Statements

Reconciliation of Opening & Closing Provisions

2024
£'000

2023
£'000

Provision at start of Period	20	31
Unwinding of Discount Factor (Interest Expense)	2	1
Deficit Contribution Paid	(11)	(12)
Remeasurement - Amendment to Contribution Schedule	0	0
Provision at End of Period	8	20

Income & Expenditure Impact

2024
£'000

2023
£'000

Interest Expense	1	1
Amendment to Contribution Schedule	(1)	(1)
Costs charged to Income & Expenditure Account	0	0

A rate of discount of 5.31% has been assumed in 2023/24, (2022/23 5.52%) representing the Hospice's estimate of the cost of money to the charity. The discount rates are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

The hospice also participates in a defined contribution pension scheme operated by the Pensions Trust, the assets of which are held separately from those of the hospice. Employees contribute between 3.2% and 6% of their salary with the charity contributing 150% of the employee contribution.

The total pension cost charge of the group represents contributions payable by the charity and amounted to £693,000 (2022/23: £563,000).

At the year-end contributions outstanding totalled £1,000 (2022/23: £0) and are included in the creditors. The estimated employer pension contributions payable by the company in 2024/25 is £650,000.

12 Volunteers

The charity is dependent upon a team of part-time voluntary helpers who assist in all areas of the charity's care. There are three key types of volunteers:

Hospice Volunteers - providing a range of clinical services (e.g. complementary therapy, counselling, patient drivers) and support services (e.g. administration, hospitality, gardeners).

Retail Volunteers - providing sorting and till support to 14 charity shops, our warehouse and e-commerce work.

Community - supporting our fundraising work through Friends groups, running street collections and supporting events (e.g. marshalling, registration, refreshments, game stalls).

Supporting Notes to Financial Statements

13 Tangible Fixed Assets

Hospice & Group	Freehold Land & Buildings £'000	Equipment £'000	Motor Vehicles £'000	Construction in Progress £'000	Total £'000
a) Tangible Fixed Assets					
Cost / Valuation at 1st April 2023	5,279	1,240	48	13,399	19,966
Additions	6,526	1,037	(0)	0	7,562
Transfers	13,399			(13,399)	0
Disposals	(4,288)	(1,250)	(48)	0	(5,585)
Cost / Valuation at 31st March 2024	20,916	1,027	0	0	21,943
Depreciation at 31st March 2023	2,747	1,110	40	0	3,897
Charged in the Year	295	75	7	0	377
Disposals	(2,814)	(931)	(47)	0	(3,792)
Depreciation at 31st March 2024	228	254	0	0	482
Net Book Value 31st March 2024	20,688	773	0	0	21,461
Net Book Value 31st March 2023	2,532	130	8	13,399	16,069
b) Assets Awaiting Disposal					
NBV - Assets awaiting Disposal	1,290	0	0	0	1,290

All the tangible fixed assets of the group are part of the accounts of the main charity. Following the completion of the new hospice at Grace Holland Avenue with an additions value of £20.7m, all new assets have been capitalised from construction in progress and have are depreciated accordance with hospice policy from December 2023. With the pending sale of the previous site at Malthouse Road, all assets and costs of maintaining the asset until the sale is completed have been disposed of and held on the balance sheet as assets awaiting disposal. This value is £1.3m, as shown in the table above.

Market value of land and buildings

Freehold land at Malthouse Road was donated to the hospice and valued at £60,000 by the Directors in December 1983.

Freehold land at Pease Pottage was donated to the hospice in December 2018. The Trustees carried out a valuation, supported by a firm of independent advisors, who valued the land at £1,000,000. The basis of value is at a fair value, as defined within the Financial Reporting Standard FRS102, being "the amount for which an asset could be exchanged, a liability settled, or an equity instrument granted could be exchanged, between knowledgeable, willing parties in an arm's length transaction".

Supporting Notes to Financial Statements

All freehold land and buildings are included in the financial statements at lower of cost and open market value. In the opinion of the Directors, the open market value of the freehold land and buildings is not less than the stated value.

