



A year of resilience



Ashgate Hospice Annual Report
April 2021 – March 2022

www.ashgatehospice.org.uk

Hospice care for the people of North Derbyshire

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



Key to symbols

- Town or village
- Place of interest
- ☒ Chesterfield Royal Hospital
- Catchment area
- 📍 Ashgate Hospice Shop



Our teams make 6,000 home visits every year.

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Highlights 2021/2022

599 
volunteers
gave their time freely

Our youngest
volunteers are
15 years old
whilst our
eldest is **88**!

70%
of our
volunteers are
women 


£90,682
was raised from
our raffles
£179,000
was raised
from gift aid
in fundraising
activities

131,742
visited our website
for information,
support and
to fundraise. 




£128,500
was won by our supporters
in the Ashgate lottery


The best-selling
item in our
coffee shops
was a latte with
8,671
sold

894,447
items
were sold
across our
15 charity
shops

 **2,229** patients and their families
supported across North Derbyshire

 **345** received specialist inpatient care

 **257** people access Day Services support

 **1,294** people were cared for in their
own homes

 **1,183** people were supported by our
Supportive Care teams

A message from our Chair and Chief Executive

At Ashgate Hospice we do whatever it takes to support those living with a life-limiting illness. This past year was no exception.

Sadly, COVID-19 has remained a very real threat to our way of life and to the vulnerable patients in our care. Despite this, our teams continue to evolve and adapt their ways of working as we learn to live alongside the virus.

After the unprecedented year before, this has taken much resilience. But we are proud to say that we never took our foot off the pedal – in fact, we've used the pandemic as an opportunity to strengthen our services, ensuring that our patients and their families are at the heart of all our decision making.

This resilience was recognised when our Inpatient Unit team won the highly coveted Royal College of Nursing Award for their Outstanding Contribution to Infection Prevention and Control. This award recognised the team for their scrupulous approach to infection prevention which had avoided any outbreaks of COVID-19.

Perhaps even more importantly, our team were able to allow patients to continue to receive visitors throughout the pandemic, ensuring those in their final days were given the dignity, respect and love they deserved.

Not only have we been there to support our patients and their families, but we've also continued to support our healthcare partners. We've been by their side every step of the way, continuing to admit end of life COVID-19 positive patients and freeing up hospital beds at every opportunity.

It is the sheer resilience of the Ashgate workforce that continues to see us through these challenging times, and which ensures we can be there when it matters most.

Of course, none of what we do would be possible without the support of our local community and the tenacity of our fundraising team. Every year we must raise £8 million to continue to provide our services and that is no mean feat when we're still very much in the grips of a global pandemic.

That is why we were delighted to welcome shoppers back into our 15 shops when they reopened in April 2021. With precautionary measures in place, we have been able to safely continue trading and in fact, we celebrated our most successful week in retail – managing to take £105,326 in our first week open.

The way in which we are funded, and indeed the way in which end of life care services are funded nationally, continues to be an important topic and one we are fiercely passionate about. With an aging population who are living for longer with complex health concerns, the demand for end of life care will continue to increase. That is why we have continued to talk about the very important subject of sustainable funding, raising the issue with our local MPs.

It would be remiss of me not to recognise the potential impact that this sustained resilience could have on our teams. Our frontline workers were under stress from increased workloads and pressure. To support them, we recruited a Wellbeing Advisor to help support and manage their emotional needs. Alongside a comprehensive calendar of wellbeing initiatives, she has been onsite to provide a listening ear when needed.

Despite our achievements, there is still more to be done. We want to support every person who needs us and not just those who require the most complex care. We want to increase our presence in those harder to reach areas of North Derbyshire. We want to address the inequalities faced by marginalised people accessing our services. We want to ensure a more diverse and inclusive workforce. None of these things will be easy. But we are confident that we will see change and that we can turn these aspirations into our reality.

It will take resilience. It will take hope. And most importantly it will take everyone working together in our 'One Ashgate' approach.

With our purpose and vision so clear, we would just like to take this opportunity to say thank you to our supporters, partners, volunteers and employees for the crucial part they are playing in delivering our care and support to the people of North Derbyshire.



BA Walker
Barbara-Anne Walker,
Chief Executive



N Jeffrey
Nicholas Jeffrey,
Chair of the Board of Trustees

Strategic report

In this section, you can read about who we are and what we do, our plans for the future and a summary of our objectives for the coming financial year.



Tony Jackson during his stay at Ashgate's Inpatient Unit .



Karen explains how Ashgate Hospice was there for her father in his final moments.

Tony Jackson was diagnosed with a rare form of motor neurone disease (MND) in November of 2020 and died in December 2021 after receiving care on our Inpatient Unit.

Karen said: "Our first stay with Ashgate was in Summer of 2021 to manage his symptoms. Both of my parents were fiercely independent, so getting used to carers over a relatively short period of time was trying. But the wonderful medical and nursing staff optimised his care, and Dad never lost his sense of humour and positivity.

"The physiotherapists took him for walks around the grounds, which he loved. We received regular home visits from the specialist nurse and the consultant, and through this we felt respected, looked after, and listened to. I especially remember the much-needed humour in the face of a terrifying disease. Ashgate made Dad feel as comfortable as he possibly could be.

Karen's story

"Dad died at Ashgate in December 2021. We weren't there with him when he passed away – I had gone home for a rest, expecting to see him again the next day – so it was such a comfort to speak to the two wonderful nurses who were holding his hands for us.

"The staff are special at Ashgate. They are skilled, compassionate, and open.

"I honestly do not know how we would have managed without them; we all have an increased respect for the work they do and the need for the specialised approach that is needed for people who are at very vulnerable stages of life."

Who we are and what we do

We were founded in **1988**

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

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

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

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

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

When it comes to funding, much of the care and services we deliver are funded by the generosity of our supporters. In fact, more than 70% of what we do is paid for through fundraising and less than 30% comes from local NHS budgets.

Support when it's needed

When someone living in North Derbyshire is diagnosed with a life-limiting illness, they can access Ashgate Hospice's services through a referral. This normally comes from their GP, hospital team or community nurse.

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

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

Our COVID-19 referrals work in the same way. End of life patients with COVID-19 are referred to us by their GP, hospital team or community nurse and we then provide our care either at our Inpatient Unit or in the community.

We have been sure to allow as much visiting as possible throughout the pandemic. This is important not just for patients, but for their loved ones too.



More than **70%** of what we do is paid for through fundraising



What we believe

We're working to ensure everyone in North Derbyshire has access to excellent palliative and end of life care when they ask for it and where they need it. Here's how:

Our vision

Our vision is for people with a life-limiting illness to be able to live well and to have a good death – well informed and supported – and for their loved ones to be well supported and comforted too.

Our purpose

We provide, campaign for, and educate about, specialist palliative and end of life care and bereavement support. We aspire to be a centre of excellence – working as part of the wider healthcare system with energy, openness, compassion and hope.

Our values

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



Delivering our purpose

At the beginning of 2022, we published our Three Ambitions that set out the ideal world we want to create – not what we are doing day to day – but what we hope will one day come about.

These ambitions were split into three categories; our care, our people and our voice.

Our care

Care is at our heart. We open our arms to you and the people you care about.

Our ambition for our care – an Ashgate model of care which:

- is about living well and dying with dignity and in comfort
- is accessible to everyone who needs our care, in all their diversity
- is safe, and always improving, using feedback, our expertise, research, emerging ideas and innovation
- is delivered in collaboration with other care providers – including on issues where we can have more influence and impact together – promoting best practice across different healthcare settings
- is fairly funded, well supported and understood.

Our people

We are the One Ashgate team working together with warmth and hope to provide compassion and care. Our aim is to be exceptional in everything we do.

Our ambition for our people – a One Ashgate team who:

- bring our values to life with the people in our care at the centre of everything we do
- connect and collaborate, working together and where everyone's views are heard and valued

- are proud ambassadors and fundraisers for Ashgate Hospice and understand how we all help deliver outstanding care
- are committed to improvement and excellence, celebrating successes together and speaking up when something is wrong or requires change
- are leaders and learners, committed to our wellbeing and able to say why a positive working culture matters
- reflect the diversity of the communities we serve.

Our voice

We use our trusted voice to make things better for our patients, their loved ones and people needing specialist palliative and end of life care in North Derbyshire and further afield.

Our ambition for our voice – a powerful and combined Ashgate voice which:

- increases our reach, influence and impact across North Derbyshire and beyond
- is as inclusive and accessible as possible, so that everyone can get the help they need
- helps create a North Derbyshire community who know how to support people at the end of their lives, and those living with loss
- encourages conversations about death and dying, and demystifies hospice care
- advocates locally, regionally and nationally for specialist palliative and end of life care to be properly funded and resourced.



Sue, outside Ashgate Hospice's Community Hub.

Our plans for the coming year

Our ambitions for the coming year have been shaped by the pandemic and how we will continue to operate alongside the virus. We must now focus on developing our services, creating financial sustainability and a workforce that continues to be resilient.

With all this in mind, in 2022/23, we will:

1. Improve access to our services by creating a single point of access and triage hub for all service referrals. This will speed up the process, ensuring that patients and their families get the help and support they need when it's needed. We'll also look at the services we offer, and which ones can be extended to further support the community 24/7, helping equity of access across North Derbyshire.
2. Collaborate and work with others, sharing our expertise to develop the specialist skills of clinical/social care staff and introduce new roles to enhance skill mix and care provision.
3. Bring our care into the heart of the communities we serve by opening community hubs across the region that are tailored to the needs of that area.
4. Support more children and young people who are experiencing bereavement by extending our services into areas of greatest need in North Derbyshire.
5. Develop the specialist clinical services provided on site at Ashgate to reduce the need for patients to have to go offsite to attend hospital.
6. Invest in research, working alongside East Midlands Clinical Research Network to contribute to improvements in palliative and end of life care for all.
7. Continue to work towards more equitable access to our care and services, ensuring staff and volunteers receive comprehensive equality, diversity and inclusion training.
8. Work in partnership with local organisations to exchange best practice and expertise in working with dementia, learning disabilities, mental health, LGBT+, disability and other underrepresented groups.
9. Offer more management and leadership development opportunities to our staff, taking a values-based approach and ensuring we continue to be a compassionate employer.
10. Review the way we fundraise, including our retail portfolio, to ensure that we are raising as much money as possible.

OUR IMPACT:

A look back at a year of unprecedented need

We are hugely proud of the difference we have made and the quality of the care we have provided during the year 2021/22, including to end of life patients with COVID-19.

We would like to thank the resilience of our incredible workforce who together have pulled us through this challenging time. We would also like to thank our funders, supporters and donors for their unwavering support.



Our care

In 2021/22, our teams supported more than 2,200 people living with a life-limiting illness, their families and their loved ones. This care is delivered at our specialist Inpatient Unit at Old Brampton and out in people's own homes right across North Derbyshire and the High Peak and Dales.

Crucial care and services for those living with a life-limiting illness

At Ashgate Hospice, we offer a holistic range of services to help our patients and their loved ones manage both their physical and emotional needs. Some of these services had to stop temporarily or be delivered virtually during the height of the COVID-19 pandemic. We were about to cautiously reopen many services when the Omicron variant once again meant we had to direct resources to the frontline. From August, we managed to resume more in-person services for the first time since the very start of the pandemic.

During the year our services included:

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

Lymphoedema specialist support – our small team of highly specialist lymphoedema nurses work with our medical team to provide support and care to patients who have lymphoedema. We help them by carrying out a thorough assessment and providing an individual treatment plan. The plan may consist of skincare, massage, exercise and compression. It aims to manage the symptoms of lymphoedema and improve quality of life.

Counselling & therapies – the Counselling Team is part of the Ashgate Hospice Supportive Care Team and is based in the Harry Fisher Building at the hospice. Our service is available to patients with palliative care needs, their families, friends and carers. We offer a safe space for our patients to be heard and supported, as they explore their concerns and any issues they wish to resolve.

Outpatient care – we continued to provide important services including lymphoedema treatment, counselling, consulting, medical assistance, physiotherapy, psychology, consultation with the Ashgate Community Nurse Specialists and bereavement services.

Social work – the Social Work Team is based at the hospice and out in the community. They work alongside other professionals and agencies to understand the needs of patients, their families, friends and carers. They help people to understand what help and support are available and what wider needs must be met (for example, the needs of children and young people when an important adult in their lives has died). They help to arrange and manage practical support for daily tasks.

Spiritual care – our team of spiritual care practitioners works as part of the supportive Supportive Care Team. They are all specially trained and experienced in providing person-centred spiritual care in a healthcare setting and provide support to patients, their relatives, friends, carers, staff members and volunteers. The team seeks to listen,

with compassion, helping people to explore their own sources of strength, comfort and hope.

Occupational therapy – Occupational Therapists promote independence and quality of life when a patient's illness has restricted their normal activities of daily living. The team works very closely with other members of the care team, carers and community agencies, but the patient's choice is central to any decisions made. They can see patients in a variety of settings, including their own homes and at Ashgate Hospice's Inpatient Unit and Day Services. They can also provide an advisory role to nursing and residential homes.

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

Inpatient Unit – our Inpatient Unit at Old Brampton in Chesterfield offers the reassurance of round-the-clock, expert care and support.

Day Services – to reduce the spread of infection our day services continued to offer virtual support throughout the year, alongside the return of some in-person services including our new Community Hub at our Hasland site. The combination of virtual and in-person services has worked really well and included telephone and online support packages so that we were keeping in touch with patients and able to see how they were doing.

- **345** people received specialist Inpatient care
- **257** people accessed Day Services support
- **1,294** people were cared for in their own homes
- **1,183** people were supported by our Supportive Care teams
- **723** people were supported to live independently by our Occupational Therapists
- **474** people supported by the Lymphoedema team
- **569** patients received physiotherapy support
- **132** people were supported with complementary therapies



Ward Manager, Karen Walker, accepted the award on behalf of Ashgate Hospice.

Keeping our inpatient care open and safe

Keeping our patients, staff, volunteers, visitors and the wider community safe has continued to be a priority.

Throughout the year our infection control measures remained in place – even when the government removed all legal restrictions in July.

Our infection control measures during the year worked well for us and included weekly COVID-19 testing for all patient facing staff and volunteers, strict personal protective equipment (PPE) requirements for workers and visitors and ensuring access to COVID-19 positive patients' rooms for visitors is through a separate entrance and exit to the main ward on the Inpatient Unit.

Inpatient care at a glance:

- During 2021/22, there was a small increase in the number of referrals to our Inpatient Unit with **488 referred** compared to 464 the previous year.
- During 2021/2, the Inpatient Unit cared for **345 patients** and their loved ones. The average length of stay on the Inpatient Unit during the year was **12.5 days**.
- During 2021/22, our **average bed occupancy was 85%**, with **87% of patients admitted within two days** of referral.

Ashgate Hospice's Inpatient Unit wins prestigious Royal College of Nursing award

The Inpatient Unit team from Ashgate Hospice were delighted to win an award from the Royal College of Nursing Institute in October 2021.

The **Outstanding Contribution to Infection Prevention and Control Award** was won by the Inpatient Unit team, who were recognised for their scrupulous approach to infection prevention which had avoided any outbreaks of COVID-19 and had allowed patients to continue to receive visitors throughout the pandemic.

"It is a privilege to be part of this incredible team who have consistently gone above and beyond to ensure our patients and their families receive the very best care," Ashgate's Ward Manager, Karen Walker said, in accepting the award.

She continued: "When COVID-19 first hit we were quick to respond to the changing demands and procedures that must be put in place, this was despite our own anxieties and fears around the virus.

"I feel honoured that my team have been acknowledged and it's amazing that we have been given this award. I look forward to continuing to make a difference alongside my colleagues and ensuring those who need our care can access it."

Supporting those living with a life-limiting illness out in the community

Our community teams cover North Derbyshire: Chesterfield, North East Derbyshire, the Derbyshire Dales and most of the High Peak. They help people living in these communities access the services Ashgate Hospice has to offer so they can have the best possible quality of life.

In 2021/22, our Clinical Nurse Specialists and Palliative Care Support Workers provided support for 1,294 patients at home. They undertook 2,624 visits and made 16,993 phone and video calls.

Because we provide essential end of life care at home, our patients are able to stay where they feel most comfortable, surrounded by the people they love, for as long as possible. If their condition deteriorates or their symptoms worsen, we can provide closer monitoring and care at our Inpatient Unit.

We provide out-of-hours telephone advice and support to patients, their carers and other health professionals.

All the patients whom we cared for at home, who completed our patient experience questionnaires, said that they would recommend us to friends or family.



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- They undertook 2,624 visits.
- They made 16,993 phone and video calls.



Sophie's story

Sophie is a Palliative Care Nurse with Ashgate Hospice and has been caring for patients and their families in their own homes for the past four years. This includes providing crucial support on special occasions like Christmas Day.

Sophie said: "I'm really proud that regardless of what time of year it is the hospice is still there for people going through the worst possible time.

"Whether it's someone to cry to and let it all out, for advice on medication or even a Christmas Carol singalong down the phone – I will be there to support the families who need us in whatever way I can.

"It is important that we go above and beyond to help people make memories every day, but particularly at this time of year.

"Christmas is a time for family, love and thanksgiving, but I think in situations like this it can sometimes bring home all of the worries of the future and the things you're going to miss or never be able to have.

"Christmas really makes you appreciate what you have, and I am privileged to witness patients celebrating and laughing with loved ones despite all their heartaches and issues.

"It is just a very emotional time, so it's important that we do what we can to make sure people have something to hold on to and remember forever."

Developing and testing new services

Due to the vulnerable patients in our care, our Day Services remained closed onsite at Old Brampton in order to keep footfall to a minimum. Instead, the team opened up a hub within the community at Hasland.

The hub reinstated face-to-face support but away from the clinical environment of the main hospice site. This gave patients access to services without having to travel to the hospice. Although the number of patients accessing the service was small, the feedback was extremely positive. The team are now in talks with local GPs to explore how they expand this service further.

The Day Services team also continued to contact patients over video and phone to provide support where needed. This included a twice weekly virtual coffee and quiz session for peer-to-peer support. Those without digital capabilities were supported to participate through the loan of a tablet.

Clinical training and education

Our role at Ashgate is to care for patients who have specialist needs. We are also committed to ensuring that all local healthcare professionals are able to provide the best end of life care for everyone. This is for patients who may be in the hospital, in a nursing home, in a residential home or being cared for in their own home. That's why we have continued to provide a varied programme of training and education, including evening seminars, as an educational resource to upskill the healthcare community of North Derbyshire.



David's story

David is living with heart failure after suffering a cardiac arrest in 2013. He started attending Ashgate's virtual sessions and has particularly enjoyed the horticultural sessions.

He said: "I've really enjoyed taking part in the sessions. They've been very interesting and I've been learning along the way."

"I've not really been a green-fingered person before so there's lots to take in, but it's been great, and I've even been eating some of my produce!"

"We've made chives, mint – and it's been great watching it grow. It's come on well and some of it is still growing."

"It's a little something different and just shows you're never too old to learn new things. The course facilitator is lovely and very knowledgeable; she's just been great."

Our people

To continue to deliver high-quality palliative and end of life care, we need to be the best we can be. That is why we look after our staff and volunteers and support them to continue working through the personal and professional challenges brought about by the pandemic.

We are One Ashgate

Together, we are the 'One Ashgate' team, working with energy, openness and compassion. We strive to be a respectful and inclusive community that welcomes everyone, and we are committed to investing in the development of the skills and leadership of all our staff and our volunteers.

We have over 340 staff working across departments including clinical, fundraising and retail, marketing, finance, human resources and estates.

They are supported by 600 volunteers who carry out a whole range of roles to support our services. Their contribution across the entire organisation is immeasurable. There would be so much we would struggle to do without the time, skills and commitment of our volunteers. They bring an inestimable amount to our care and the operation of our hospice.

The work of all our staff and volunteers is valued and appreciated.



Our Head Chef, Mark, cooks up a storm for our patients and their loved ones.



Our dedicated volunteers

Our volunteers work tirelessly in 18 different types of volunteering roles, including our shops, gardens, on the ward and in fundraising. Our volunteers contribute to every department.

We have improved the ways in which we recognise and appreciate our volunteers. We've highlighted more volunteer stories and utilised national and local volunteer awards. Ashgate even scooped the Organisation of the Year award at the regional Voluntary Sector Awards ceremony.

We've also listened to how our volunteers would like to be recognised and have introduced pin badges for long service.

We would like to thank every one of our dedicated volunteers for their outstanding contributions to Ashgate Hospice in 2021/2022.

For more information about opportunities to volunteer with Ashgate Hospice, please visit www.ashgatehospice.org.uk/volunteering

Did you know?

- Our volunteers come from all walks of life and with varying experience. Our **youngest** volunteers are **15 years old** and support our fundraising teams in raising the money needed to provide our care.
- Our **oldest** volunteer is **88 years old** and welcomes our patients and their families on our ward reception.
- **70%** of our volunteers identify as **female** and **46%** are aged between **56 and 75 years old**.



Mike's story

Mike decided to volunteer in our Chesterfield town centre shop to gain some retail experience eight years ago – and hasn't looked back since.

Mike said: "I love being a volunteer in one of Ashgate's shops. You make no end of friends, gain plenty of experience and get a real sense of satisfaction from doing your bit for the hospice."

"I like helping people and if I can raise a laugh whilst I'm working behind the till then that's great!"

"I've supported Ashgate in various ways and find giving up my time to help in the shops is rewarding and very much appreciated by the whole team."

"To anyone thinking about volunteering I'd tell them not to hesitate – I'm so glad I signed up and I wouldn't change it for anything."