14 Fixed Asset Investments

Listed Investments £'000

Market Value 1st April 2023	7,316
Realised Gains / (Losses) on Disposal	62
Unrealised Gains / (Losses)	256
Dividends & Interest	159
Management Fee	(36)
Movement of Shares to Investments	92
Funds withdrawn for New Hospice Build	(3,200)
Market Value 31st March 2024	4,649
Historical Cost 31st March 2024	4,197

Investments held by the charity also include an additional £50,000 (2022/23 - £50,000) investment in the subsidiary company at cost.

Subsidiary Company

Name	Country of Incorporation	Class of Holding	Proportion Held	Aggregate Capital & Reserves £'000	Result for Year £'000
St Catherine's Hospice Trading (Sussex) Limited	England	Ordinary	100%	50	-

15 Investments held as Current Assets

	£'000
Cost / Market Value 1st April 2023	493
Interest	21
Cash withdrawn for New Hospice Build	(266)
Cost / Market Value 31st March 2024	248
Historical Cost 31st March 2024	230

16 Stock

	Group		Hospice	
	2024	2023	2024	2023
	£'000	£'000	£'000	£'000
Stock				
Goods for Resale	3	7	0	0
	3	7	0	0

Supporting Notes to Financial Statements

17 Debtors

	Group		Hospice	
	2024	2023	2024	2023
	£'000	£'000	£'000	£'000
Debtors				
Trade Debtors	207	90	206	90
Accrued Legacy Income	1,561	1,133	1,561	1,133
Amounts due from Subsidiary Company	0	0	81	0
Other Prepayments & Accrued Income	510	363	480	363
Other Debtors	171	153	192	154
	2,449	1,739	2,520	1,740

18 Creditors: Amounts falling due within one year

	Group		Hospice	
	2024	2023	2024	2023
	£'000	£'000	£'000	£'000
Creditors				
Trade and Other Creditors	559	214	559	214
Taxation and Social Security Costs	186	160	186	160
Accruals & Deferred Income	611	1,770	610	1,770
Other Creditors	69	36	69	36
	1,425	2,180	1,424	2,180

Deferred Income

At Start of Year	105	144	105	144
Released in Year	(105)	(144)	(105)	(144)
Deferred in Year	251	105	251	105
At End of Year	251	105	251	105

Deferred income of £251k (2022/23 £105k) includes £115k (2022/23 £105k) of prepaid lottery income and has increased in the year with the re-introduction of fundraising events for which income of £136k has been received in advance.

Supporting Notes to Financial Statements

19 Reserves – Movements by Fund

This schedule presents the final reserves position by fund.

	Restricted Funds	Designated Funds	Unrestricted Funds	Total Funds
Balance as at 01/04/2023	6,704	12,039	10,049	28,792
Net Operating Income / (Expenditure)	1,108	(120)	394	1,382
Net Gains / (Losses) on Investments	0	0	318	318
Net Inc / (Dec) in Reserves	1,108	(120)	712	1,700
Transfers between Funds	(7,683)	(10,948)	18,631	0
Net Inc / (Dec) in Reserves	(6,575)	(11,068)	19,343	1,700
Balance as at 31/03/2024	129	971	29,392	30,492
Less:				
Fixed Assets			21,461	21,461
Assets Awaiting Disposal			1,290	1,290
Available Reserves	129	971	6,641	7,741

The pending sale of the previous site at Malthouse Road is expected to achieve a minimum of £1.4m which will build back reserves, although this is not expected for 12 – 18 months as the sale proceeds.

Notes 20 and 21 provide further detail on fund movements in the year.

20 Restricted Funds: Group & Charity

	Balance 1 April 2023	Income in Year	Expenditure in Year	Transfers In / (Out)	Balance 31 March 2024
Inpatient services	18	7	21	0	4
Community Services	0	64	64	0	0
Wellbeing Services	188	12	75	0	125
Education	28	0	28	0	0
Capital & Equipment	31	0	31	0	0
Other	0	17	17	0	0
Total Funds	265	100	236	0	129
Donations in Kind	1,000	111	0	(1,111)	0
New Horizons Donation to New Build	1,100	0	0	(1,100)	0
Capital Appeal - Pease Pottage	4,339	1,133	0	(5,472)	0
Total Funds	6,704	1,344	236	(7,683)	129

The hospice may receive grants or donations whose use is restricted by the donor. In these circumstances, the funds are shown as restricted.

The restricted fund is managed through a governance group with expenditure aligned to donations.

Supporting Notes to Financial Statements

Inpatient Services

Inpatient Unit equipment.

Wellbeing Services

Garden fund - monies raised to re-develop and enhance the hospice garden.

Creative Therapies – funds to support creative activities primarily in the Day Hospice.

Living Well groups – donations provided to support the operation of Living Well activity groups.

Community Services

Horsham Carers Support – funds provided by Horsham Hospital League of Friends to provide support and practical skills training for carers in the Horsham area.

Community Nursing – funds donated towards the cost of a community nursing.

Capital & Equipment

Funds raised in support of capital and equipment.

Other

Funds raised for items not included above.

Capital Appeal – Grace Holland Avenue, Pease Pottage

All funds aligned to the new hospice have been transferred to General Funds in line with the associated assets.

We thank our kind suppliers for their donations of £111,000 of Gifts in Kind which were made to the hospice:

Description of GIK	GIK Value	Supplier
Management of spoil movement works	20,000	Sean Joyce
Landscaping	60,000	Santander Consumer Finance / Splash
WAP & AV Equipment	21,800	AJP Solutions & BoxFitOut
Patient Room TV's	4,500	TSS
IT Consultancy	2,250	Fractionary
Artwork - Memory Tree etc	1,000	Jon Collins
Trees & Whips	1,320	SHW / Woodland Trust / Carpenter Box
	110,870	

21 Unrestricted Funds

	Balance 1 April 2023	Income in Year	Expenditure in Year	Gain / (Loss) on Investments in Year	Transfers In / (Out)	Balance 31 March 2024
Designated Funds						
New Hospice Fund	11,233	0	0	0	(11,233)	0
Strategic Delivery	806	0	119	0	285	972
Total Designated Funds	12,039	0	120	0	(10,948)	971
General Funds	10,049	13,231	12,837	318	18,631	29,392
Total Unrestricted Funds	22,088	13,231	12,956	318	7,683	30,364

Supporting Notes to Financial Statements

Unrestricted reserves are available to be used for:

- The day to day running of the hospice.
- The costs of any capital projects in whole or in part where the cost is not met from any other fund; and
- For any other purpose as the Directors see fit to fulfil the objectives of the hospice.

Designated funds have been agreed by the Trustees to support costs in the delivery of its strategic goals.

New Hospice Fund

All funds aligned to the new hospice have been transferred to General Funds in line with the associated assets.

Strategic Delivery Fund

The Trustees have agreed to designate funds in support of the delivery of the charity's strategic aims with regular review and monitoring. Current funds are detailed below:

	£'000
Digital and IT Strategy	421
Operational Projects	200
Organisational Restructure	350
	971

22 Analysis of Group Net Assets between Funds

	Unrestricted	Restricted	Total Funds 2024	Unrestricted	Restricted	Total Funds 2023
	£'000	£'000	£'000	£'000	£'000	£'000
Tangible Fixed Assets	22,735	16	22,751	2,653	16	2,669
Construction in Progress - Pease Pottage	0	0	0	7,032	4,803	11,835
Fixed Asset Investments	4,549	100	4,649	7,216	100	7,316
Current Asset Investments	248	0	248	493	0	493
Other Current Assets	4,197	13	4,210	5,139	1,785	6,924
Current Liabilities	(1,358)	0	(1,358)	(423)	0	(423)
Provisions	(8)	0	(8)	(22)	0	(22)
	30,363	129	30,492	22,088	6,704	28,792

23 Members of the Hospice

As at 31 March 2024 there were 53 members (2022/23: 52) of the company who are required to contribute £1 each in the event of the company being wound up.