Wellbeing and mental health

While the outside world started getting back to normal at the end of the financial year, this was not the same for our workforce.

Since the start of the pandemic and throughout this financial year, our staff and volunteers have been adhering rigorously to infection control measures all the while coping with workforce shortages, due to isolation requirements and because of the general shortage of nurses and other healthcare professionals in the system.

In August 2021, we appointed a dedicated Health and Wellbeing Advisor to help support our staff and volunteers. She implemented a comprehensive plan of wellbeing measures, including 1:1 wellbeing calls, group meetings on nutrition and 30-minute mindfulness sessions.

We continued the extension of carers' leave entitlement for our staff from three to seven days, reflecting the fact that the pandemic had meant many people were dealing with more at home.

We also continued to support our workforce through established wellbeing initiatives, such as the Wobble Room, a confidential space for staff and volunteers to talk freely and regular huddles designed to encourage staff to offload their days and to support each other.

Investing in our skills

This year has been a positive one for Learning and Organisational Development, with the introduction of a new structure and several new posts to increase our specialist support in Organisational Development, Equality, Diversity & Inclusion (EDI), and Health & Safety, as well as meeting the increased needs across the hospice for learning and development as we continue to strive for excellence.

Throughout 2021/22 we have maintained a programme of learning to keep staff and volunteers upskilled and confident in all aspects of their work. We implemented a new online learning system to support this, delivering engaging e-learning courses alongside our calendar of interactive workshops.

Our Learning and Development team saw a gradual return to face-to-face events, including workshops and courses, school events and careers fairs. This has felt like an important step to keep our people and our wider community connected as we manage the ongoing risk of COVID-19.

We also began running management and leadership development programmes to ensure our workforce are well led and supported. Several graduates of our bespoke Leading Together programme were key to a Hot Groups project that used the collective leadership and creativity of Ashgate to inform our Three Ambitions.

Ruth's story



Former Royal Ballet dancer, Ruth Bailey, joined the Ashgate team as the Wellbeing Advisor. Putting a focus on wellbeing and mental health like never before.

Ruth said: "Since the start of the pandemic, we have seen how people have been impacted by the changes to our work and home lives. At Ashgate, we are taking a proactive approach to addressing these issues to ensure we have a well-supported and resilient workforce."

"My ambition is to help make wellbeing a priority for everyone. It can be difficult to give yourself permission to allow time for yourself, however, I believe it's the key to long term sustainability."

"I hope to build and promote a really strong message that wellbeing should be paramount to healthy staff and volunteers. Human beings have basic needs and I hope to give time, energy, and a safe space for people to acknowledge these in the workplace."

Staff and volunteer engagement

A pulse survey was undertaken of all staff between February and March 2022. The aim of the survey was to gain an understanding of how employees were feeling about their wellbeing, wellbeing support and training. There were 166 responses from a possible 314 staff members (52.8%).

The quantitative data didn't show much change since the last survey in April 2021; however, we would expect the impact of new interventions to take time to embed. The survey also revealed an increase in neutral responses to feeling stressed, suggesting this is still an area of concern. A focus group was held to explore this area further and action plans were formulated as an ongoing tool to make improvements.

A separate pulse survey was undertaken of all volunteers during the same time period, to gain an understanding of how volunteers felt about communication, recognition and wellbeing. There were 146 responses. Results revealed a 14% increase in positive responses to wellbeing support, which is a credit to our wellbeing work and to the managers and staff who provide this support to our volunteers.

The qualitative data was mainly positive. There are still a few volunteers who are unaware of the wider wellbeing support, but on the whole volunteers commented they felt supported or didn't need to access this support.



Equality, diversity and inclusion (EDI)

We are committed to providing accessible and equitable care and to upholding our values of inclusivity, respect, and openness. We want Ashgate to be open to everyone who needs us and we are working to understand how we can improve this.

At Ashgate this means we are:

- Identifying and removing barriers so that everyone who needs us in our local community can access our services.
- Offering care that is flexible, creative and person centred.
- Encouraging and nurturing diversity in our workforce, our volunteers and our supporters, so that we fully reflect the community we serve.

In 2021/22 we have been working towards a more inclusive Ashgate. This began with the employment of an EDI Lead in November 2021, followed quickly by the establishment of an EDI Advisory and Pride planning group. These groups are safe spaces for people across the organisation to collaborate and feed into the work we do at Ashgate Hospice.

We are now in regular attendance at the Chesterfield Equality & Diversity Forum and Derby BME Forum. This offers an opportunity to network and ensure Ashgate is aware of issues affecting minorities and/or under-served groups in our local community.

Links have been made with MacIntyre Learning Disability charity where we supported their Dying to Talk project. We also renewed our Disability Confident Status to ensure we always give full and fair consideration for all applicants.

A diversity calendar has also been developed so the hospice can celebrate festivals important to everyone in our workforce and the local community, allowing us to use our trusted voice to raise awareness of key events such as Pride.



Colin's story

Colin joined the hospice as an ambassador after we supported him following the sudden death of his husband in 2017.

Colin said: "Right from the very first contact with Ashgate, we never had any problem with the fact I was in a same sex couple.

"I was treated with the same respect as anybody else would be treated, probably more so as everyone seemed to understand that like most same sex couples, we had no family to give us that important extra support that others have.

"After Frank's death, I went into a spiral of suffering from anxiety, depression and having suicidal thoughts. That's when Ashgate's support mattered the most; they helped me get back on my feet again following what was a very difficult time."

"The team offering me bereavement support were incredibly kind and compassionate. I remember on my first couple of visits, I had to leave the room a couple of times as I found it emotionally overwhelming, and I sat outside in tears.

"It was so heart-warming when staff on reception and the Inpatient Unit stopped to see if I was okay and if I needed anything – I could not have been cared for or looked after better than that – and nobody back then even knew who I was!"

Gender pay gap

The Equality Act 2010 (Specific Duties and Public Authorities) Regulations 2017 requires all organisations with 250 employees or more to report annually on their gender pay gap.

The gender pay gap is defined as the difference in the average earnings of men and women over a defined period, regardless of role or seniority.

Our mean gender pay gap for 2021/22 is 0.96% and the median gender pay gap is -9.6%, Ashgate continues to close the gender pay gap ahead of national benchmarks. The mean gender pay gap for the hospice shows that on average for every £1 men earn, women are earning £0.99. The median gender pay gap shows that on average for every £1 men earn, women are earning £1.10.

We know that women are over-represented across the hospice sector. Whilst this brings huge opportunities and benefits, there are also challenges associated with health

work being viewed as an inherently 'female' occupation, which tends to have poorer pay and conditions, and lower social status. There are wider socio-political obstacles to overcome for jobs traditionally associated with a particular gender to be occupied more equally by men and women (e.g. men encouraged to work in care and women in IT or estates). Ashgate is committed to playing its part in promoting this wider societal change.

At Ashgate we are determined that people who identify as women have equal opportunities for promotion and leadership roles, and equally that those identifying as men access flexible working options which may reduce the gender imbalance in part and full time working.

The hospice remains committed to carrying out annual equal pay audits to ensure equal work of equal value is recognised. A newly launched Equality, Diversity and Inclusion advisory group will act as a forum to consult on and evaluate potential policies and improvements.

Our voice

This year we made some big changes in how we communicate in order to reach more people living with a life-limiting illness in North Derbyshire. This was achieved through an overhaul of our look, the launch of a new website and new videos and podcasts.

A new look

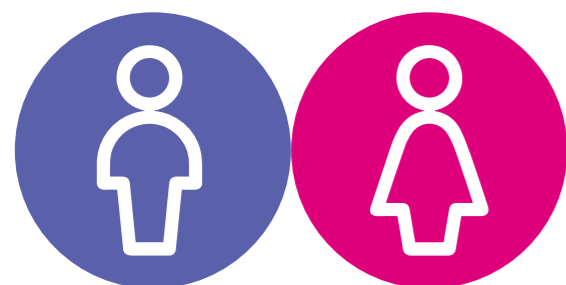
In October 2021, we rebranded, a decision taken to modernise our look, ensure consistency across all our functions and inclusivity of our services. The revamped logo kept the familiar and much-loved heart design, but now includes some of the pink from our Sparkle Night Walk event. The font is also much easier to read and supports our aims to become more accessible.

We dropped 'care' from our name and are now known as Ashgate Hospice, again helping to improve the clarity of who we are and what we do.

This allowed us a more consistent look right across Ashgate - including at all our retail shops and coffee shops. We hope this will increase our impact, making it possible to see the extent of our work right across North Derbyshire.

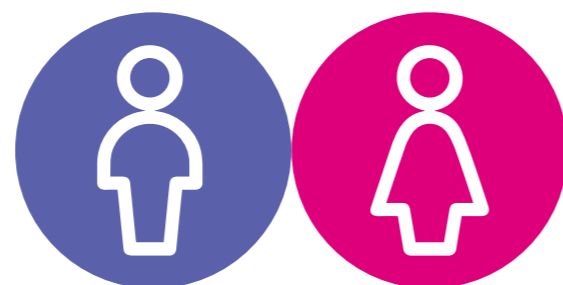
To keep costs down, not all the changes will happen overnight – with shop fronts and workwear being changed gradually over time.

Mean gender pay gap
0.96%



£1.00 **£0.99**

Median gender pay gap
-9.6%



£1.00 **£1.10**



Help is just a click away

This year we launched a new website to ensure our vital information and support can be easily accessed and that patients and their families can make informed choices about their care.

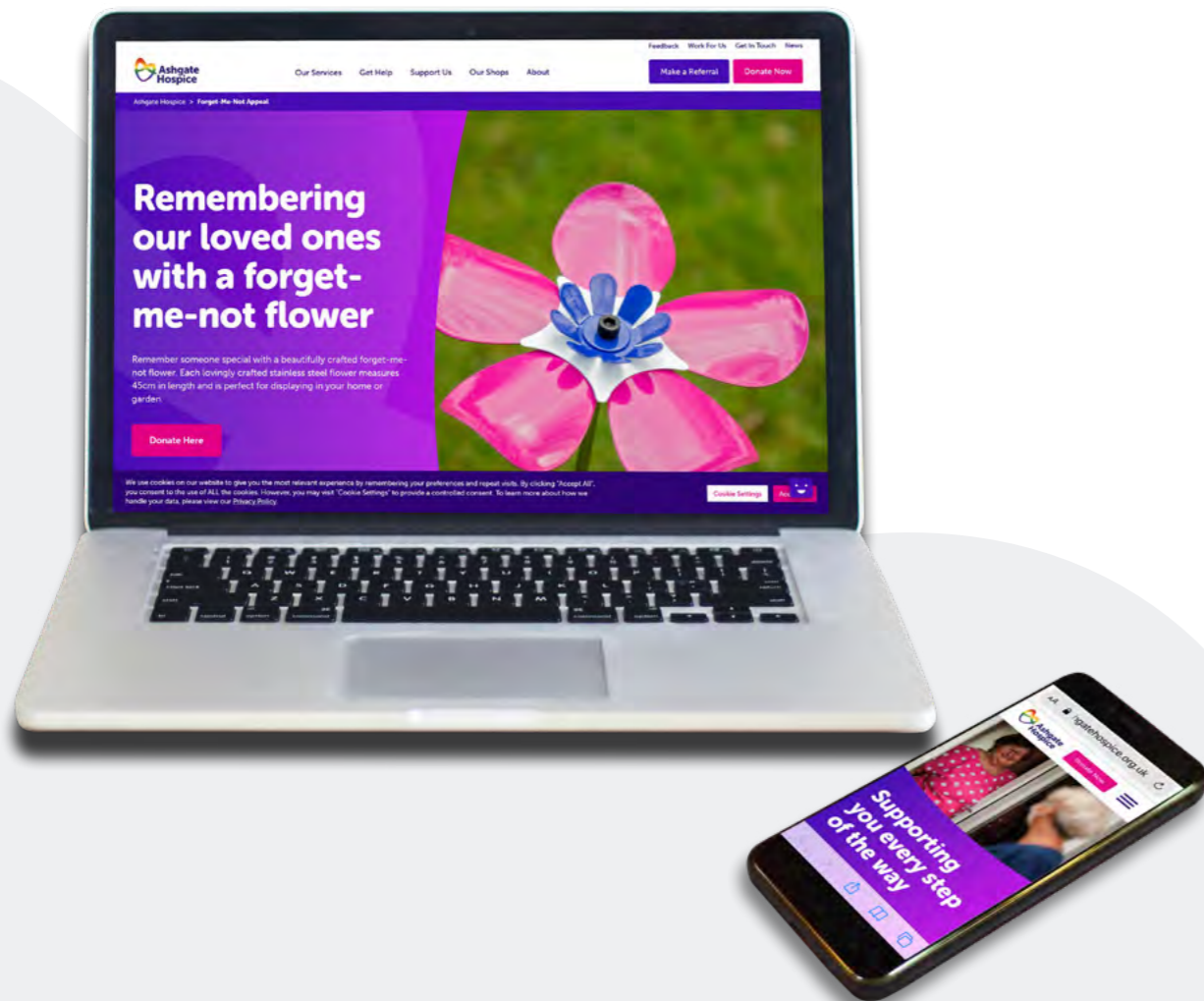
Our aim has been for the website to be an extension of our care – and culture – so that people can visit the website for help, advice or support and to get a sense of what makes Ashgate so special.

The new website features information on what to expect if being admitted to Ashgate’s Inpatient Unit or being cared for at home and has a range of podcasts, videos, leaflets and other resources available online. The new site also allows healthcare professionals to make a referral for their patients much more easily.



131,742
people visited the
Ashgate Hospice
website

Since its launch in October, we have simplified the patient referral process and also significantly reduced the number of failed donations – important when every penny counts. It is now also possible to apply for a staff or volunteer role online without needing to download a form, meaning we have seen applications for our vacancies increase.



Life and Death

In summer 2021, we launched series two of our Life and Death Podcast, which explores frank and honest conversations around death and what ‘dying well’ really means. Each episode welcomes both givers and receivers of end of life care, to discuss their unique relationships, hospice life, and how death affects the living.

We also released a one-off special at Christmastime to talk about grief over the festive season. Regular host and Ashgate Senior Physiotherapist, Stephen Rumford, was joined by two people who were at different stages of their grief alongside Ashgate’s Reflective Practice Manager, Simon Bell, who shared his expert view and coping strategies.

Since its launch, the podcast has over 100 five-star reviews on Apple and 7,600 listeners.



Removing the stigma of talking about death and dying

Encouraging people to talk more openly about death and dying is something always at the forefront of what we do. We believe that open and honest conversations will mean that people are more likely to experience a good death and have their wishes met.

Part of this work is spearheaded by our communications team who share stories and videos of people talking about their very personal experiences of death and dying. That’s why in October 2021 they produced a series of videos which saw family members reunited with the Ashgate staff members who had cared for their loved ones.

Their emotional exchanges were caught on camera and have been watched 2,000 times on our YouTube channel.

The videos also received extensive media coverage, both locally and nationally and were featured on The Independent’s website.



Sheryle's story

Sheryle (left) reunites with Ashgate nurse, Helen Harrison (right).

Sheryle reunited with Ashgate Hospice nurse Helen Harrison, who cared for her brother, Mark, in his final days.

Sheryle said: "Ashgate came on board when we were at our lowest. We didn't know what to do, where to go or how to do it.

"But as soon as Helen from Ashgate came into our lives everything just changed. Without her I don't know what we would've done.

"She just pulled everything together for us in a matter of days. I could phone her whenever I liked, even during the lockdown it was never a problem.

"Helen became such a big part of our life and I'm so grateful for everything she did for Mark and our family. She just never stopped caring."

Our financial sustainability

In 2021/22, fluctuating COVID-19 rates and changes to restrictions meant that fundraising has been more of a challenge than ever before. Our fundraising teams had to work even harder than ever as they adapted methods of fundraising to a 'virtual' world and developed innovative new products. Supporting them every step of the way has been the incredible community of North Derbyshire, whose unwavering support has ensured we can continue to be there when we're needed most.

As an independent charity, **only around 28% of our total income** comes from local NHS budgets.



That means we must raise a further **£8 million** from our shops, coffee shops and the generosity of our local community.

A retail revival

After spending much of the previous financial year closed, it was a welcome relief to be able to welcome our loyal supporters back to our shops and coffee shops in the early part of the year. Not only that, our dedicated team of staff and volunteers returned in full force to ensure our shops looked their very best and that the appropriate COVID-19 measures were implemented to keep everyone safe.

We quickly realised that managing sickness would be a challenge, as staff self-isolated due to COVID-19. However, their commitment to ensuring the shops remained open during another challenging year saw staff travelling across the county to cover shifts.

Equally committed were our super supporters who turned out in droves to make our first week back open our most successful to date, bringing in an incredible £105,326 to help fund palliative and end of life care across North Derbyshire.

The record-breaking didn't stop there. By the end of the financial year, we had broken all previous years' trading records.

In February 2022, we were delighted to be able to open our first standalone clearance clothing shop in Matlock, offering our supporters huge savings. The innovative new shop boasted items from as little as £1 and offered a new and affordable way for the community to support the work of the hospice.

Our eBay operation continued to enjoy the benefits of more people choosing to shop online with an increase in revenue of £59,304 in 2020/21 to £97,697 in 2021/22.



Our super supporters brought in

£105,326

to help fund palliative and end of life care



while our eBay operation increased last year's revenue from £59,304 to

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Remembrance reimagined

The previous year had been extraordinarily difficult for many people in so many ways. One of the most heart-breaking aspects of the pandemic was how it kept people apart, particularly at times when people needed each other more than ever.

That's why in May 2021, we launched our first ever Forget-Me-Not Appeal as a way for supporters to celebrate, mourn and remember their loved ones.

Sponsored by Graysons Solicitors, the appeal saw more than 3,000 steel forget-me-not flowers dedicated to loved ones, raising an incredible £117,000 to support our crucial care and services.

The appeal culminated in the flowers forming a display at Chatsworth House, home to Ashgate's president, the Duke of Devonshire. Here, supporters were able to come together after months of separation to remember their loved ones together, providing a much-needed and meaningful way to process their grief.

Ashgate Hospicecare's Forget-Me-Not Appeal



Steve's story



Supporting the Forget-Me-Not Appeal was Steve who dedicated a forget-me-not in memory of his wife, Julie, who experienced 'exceptional' care at our Inpatient Unit.

Steve said: "The hospice allowed Julie to spend her final moments in peace. The last thing I'd want was for her to have an unpleasant death; she'd suffered enough already. Ashgate gave her a very calming and peaceful end to her life and I'm enormously grateful for this."

"That's the marvellous thing about Ashgate – it takes the stress away so you can focus on creating those final memories together. The team are always there and make everything as easy as possible for you. Whatever we needed was there, whenever we needed it."

"In tribute to Julie, I've chosen to support Ashgate Hospice's Forget-Me-Not Appeal and dedicate a keepsake flower in memory of her. I know Julie would have loved to have walked through the stunning grounds at Chatsworth to see the meadow of flowers glistening in the sun."

Together again

After the previous years' virtual-only event, Sparkle Night Walk returned to an in-person event in September 2021. More than 1,700 people felt inspired to wear their flashing bunny ears with pride and light up the streets of Chesterfield in the 10k night walk.

This was the first mass participation event the hospice had held since lockdown began in 2020. Extra safety measures were implemented to keep staff, volunteers and participants safe, and this included mask wearing and staggered start times. The extra precautions didn't take away from the fun atmosphere or the success of the event which saw more than £110,000 raised.

Ashgate Hospicecare's
Sparkle
Night Walk 2021

Sponsored by



More than
£110,000
raised



Kimberley's story

Kimberley Greaves was among those taking part in Sparkle Night Walk to help us raise crucial fund after we provided "exceptional" care for her husband Andrew.

She said: "I'll never forget the time I had a very difficult conversation with our children before bringing them both in to see their dad for the last time.

"The hospice was fantastic, and they even arranged to move Andrew to a larger room, so the children had more space to sit down at a table, if they wished to.

"I am so grateful for those last days we had together at the hospice. Despite some of our conversations being incredibly hard, we had each other.

"We talked about a future without Andrew, we arranged the funeral, we cried, and we held hands.

"It's only been a few months since Andrew passed and already the kids and I are being incredibly supported by Ashgate.

"I worry immensely about the lasting effect losing their dad will have on the children for a lifetime. I know now that the hospice will be there to support us for as long as we need them."

Winter Crisis Appeal

In autumn 2021, we launched a Winter Crisis appeal as our teams braced themselves for another challenging winter brought about by COVID-19 and winter flu circulating at the same time.

We once again sought support from our supporters to help us get through the difficult months ahead – ensuring the hospice could continue to provide compassionate end of life care at a crucial time and support the wider health system as it did the previous year.

The appeal received widespread coverage including print, radio and online and was complemented by a digital advertising campaign, helping to raise an incredible £122,000.

Gifts in wills

Over the past year, we were fortunate to receive 35 legacy gifts. Six of these gifts had a value of £100,000 or more and our total legacy cash receipts reached over £1.6m, exceeding our expectations for the year.

This is our single largest voluntary income stream, and we intend to continue to promote legacy giving as an easy way to support the hospice's work in the future, at no cost to the supporter today.

We will continue to work closely with local solicitors and online providers to make the will-making process as easy and accessible as possible for everyone.