Supporting Notes to Financial Statements

24 Operating Lease Commitments

At 31 March 2024 the group was committed to make the following payments in respect of operating leases:

	2024 £'000	2023 £'000
Land & Buildings		
Amounts due within One Year	404	291
Amounts due in Two to Five Years	1,030	736
Amounts due in over Five Years	468	96
Other		
Amounts due within One Year	22	23
Amounts due in Two to Five Years	7	7
	1,931	1,153

Payments under operating leases are recognised as expenditure as they fall due. No provision has been made for future commitments.

25 Cashflows

	2024 £'000	2023 £'000
a) Net Income / (Expenditure) for the Reporting Period	1,700	1,775
Adjust for:		
Depreciation	377	159
(Gains) / Losses on Sale of Assets	502	13
Non Cash Donations (Shares, Land & Property)	(203)	0
Net (Gains) on Investments	(441)	(20)
Net (Gains) on Current Asset Investments	(21)	0
(Increase) / Decrease in Stocks	4	4
(Increase) / Decrease in Debtors	(710)	71
Increase / (Decrease) in Provisions	(12)	(11)
Increase / (Decrease) in Creditors	(756)	1,278
Net Cash provided by / (used in) Operating Activities	440	3,269
b) Analysis of Cash & Cash Equivalents		
	2024 £'000	2023 £'000
Cash in Hand	1,825	5,370
Total Cash & Cash Equivalents	1,825	5,370

Supporting Notes to Financial Statements

26 Capital Commitments

With the completion of the new Hospice building in November 2023, the charity has a remaining capital commitment of £257k with Barnes Construction the approved contractor.

The sale of the previous site is in progress with a minimum value expected of £1.4m, although the estimated completion date is between 12 and 18 months.

Supporting Notes to Financial Statements

27 SOFA prior Year Comparatives

		Restricted	Designated	Unrestricted	Total Funds 2023	Total Funds 2022
	Note	£'000's	£'000's	£'000's	£'000's	£'000's
Income						
Donations & Legacies	2	1,971	0	5,014	6,985	4,333
Trading Activities	4	0	0	2,755	2,755	2,391
Charitable Activities	5	1	0	3,117	3,118	4,715
Investments	3	0	0	279	279	133
Other Income		0	0	180	180	310
Total Income		1,972	0	11,345	13,317	11,882
Expenditure						
Fundraising & Investment Activities		0	63	1,400	1,462	1,249
Trading Activities		0	39	2,132	2,171	2,071
Charitable Activities		65	143	7,313	7,521	6,935
Total Expenditure	6	65	245	10,844	11,154	10,255
Net Income / (Expenditure) on Operational Activities	7	1,907	(245)	501	2,163	1,627
Net Gains / (Losses) on Investments	14,15	0	0	(388)	(388)	115
Net Income / (Expenditure) for the Year	8	1,907	(245)	113	1,775	1,742
Transfer Between Funds	20,21	0	0	0	0	0
Net Movement In Funds		1,907	(245)	113	1,775	1,742
Funds B/F as at 1st April		4,797	12,284	9,936	27,017	25,275
Funds Carried Forward as at 31st March		6,704	12,039	10,049	28,792	27,017