One in five of our patients is cared for by a gift left in a will

An extraordinary year for trusts and grants

Without funding from trusts and foundations, we wouldn't be able to make a difference to the lives of so many people living with a life-limiting illness and their loved ones. In 2021/22, we received almost £315,000 from a wide range of charitable funds. This included:

- £100,000 from Barclays COVID-19 Community Relief Fund to help us deliver virtual support during the pandemic and the development of a hospice wellbeing hub in the community.
- £76,000 from BBC Children in Need to support children and young carers in the Bolsover area having to deal with the loss of someone they love.
- The Rolls Royce Foundation who are enabling us to deliver creative therapy support to more children experiencing grief and loss across North Derbyshire.
- The Morrisons Foundation for funding our first cuddle bed at the hospice which allows loved ones to be close to each other.
- The Hospital Saturday Fund who funded a specialist falls bed which helps us safely care for our patients staying on our Inpatient Unit who have an increased risk of falling.
- £5,000 from B&Q Foundation towards urgent work on our boiler system at the hospice.

We have received many generous donations towards our running costs during such a difficult and uncertain time. Examples of these include donations from the Chesterfield & District Joint Crematorium, the Mark Benevolent Fund, ShareGift, the Sir Jules Thorn Charitable Trust, the Albert Hunt Trust, Redbrik Foundation and the Masonic Charitable Foundation to name a few. We are truly grateful to all trusts and foundations who have shown their support throughout the year.

Gifts in kind

Not all the support we receive is monetary; many companies and organisations choose to support us by donating their goods or services. This support is just as invaluable, and in 2021/22 gifts in kind totaled £97,000. Some of those gifts include:

1. Central Technology, Ashgate Hospice's IT supplier, donated Netflix and Smart TVs for some of the rooms at our Inpatient Unit. This was supplemented by Smart TVs from other companies, such as BRM Solicitors, Morgan Sindall, Wilkins Vardy and S3 ID. This meant our patients and their families could enjoy their favourite shows together from the comfort of their rooms.
2. Montcalm lent the hospice a specialist falls bed and kindly gifted the hospice this to keep.
3. Penny Hydraulics donated a pallet truck to the hospice to help us manage our PPE stock.
4. Arnold Clark and The Van Yard both kindly lease vehicles to the hospice.
5. Staff, volunteers, patients and their families were helped to celebrate Easter with generous donations of chocolate eggs from Spar, Proact, Lindt, Tesco Extra and Morrisons Staveley and Chesterfield.
6. Fresh Ideas Florists donated bunches of flowers to patients on our Inpatient Unit for Mother's Day.
7. Harold Lilleker Funeral Directors provided all the outdoor screens and projectors so we could show images of loved ones that our Sparkle Night Walkers were remembering. We were also able to generate funds by local businesses advertising on the screens.

Every penny really does make a difference.

In fact, last year we received **15,794 donations of £10 or less**. Together, this raised **£111,677**



Jacksons The Bakers Ltd

have been supporting Ashgate Hospice by providing beautiful fresh bread and cakes free of charge for many years. When Emma Jane and Phil took over the company, they didn't think twice about continuing this incredibly generous donation. Since 2017, they have provided over £19,000 worth of freshly baked produce.

Emma Jane said: "We are really proud to support the hospice, the care they provide is outstanding

and we are so pleased to play our part in helping them to continue to be there for our community.

"It is important to us at Jacksons that the team at Ashgate feel supported. Sending extra treats during the pandemic was our way of letting them know we were thinking of them during the toughest of times.

"We were also thrilled to support the Sparkle Night Walk, donating sausage rolls and flapjacks to all of the wonderful volunteers."



Since 2017, Jacksons The Bakers Ltd have provided over £19,000 worth of freshly baked produce.

In partnership

Chairman of North East Derbyshire District Council, Councillor Martin Thacker MBE, supported the hospice after choosing us as his charity of the year.

Councillor Thacker, who is also Vice-Chairman of Chesterfield Football Club and Director of Chesterfield Football Community Trust, and his consort, Jean Spencer, raised a record-breaking total of £79,500. From a Peaky Blinders-themed party to a festively fun Christmas market – Councillor Thacker and his team, with the support of Ashgate's fundraisers, organised a total of 30 different events.

Councillor Thacker said: "We are delighted to present Ashgate Hospice with this record-breaking amount of money. Everyone is aware of the tremendous difference the hospice makes in the community.

"We know the funds will be used to help continue their fantastic work. I am very grateful to all those who have supported our appeal and helped us to support the hospice."

Councillor Thacker has organised a total of 30 different events.



How we're governed

Governance and Trusteeship at Ashgate

Our Board of Trustees consists of volunteers who bring a range of professional expertise and life experiences to shape the direction of our strategic approach. Trustees are not involved in the day-to-day management of the charity. They delegate this responsibility to the Chief Executive and the Leadership Team. They hold the Leadership Team to account, ensuring that the hospice is managed effectively and in line with the highest standards of quality and customer service.

Trustees undertake a full induction and take part in the role-specific essential training provided by the hospice for all staff and volunteers. Trustees also take part in Quality Visits to clinical services. They shadow both clinical and non-clinical teams to gain assurances about performance and quality, to introduce themselves to staff and volunteers and to increase their knowledge of our services.

Our Ashgate Governance Framework sets out a robust hospice-wide governance and assurance structure. This has fully developed operational alignment and an emphasis on the 'golden thread' from frontline to Board. There are three committees which report directly to the Board. Their membership is drawn from the Trustees and senior leaders. The Healthcare Quality Committee includes clinical quality and safety, evidence-based care and patient experience in its portfolio. The People, Engagement and Performance Committee has a focus on our staff and volunteer workforce, on information governance, IT and digital development and community engagement. The Finance and Strategy Committee is charged with governance of our income generation, our reserves and investments, procurement and estate management.

This framework enables the Board meetings and development days to focus on long-term strategy, oversight of the charity's performance, risk management and sustainability. The Board and the Committees meet on a quarterly basis.

Public benefit

The Trustees have referred to the guidance contained in the Charity Commission's general guidance on public benefit when reviewing the hospice's objectives and in planning its future activities. In particular, the Board of Trustees considers how planned activities will contribute to the objectives they have set. The Trustees are confident that this report appropriately reflects public benefit in some detail when describing the purpose, objectives and strategic plans, services, service developments and future plans for continued or enhanced service delivery.

Fundraising standards

Ashgate Hospice's approach to fundraising is focused on supporter care through extensive and regular training of staff and volunteers. Ashgate Hospice is registered with the Fundraising Regulator and ensures its fundraising is legal, open, honest and respectful. We monitor third parties who fundraise for us by asking supporters for feedback, providing training and following up any complaints. The charity received no complaints during the year.

As part of our approach, policies and standards, we ensure that we protect vulnerable people and other members of the public from inappropriate behaviour. We train everyone involved in fundraising and clear processes are in place to monitor and manage every interaction. In the past year, we have not uncovered any failure by staff, volunteers, professional fundraisers or commercial participators to comply with our policies and standards.

Continually learning and improving

Ashgate Hospice tracks and publishes its quality data, to ensure we are continually learning and improving. Our aim is to give all our patients and their loved ones the best possible experience.

We are currently working to review our patient feedback questionnaires. This is so that we can improve how we capture their experiences. We are also looking at alternative methods to enable service users to become more involved in providing constructive feedback.

Where we can do better, we strive to learn from that experience for next time. A data workstream involving all departments has continued to review and develop our data and business intelligence capabilities. This is so that we can improve our quality improvement and governance practice. Quality Improvement Bronze Level training has been rolled out across all teams and is continuing.

Every three months, we collate quarterly reports that are shared with our NHS commissioners. We look at patient trends and feedback, areas for improvement and ways we could work differently to enhance the services we provide.

IPU Safety Benchmarking

Bed occupancy

Throughput

Falls per 1,000 bed (days)

Medication incidents 1,000 bed (days)

Review of quality performance

Data quality

During 2020/21, due to improvements in the data input and collection, the quality of information from the electronic patient record system has been of a consistently high standard. This has enabled us to report more accurately on activity and outcomes.

Clinical Services Activity

In this section, we present data for the period 1st April 2020 to 31st March 2021. All clinical services highlighted below provide compassionate, safe and effective care, responding to the needs of patients and their families and carers.

6,864 face-to-face contacts

34,836 telephone calls

342 Video calls

Community Services

Ashgate Hospice has a specialist community team, that covers the North Derbyshire area. The community team includes the Community Palliative Care Nursing Team, Occupational Therapists, Physiotherapists, Social Workers, Supportive Care professionals and Palliative Care Consultants.

In 2020/21, our Palliative Care Specialist Nurses and Palliative Care Support Workers provided support for 1,647 patients at home. They undertook 1,942 face-to-face contacts and 22,802 non face-to-face contacts.

In addition to this, our medical staff provided care for 118 individual patients, while our Physiotherapists and Occupational Therapists provided care and equipment for 269 and 136 patients respectively, to enable them to be cared for at home.

Overall, our IPU provided care for 363 individuals and their loved ones

26% increase on 2019/20.

1,647 patients at home.

1,942 face-to-face contacts

22,802 non face-to-face contacts.

2020/21, Palliative Care Specialist Nurses and Palliative Care Support Workers provided support for:

"I went to visit a relatively young man recently. He had been keeping all support available to him at arm's reach, because he's tried to come across as strong as possible to his family. He ended up having finance troubles, was in pain and needed help supporting his children and his wife. I just listened, offered all the advice and support that I could. By the end of the visit, he said he felt so much happier because his family now had a plan in place."

Amanda, Palliative Care Specialist Nurse.

Financial review

Fragility and resilience

The hospice has a largely fixed and predictable cost base, but it faces significant uncertainties around the timing and scale of its income. Only 28% of our funds comes from our contract with the local NHS and a further 10% is dependent on very unpredictable but very gratefully received legacies. The rest is dependent on the goodwill of our local community in supporting our fundraising events and in providing high quality donations of stock for sale in our shops. This is a fragile funding model for an ever more important cornerstone of the healthcare system.

For the financial year 2021/22, the hospice Board approved a net deficit budget for combined hospice and retail operations of £2m. Our previous annual report explained that the hospice had an underlying structural

deficit of £1m (a shortfall in statutory funding). Meanwhile the continued impacts of COVID-19 were expected to reduce income by £0.2m while an increase in costs of around £0.8m was necessary and unavoidable to maintain a high quality and integrated range of clinical services. This included maintaining competitive salaries, bolstering our IT and other infrastructure and growing digital and other fundraising for the future.

In practice the hospice has returned a smaller deficit of £0.5m but, as in the previous year, the main mitigating factors were specific and non-recurring, which do not remove the ongoing deficit challenge for future years. For 2021/22, the key factor was £0.9m of unbudgeted emergency hospice funding from NHS England and NHS Improvement (NHS EI) via Hospice UK for the period December 2021 to March 2022.

Our finances looking forwards

Looking ahead, the opportunities and requirements for supporting patients and families in North Derbyshire are vast. The financial challenge to do so is, however, immense.

Through our 33 years of service, the hospice has developed a finely balanced portfolio of inpatient facilities and palliative care at home. Removing any part of that portfolio to save money would be hugely damaging to the patient experience and would result in the NHS having to step in with beds and nurses, but without the subsidy of charitable donations that Ashgate Hospice generates. Cuts would therefore destabilise the hospice and cost the NHS significant multiples of what it pays the hospice.

In this context the hospice Board has approved a £2.1m deficit budget for 2022/23 to maintain its integrated services and the local NHS Derby & Derbyshire Integrated Care Board has agreed to provide up to £0.9m extra one-off funds for 2022/23

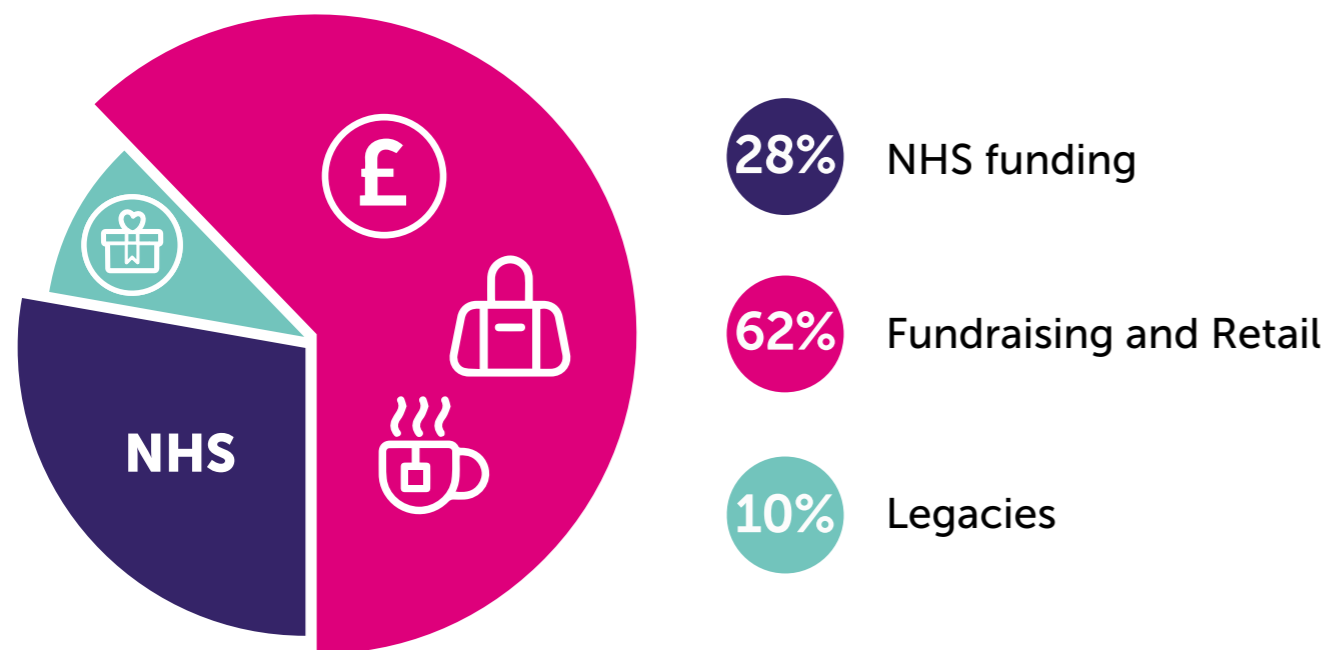
to reduce that deficit, so that the hospice will not fall below its risk-based reserves target by year end. Implicit in this is that the hospice will draw down its own reserves during 2022/23 which is manageable in the year ahead but is not sustainable in future years. The Hospice Budget Committee meets quarterly to review the latest results and forecasts and would initiate remedial actions if felt necessary.

A longer term, sustainable funding model is required, and positive joint work is under way to achieve this.

Government support

In 2021/22, NHS England (NHSE) awarded funding to allow the hospice to make available bed capacity and community support from December 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

As the cost-of-living crisis escalates in 2022/23, the hospice and the wider hospice and charity sector will continue to advocate for sustainable funding to maintain this vital community service.



In 2021/22, the NHSE awarded funding to allow the hospice to provide support to people with complex needs in the context of the COVID-19 situation.

Reference and Administrative Information

Charity Name: Ashgate Hospicecare
Charity Registration Number: 700636
Company Registration Number: 02263980

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

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

Directors and Trustees

Andrew Archibald (resigned 17/12/2021)
 Dr Steve Bradder (resigned 09/12/2021)
 Penny Brooks, Vice Chair
 Ruth Cooper (appointed 29/09/2022)
 Andrew Dukelow (sadly died 21/07/21)
 Nicholas Jeffrey, Chair
 Kirsty Mcmillan
 Nigel Myhill
 Claire Pilsworth (appointed 01/07/2022)
 Malcolm Pope, Vice Chair
 Daniel Ratchford, Vice Chair
 Tim Robinson (appointed 29/09/2022)
 Dermot Toberty

Secretary: Heidi Golden

Auditors

Azets Audit Services Limited, Triune Court,
 Monks Cross Drive, York, YO32 9GZ

Governing Document

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

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

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

Leadership Team

Matt Corbishley
 Helen Furnivall (Resigned 06/05/2022)
 Rod Ismay
 Dr Sarah Parnacott
 Peter Stone
 Barbara-Anne Walker
 Hayley Wardle

Bankers

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

Related Parties

Ashgate Hospicecare Shops Limited is a subsidiary of Ashgate Hospicecare. During 2021/22, it operated fifteen shops and three coffee shops, the profits of which are spent wholly supporting the work of Ashgate Hospicecare.

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

Financial Review

The consolidated net deficit before investment movements for 21/22 is £492k compared to a net surplus of £2,984k in 20/21. The prior year result was unusually high, as explained in last year's annual report. It reflected £3m non-recurring NHSE funding distributed via Hospice UK plus a fantastic response from donors to crisis appeals as well as exceptionally high legacy income recognition adjustments under charity accounting principles.

21/22 was then budgeted to have a £2m deficit. The actual result of £492k deficit reflects an unexpected third round of £880k of NHSE funding distributed via Hospice UK and a faster recovery of charity shop sales after Covid retail restrictions ceased.

Longer term, the Hospice continues to experience a shortfall in statutory funding which is reflected in a budgeted deficit of £2.1m for 22/23. The Hospice plays an active role in the Joined Up Care Derbyshire End of Life Programme Board for North Derbyshire, including the development of a new Derbyshire End of Life strategy. This is expected to shape commissioning decisions and clarity about future NHS funding. In light of this system wide review, plus the ongoing national shortage of hospital bed space, the Trustees have approved this continued deficit plan in order to support the wider system while the funding review continues. The Trustees recognised that the Hospice had sufficient reserves to absorb such a deficit in 22/23 but that appropriate interventions would be made beyond that should a step change in funding not materialise.

Total expenditure of £11,567k (20/21 - £10,983k) has risen due to a full year of new goods purchases for retail sale whereas lockdowns meant a limited sales period in the prior year. Salaries and other costs also rose but were partly offset by vacancies and recruitment challenges.

Total income of £11,075k (20/21 - £13,967k) is significantly down due to the scale of one-off funding during Covid, but is partly offset by a full year's retail trade which included sales of donated goods and new goods. In particular, participation in events and community based activities were impacted with fewer participants taking part in these activities resulting in lower income levels than planned.

Total funds have decreased from £9,843k to £9,371k due to the deficit above, partly offset by a modest increase in investment valuations of £20k.

Investment Policy

The hospice has a portfolio of long-term investments, deposit accounts and an interest bearing current account, to ensure appropriate liquidity of funds. Investments were £1,027k at 31 March 2022, an increase of 2%. With regard to the ethical investment element of the Policy, the Trustees do not wish to adopt an exclusionary policy when considering prospective investments, or potential donation receipts. However, individual investment proposals, and donations, may be rejected if they are perceived to be in conflict with the purpose of the Charity.

Reserves Policy

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

The Hospice implemented a risk based reserves policy in 19/20. This has supported in subsequent years strategic decision making and has been subject to regular review in the Finance & Strategy Committee.

Whilst total funds have decreased by 5% from £9,843k to £9,371k, free reserves have increased from £2,680k to £4,505k. This reflects the designation of funds in 20/21 to accommodate the budgeted deficit of the Hospice for 21/22 whereas no such designation has been made in 21/22 based on the expectation of a change in funding during the year or interventions to reduce costs if a step change in funding does not materialise.

Financial Review continued

The risk based target for free reserves at 31 March 2022 was £2,797k (20/21 – £2,374k) meaning that the Hospice was at 161% of its target (20/21 – 96%). Free reserves are net of restricted funds and designated funds. The purpose of such funds is narrated further in Note 25 of the accounts.

Senior Management Remuneration

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

Principal Risks and Uncertainties

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

The corporate risk register and the operational risk registers are monitored by the Risk Review Group which meets quarterly to ensure effective operational management of risk. Operational risk registers are, in turn, reported to the three Board Committees to ensure effective oversight and escalation. The corporate risk register is reported to the Board to ensure that Trustees are fully apprised of any strategic risks and the actions being taken to mitigate them.

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

Going Concern and Cashflow

The Trustees have considered the impact of COVID-19 and the global economic situation on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2024 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Statement of Trustees' Responsibilities

The trustees (who are also directors of Ashgate Hospicecare for the purposes of company law) are responsible for preparing the Trustees' Annual Report (including the Strategic Report) and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

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

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

In so far as the trustees are aware:

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

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

Auditors

Azets Audit Services Limited were appointed auditor to the charitable company following their acquisition of the trade of Garbutt & Elliott Audit Limited on 1 December 2021. Azets Audit Services Limited have indicated their willingness to stand for reappointment at the Annual General Meeting. By Order of the Board

Malcom Pope
Vice Chair of Trustees
1st December 2022
Chesterfield

Independent Auditor's Report to the Members of Ashgate Hospicecare

Opinion

We have audited the financial statements of Ashgate Hospicecare (the "parent charitable company") and its subsidiary (the "group") for the year ended 31 March 2022 which comprise the consolidated statement of financial activities, the company and consolidated balance sheets, the consolidated cash flow statement and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and the parent charitable company's affairs as at 31 March 2022 and of its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

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

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

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

Other information

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

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

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

Matters on which we are required to report by exception

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

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

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

Responsibilities of trustees

As explained more fully in the Trustees' responsibilities statement, the Trustees are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as they determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

Independent Auditor's Report to the Members of Ashgate Hospicecare

Our responsibilities for the audit of the financial statements

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

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

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

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

We identified areas of laws and regulations that could reasonably be expected to have a material effect on the financial statements from our general commercial and sector experience, through discussion with the Trustees and other management, and from inspection of the charity's regulatory and legal correspondence. We discussed with the Trustees and other management the policies and procedures regarding compliance with laws and regulations. We communicated identified laws and regulations throughout our team and remained alert to any indications of non-compliance during the audit.