Supporting Notes to Financial Statements

28 Note 6 Expenditure – prior year

a. Expenditure

	Direct Costs £000's	Support Costs £000's	Depreciation £000's	Total 2023 £000's	Total 2022 £000's
Fundraising / Investment Activities					
Donations, Legacies & Grants	1,080	284	22	1,386	1,144
Capital Appeal - Pease Pottage	41	0	0	41	71
Investment Management	35	0	0	35	34
	1,156	284	22	1,462	1,249
Trading Activities					
Retail Shops	1,315	449	23	1,788	1,603
Lottery Costs	83	93	2	178	282
Fundraising Events	9	192	4	205	186
	1,407	734	30	2,171	2,071
Charitable Activities					
Inpatient Services	2,837	1,026	50	3,913	3,615
Community Services	2,413	552	44	3,010	2,777
Wellbeing Services	19	305	21	346	308
Education	182	67	4	253	235
	5,451	1,951	119	7,521	6,935
	8,014	2,969	171	11,154	10,255

b. Analysis of Support Costs

	Facilities & Hospitality £000's	Support Services £000's	Corporate Comms £000's	Governance £000's	Support Costs Total £000's
Fundraising / Investment Activities					
Donations, Legacies & Grants	57	163	54	10	284
	57	163	54	10	284
Trading Activities					
Retail Shops	94	317	19	20	449
Lottery Costs	58	12	23	1	93
Fundraising Events	57	83	48	5	192
	208	411	89	26	734
Charitable Activities					
Inpatient Services	260	703	19	44	1,026
Community Services	72	434	19	27	552
Wellbeing Services	101	175	19	11	305
Education	22	35	8	2	67
	455	1,347	64	85	1,951
	720	1,922	207	121	2,969

Supporting Notes to Financial Statements

29 Note 20 Restricted Funds - prior year

	Balance 1 April 2022	Income in Year	Expenditure in Year	Transfers In / (Out)	Balance 31 March 2023
Inpatient services	22	2	6	0	18
Community Services	20	32	52	0	0
Wellbeing Services	188	0	0	0	188
Education	28	0	0	0	28
Capital & Equipment	31	0	0	0	31
Total Funds					
COVID-19	0	6	6	0	0
Total Including COVID-19 Funds	289	40	64	0	265
Donations in Kind	1,000	0	0	0	1,000
New Horizons Donation to New Build	1,100	0	0	0	1,100
Capital Appeal - Pease Pottage	2,408	1,931	0	0	4,339
Total Funds	4,797	1,971	64	0	6,704

30 Note 21 Unrestricted Funds – prior year

	Balance 1 April 2022	Income in Year	Expenditure in Year	Gain / (Loss) on Investments in Year	Transfers In / (Out)	Balance 31 March 2023
Designated Funds						
New Hospice Fund	11,233	0	0	0	0	11,233
Strategic Delivery	1,051	0	245	0	0	806
Total Designated Funds	12,284	0	245	0	0	12,039
General Funds	9,936	11,344	10,843	(388)	0	10,049
Total Unrestricted Funds	22,221	11,344	11,088	(388)	0	22,088

Supporting Notes to Financial Statements

31 Note 22 Analysis of Group Net Assets between Funds – prior year

	Unrestricted	Restricted	Total Funds 2023	Unrestricted	Restricted	Total Funds 2022
	£'000	£'000	£'000	£'000	£'000	£'000
Tangible Fixed Assets	2,653	16	2,669	2,668	0	2,668
Construction in Progress - Pease Pottage	7,032	4,803	11,835	65	2,465	2,530
Fixed Asset Investments	7,216	100	7,316	13,229	100	13,329
Current Asset Investments	493	0	493	3,768	0	3,768
Other Current Assets	5,139	1,785	6,924	3,223	2,232	5,655
Current Liabilities	(423)	0	(423)	(902)	0	(902)
Provisions	(22)	0	(22)	(31)	0	(31)
	22,088	6,704	28,792	22,220	4,797	27,017

Our special thanks to all who have supported St Catherine's in 2023-24.
Our full audited accounts are available at: www.stch.org.uk

We would like to thank the patients and family members who have kindly
allowed us to feature their photographs and words in this report.

Grace Holland Avenue,
Pease Pottage,
West Sussex, RH11 9SL

enquiries@stch.org.uk
www.stch.org.uk
01293 447333

f St Catherine's Hospice Crawley
@StCHospice
@stcatherinescrawley



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