The group and parent charitable company are subject to laws and regulations that directly affect the financial statements including company law, charity law, financial reporting legislation, pensions legislation, taxation legislation and further laws and regulations that could indirectly affect the financial statements, including safeguarding, medicines regulation, environmental, health and safety and employment legislation. We assessed the extent of compliance with these laws and regulations as part of our procedures on the related financial statement items. Auditing standards limit the required audit procedures to identify non-compliance with these laws and regulations to enquiry of the Trustees and other management and inspection of regulatory and legal correspondence, if any. These procedures did not identify any potentially material actual or suspected non-compliance.

To identify risks of material misstatement due to fraud we considered the opportunities and incentives and pressures that may exist within the group and the parent charitable company to commit fraud. Our risk assessment procedures included: enquiry of Trustees and other management to understand the high level policies and procedures in place to prevent and detect fraud, reading Board minutes and considering performance targets and incentive schemes in place for management. We communicated identified fraud risks throughout our team and remained alert to any indications of fraud during the audit.

As a result of these procedures we identified the greatest potential for fraud in the following areas:

- income recognition and in particular completeness, the risk that income is recognised in the wrong reporting period; and
- subjective accounting estimates.

Fraud risks arise due to a potential desire to present the results in a differing light to suit management objectives. As required by auditing standards we also identified and addressed the risk of management override of controls.

We performed the following procedures to address the risks of fraud identified:

- identifying and testing high risk journal entries through vouching the entries to supporting documentation;
- assessing significant accounting estimates for bias;
- testing the recognition of income and in particular that it was recognised in the correct period; and
- testing the control environment around cash takings, including segregation of duties and cash reconciliations.

Owing to the inherent limitations of an audit, there is an unavoidable risk that we may not have detected some material misstatements in the financial statements, even though we have properly planned and performed our audit in accordance with auditing standards. For example, the further removed non-compliance with laws and regulations is from the events and transactions reflected in the financial statements, the less likely the inherently limited procedures required by auditing standards would identify it.

In addition, as with any audit, there remained a higher risk of non-detection of fraud, as these may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal controls. Our audit procedures are designed to detect material misstatement. We are not responsible for preventing non-compliance or fraud and cannot be expected to detect non-compliance with all laws and regulations.

Using our report

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

Alan Sidebottom (Senior Statutory Auditor)
For and on behalf of Azets Audit Services Limited
 Chartered Accountants
 Statutory Auditor

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 Triune Court
 Monks Cross Drive
 York
 YO32 9GZ

Consolidated Statement of Financial Activities

Incorporating a Consolidated Income and Expenditure Account

For the year ended 31 March 2022

		Unrestricted Funds	Designated Funds	Restricted Funds	2022 Total	2021 Total
		£	£	£	£	£
Income:						
Donation and legacies						
Donations	(2)	2,004,491	-	212,573	2,217,064	2,886,244
Legacies	(3)	562,381	-	1,500	563,881	1,704,114
		2,566,872	-	214,073	2,780,945	4,590,358
Income from other trading activities:						
Shops	(4)	3,251,641	-	-	3,251,641	1,374,196
Fundraising	(5)	1,020,660	-	-	1,020,660	826,037
Other	(6)	114,105	-	-	114,105	122,022
		4,386,406	-	-	4,386,406	2,322,255
Investment income	(7)	1,372	-	-	1,372	1,041
Income from charitable activities	(8)	3,012,897	-	-	3,012,897	3,491,398
Income from COVID-19 Grants	(9)	-	-	880,154	880,154	3,077,114
Income from furlough	(10)	13,350	-	-	13,350	485,011
Total income		9,980,897	-	1,094,227	11,075,124	13,967,177
Expenditure:						
Costs of raising voluntary income	(11)	579,404	-	-	579,404	570,407
Fundraising & other trading costs	(11)	3,652,729	-	-	3,652,729	3,231,594
Costs of charitable activities	(11)	6,420,426	-	914,640	7,335,066	7,180,880
Total expenditure		10,652,559	-	914,640	11,567,199	10,982,881
Net (expenditure)/income before investment gains		(671,662)	-	179,587	(492,075)	2,984,296
Gains on investments	(16b)	19,941	-	-	19,941	140,476
Corporation tax	(24)	-	-	-	-	19,727
Net (expenditure)/income		(651,721)	-	179,587	(472,134)	3,144,499
Funds transfer	(25)	106,497	-	(106,497)	-	-
Designated funds transfer		2,279,085	(2,279,085)	-	-	-
Net movement in funds		1,733,861	(2,279,085)	73,090	(472,134)	3,144,499
Reconciliation of funds						
Total funds brought forward		7,292,645	2,379,085	171,721	9,843,451	6,698,952
Total funds carried forward	(25)	9,026,506	100,000	244,811	9,371,317	9,843,451

All activities are continuing activities. All gains and losses recognised in the year are included in the Consolidated Statement of Financial Activities. A fully detailed Consolidated Statement of Financial Activities for the year ended 31 March 2021 is shown in note 30. The Statement of Financial Activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

Balance Sheets

At 31 March 2022

		2022 Group £	2021 Group £	2022 Charity £	2021 Charity £
Fixed assets					
Tangible assets	(15)	4,876,608	4,974,394	4,746,443	4,884,437
Investments	(16 a&b)	1,026,780	1,006,840	1,026,784	1,006,844
		5,903,388	5,981,234	5,773,227	5,891,281
Current assets					
Stock of finished goods		43,859	35,232	2,572	3,215
Debtors	(17)	2,194,386	3,159,745	3,241,983	3,925,981
Cash at bank and in hand		2,408,861	1,888,709	1,709,015	1,457,259
		4,647,106	5,083,686	4,953,570	5,386,455
Creditors: Amounts falling due within one year	(18)	(824,177)	(859,872)	(620,035)	(700,415)
Net current assets		3,822,929	4,223,814	4,333,535	4,686,040
Total assets less current liabilities		9,726,317	10,205,048	10,106,762	10,577,321
Creditors: Amounts falling due after more than a year	(19)	(355,000)	(361,597)	(355,000)	(361,597)
Net assets		9,371,317	9,843,451	9,751,762	10,215,724
Unrestricted charity funds					
General		9,026,506	7,292,645	9,406,951	7,664,918
Designated funds		100,000	2,379,085	100,000	2,379,085
Restricted funds		244,811	171,721	244,811	171,721
Total funds	(25 & 26)	9,371,317	9,843,451	9,751,762	10,215,724

The financial statements were approved by the Board of Directors on 1st December 2022 and are signed on its behalf by:-

Malcom Pope Director

Company Registration No. 02263980

The notes on pages 63 to 83 form part of these financial statements.

Statement of Cash Flows

For the year ended 31 March 2022

	2022	2021
	£	£
Cash generated by operating activities	(28) 787,807	1,442,226
Cash flows from investing activities		
Interest received	1,372	1,041
Purchase of tangible fixed assets	(249,237)	(233,172)
Cash used in investing activities	(247,865)	(232,131)
Cash flows from financing activities		
Repayment of finance leases	(19,790)	(19,790)
Cash used in financing activities	(19,790)	(19,790)
Increase in cash and cash equivalents in the year	520,152	1,190,305
Cash and cash equivalents at the beginning of the year	1,888,709	698,404
Cash and cash equivalents at the end of the year	2,408,861	1,888,709

Notes to the financial statements

For the year ended 31 March 2022

1. Accounting policies

a. Basis of preparation

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

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

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

b. Company status

The charity is a company limited by guarantee and has no share capital. The charity is registered in England and Wales. The members of the company are the Trustees named on page 52. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £1 per member of the charity.

c. Basis of consolidation

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

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

The deficit for the year for the charitable company was £(463,961) (2021 surplus £3,289,401).

d. Going concern

The Trustees have considered the impact of COVID-19 and the global economic situation on the company's income and operating cost base. Whilst it is not considered practical to accurately assess the duration and extent of the disruption, the Board are confident that they have in place plans to deal with any financial losses that may arise.

The Board have prepared forecasts of income and expenditure and cash flow for the period to 31 March 2024 and subjected these forecasts to sensitivity analysis which shows that they have sufficient reserves to be able to continue for the foreseeable future. They will continue to monitor the impact on income and take appropriate action as necessary.

The Board do however recognise that uncertainty exists around the global economy and the evolution of COVID-19 and hence there is inherent risk regarding the success and sustainability of future plans, however the Board have concluded that the company remains a going concern whilst such viable options are available to it. The Board therefore continue to adopt the going concern basis of preparation for these financial statements.

Notes to the financial statements

For the year ended 31 March 2022

e. Fund accounting

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

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

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

f. Critical accounting estimates and areas of judgment

Estimates and judgments are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances.

Critical accounting estimates and assumptions: The company makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. There are no estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amounts of assets and liabilities within the next financial year.

Depreciation of tangible assets

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

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

Legacies

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

Notes to the financial statements

For the year ended 31 March 2022

g. Income

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

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

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

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

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

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

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

Retail grants received after the first national lockdown have been recognised in the period in which they relate to.

h. Expenditure

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

Allocation of support costs

Support costs are those functions that assist the work of the charity but do not directly undertake charitable activities. Support costs include executive costs, HR & IT costs, other support functions, depreciation and governance costs which support the services providing care to patients and families.

These costs have been allocated between the costs of raising funds and expenditure on charitable activities on the basis set out in notes 11 and 12.

Notes to the financial statements

For the year ended 31 March 2022

i. Tangible fixed assets and depreciation

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

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

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

j. Fixed asset investments

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

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

k. Stock

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

Notes to the financial statements

For the year ended 31 March 2022

l. Debtors

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

m. Cash at bank and in hand

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

n. Creditors and provisions

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

o. Operating leases

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

p. Pensions

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

Notes to the financial statements

For the year ended 31 March 2022

2. Donations

	Unrestricted	Restricted	2022 Total	Unrestricted	Restricted	2021 Total
	£	£	£	£	£	£
General donations	933,767	17,765	951,532	1,438,716	37,463	1,476,179
In memory	319,809	2,375	322,184	342,959	9,547	352,506
Gift aid income from individuals	172,692	622	173,314	226,984	906	227,890
Community	356,156	5,664	361,820	371,749	1,370	373,119
Gifts in kind (see below)	96,892	-	96,892	116,057	-	116,057
Trusts and grants	125,175	186,147	311,322	128,953	211,540	340,493
	2,004,491	212,573	2,217,064	2,625,418	260,826	2,886,244

Gifts in kind	Unrestricted	Restricted	2022 Total	Unrestricted	Restricted	2021 Total
	£	£	£	£	£	£
Donated food & drink	2,704	-	2,704	8,376	-	8,376
Capital items	13,280	-	13,280	10,000	-	10,000
Other items	80,908	-	80,908	97,681	-	97,681
	96,892	-	96,892	116,057	-	116,057

3. Legacies

	Unrestricted	Restricted	2022 Total	Unrestricted	Restricted	2021 Total
	£	£	£	£	£	£
Legacies	562,381	1,500	563,881	1,704,114	-	1,704,114

4. Shops

	2022 Unrestricted	2021 Unrestricted
	£	£
Trading activities	2,500,559	953,703
Donation of sale proceeds for goods sold as agent	553,877	184,128
Gift aid on donations of sale proceeds to charity	139,868	46,497
COVID-19 Retail Grant	57,337	189,868
	3,251,641	1,374,196

Notes to the financial statements

For the year ended 31 March 2022

5. Fundraising

	2022 Unrestricted	2021 Unrestricted
	£	£
Lottery	745,304	725,065
Events	275,356	100,972
	1,020,660	826,037

6. Other income

	2022 Unrestricted	2021 Unrestricted
	£	£
Training and Education	2,842	3,850
Catering and vending machine	30,461	20,791
Other	80,802	97,381
	114,105	122,022

7. Investment income

	2022 Unrestricted	2021 Unrestricted
	£	£
Gross interest receivable	1,372	1,041

8. Income from charitable activities

	2022 Unrestricted	2021 Unrestricted
	£	£
NHS Derby and Derbyshire Clinical Commissioning Group	2,946,714	3,162,947
University of Sheffield – Student training	39,200	36,400
Chesterfield Royal Hospital – Medical secretarial support	16,590	16,590
Other	10,393	275,461
	3,012,897	3,491,398

Notes to the financial statements

For the year ended 31 March 2022

9. Income from COVID-19 grants

The NHSE awarded funding to allow the hospice to make available bed capacity and community support from December 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation.

10. Income from furlough

The hospice received funding through the COVID-19 Furlough Scheme for staff who were furloughed due to Government restrictions. In accordance with the guidance on gov.uk, 'furlough' refers to employees who have been asked to stop working for at least 3 weeks, but who are still being kept on their employer's payroll.

11. (a) Analysis of group expenditure current year

	Direct staff costs	Other direct costs	Support costs	Total costs
	£	£	£	£
Donations	303,108	160,504	45,356	508,968
Legacies	43,197	6,399	20,840	70,436
Costs of raising voluntary income	346,305	166,903	66,196	579,404
Lottery	101,108	223,405	43,641	368,154
Events	129,826	139,655	53,567	323,048
Community	92,104	32,007	36,685	160,796
Shops	1,550,237	972,571	277,923	2,800,731
Fundraising and other trading costs	1,873,275	1,367,638	411,816	3,652,729
Patient care – hospice	2,823,221	421,039	1,377,470	4,621,730
Patient care – community	1,097,510	45,618	241,691	1,384,819
Therapies & rehabilitation	1,095,541	65,663	167,313	1,328,517
Cost of charitable activities	5,016,272	532,320	1,786,474	7,335,066
Total	7,235,852	2,066,861	2,264,486	11,567,199

Notes to the financial statements

For the year ended 31 March 2022

11. (b) Analysis of group expenditure prior year

	Direct staff costs	Other direct costs	Support costs	Total costs
	£	£	£	£
Donations	258,912	207,773	49,672	516,357
Legacies	26,427	12,730	14,893	54,050
Costs of raising voluntary income	285,339	220,503	64,565	570,407
Lottery	83,259	249,019	36,521	368,799
Events	100,789	113,534	44,134	258,457
Community	90,784	50,873	32,909	174,566
Shops	1,370,908	690,995	367,869	2,429,772
Fundraising and other trading costs	1,645,740	1,104,421	481,433	3,231,594
Patient care – hospice	2,821,517	487,281	1,152,220	4,461,018
Patient care – community	1,275,414	44,193	216,406	1,536,013
Therapies & rehabilitation	983,226	51,616	149,007	1,183,849
Cost of charitable activities	5,080,157	583,090	1,517,633	7,180,880
Total	7,011,236	1,908,014	2,063,631	10,982,881

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

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

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

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

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

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

Support costs include £150,132 (20/21 £152,261) of governance costs incurred in connection with the compliance with constitutional and statutory requirements of the charity.

Notes to the financial statements

For the year ended 31 March 2022

12. (a) Analysis of support costs current year

	Executive costs	HR & IT costs	Other support function costs	Depreciation	Total costs
	£	£	£	£	£
Donations	11,999	17,844	12,916	2,597	45,356
Legacies	5,731	8,522	6,168	419	20,840
Costs of raising voluntary income	17,730	26,366	19,804	3,016	66,196
Lottery	11,865	17,644	12,771	1,361	43,641
Events	14,609	21,725	15,725	1,508	53,567
Community	9,605	14,283	10,339	2,458	36,685
Shops	64,571	96,021	69,504	47,827	277,923
Fundraising and other trading costs	100,650	149,673	108,339	53,154	411,816
Patient care – hospice	312,091	464,102	335,935	265,342	1,377,470
Patient care – community	64,571	96,021	69,504	11,595	241,691
Therapies & rehabilitation	43,047	64,014	46,336	13,916	167,313
Cost of charitable activities	419,709	624,137	451,775	290,853	1,786,474
Total	538,089	800,176	579,198	347,023	2,264,486

Notes to the financial statements

For the year ended 31 March 2022

12. (b) Analysis of support costs prior year

	Executive costs	HR & IT costs	Other support function costs	Depreciation	Total costs
	£	£	£	£	£
Donations	13,319	20,341	13,657	2,355	49,672
Legacies	4,085	6,239	4,189	380	14,893
Costs of raising voluntary income	17,404	26,580	17,846	2,735	64,565
Lottery	9,932	15,169	10,185	1,235	36,521
Events	12,038	18,385	12,344	1,368	44,135
Community	8,720	13,318	8,942	1,929	32,909
Shops	86,569	132,213	88,770	60,316	367,868
Fundraising and other trading costs	117,259	179,085	120,241	64,848	481,433
Patient care – hospice	250,088	381,949	256,451	263,732	1,152,220
Patient care – community	57,713	88,142	59,181	11,370	216,406
Therapies & rehabilitation	38,475	58,761	39,454	12,317	149,007
Cost of charitable activities	346,276	528,852	355,086	287,419	1,517,633
Total	480,939	734,517	493,173	355,002	2,063,631

13. Net movement in funds is stated after charging:

	2022 Group	2021 Group
	£	£
Auditors' remuneration – audit	13,385	12,750
Auditors' remuneration – tax	840	800
Auditors' remuneration – other	4,575	-
Depreciation – owned assets	327,149	355,129
Depreciation – assets held on hire purchase	19,874	19,874
Payments made under operating leases	317,626	288,926

Notes to the financial statements

For the year ended 31 March 2022

14. Wages and staff costs

	2022 Group	2021 Group
	£	£
Gross salaries	7,111,858	6,778,369
Social security costs	612,537	568,857
Pension costs	495,474	525,239
	8,219,869	7,872,465

Average number of employees and full time equivalents for the group and analysis of employees in the year were:

	2022		2021	
	No.	FTE	No.	FTE
Clinical	165	115	160	116
Retail	96	65	96	64
Finance & IT	6	6	6	5
HR & Executive	14	13	13	12
Estate	27	18	33	21
Fundraising/Marketing	31	27	29	25
Total	339	244	337	243

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

	2022 No.	2021 No.
£60,001 – £70,000	2	3
£70,001 – £80,000	3	2

Pension contributions relating to the staff earning over £60,000 totalled £30,028 (2021: £28,217).

The total amount of employee benefits received by key management personnel is £477,188 (2021: £432,157). The charity considers these to be the staff who comprise the senior management team on the hospice payroll: Chief Executive Officer, Director of Income Generation, Director of Quality & Patient Care, Director of People & Performance, Director of Finance & Estates and Director of Marketing & Communications.

Included within gross salaries are redundancy payments totalling £nil (2021 – £43,970).

Notes to the financial statements

For the year ended 31 March 2022

15. Tangible fixed assets

The group	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2021	355,000	4,903,727	1,017,007	1,069,389	188,644	7,533,767
Additions	-	-	120,510	128,727	-	249,237
Disposals	-	-	(35,233)	(4,941)	-	(40,174)
At 31 March 2022	355,000	4,903,727	1,102,284	1,193,175	188,644	7,742,830
Depreciation						
At 1 April 2021	149,100	962,808	815,485	443,336	188,644	2,559,373
Charge for the year	7,100	98,075	104,160	137,688	-	347,023
Disposals	-	-	(35,233)	(4,941)	-	(40,174)
At 31 March 2022	156,200	1,060,883	884,412	576,083	188,644	2,866,222
Net Book Value						
At 1 April 2021	205,900	3,940,919	201,522	626,053	-	4,974,394
At 31 March 2022	198,800	3,842,844	217,872	617,092	-	4,876,608
The charity						
	Freehold Land & Buildings Original	Extension & Development	Fixtures & Fittings	Plant & IT Hardware	Motor Vehicles	Total
	£	£	£	£	£	£
Cost						
At 1 April 2021	355,000	4,903,727	438,666	1,025,062	80,350	6,802,805
Additions	-	-	54,293	106,909	-	161,202
At 31 March 2022	355,000	4,903,727	492,959	1,131,971	80,350	6,964,007
Depreciation						
At 1 April 2021	149,100	962,808	320,550	405,560	80,350	1,918,368
Charge for the year	7,100	98,075	61,102	132,919	-	299,196
At 31 March 2022	156,200	1,060,883	381,652	538,479	80,350	2,217,564
Net Book Value						
At 1 April 2021	205,900	3,940,919	118,116	619,502	-	4,884,437
At 31 March 2022	198,800	3,842,844	111,307	593,492	-	4,746,443

The value of fixed assets held under finance leases is £9,937 (2021: £29,810) in both the group and the charity.

Notes to the financial statements

For the year ended 31 March 2022

16. (a) Investments – charity

	Shares in group undertakings and participating interests
	£
Cost at 1 April 2021 and 31 March 2022	4
Net book value at 1 April 2021 and 31 March 2022	4

Holding of more than 20%

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

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

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

	Principal Activity	Capital and reserves	(Loss) for the year
		£	£
Ashgate Hospicecare Shops Limited	Charity shop	(380,442)	(8,173)

(b) Fixed asset investments

	Group		Charity	
	2022	2021	2022	2021
	£	£	£	£
Listed investments				
Fair value at 1 April 2021	1,006,839	866,364	1,006,839	866,364
Additions	-	-	-	-
Adjustment	-	-	-	-
Investment gains	19,941	140,476	19,941	140,476
Fair value at 31 March 2022	1,026,780	1,006,840	1,026,780	1,006,840

The historical cost of the investment is £900,000 (2021: £900,000).

Notes to the financial statements

For the year ended 31 March 2022

17. Debtors

	Group		Charity	
	2022	2021	2022	2021
	£	£	£	£
Trade debtors	89,249	270,906	79,891	268,742
Other debtors	260,225	687,689	229,169	603,016
Value added tax	686,098	521,501	668,434	507,929
Prepayments and accrued income	1,158,814	1,679,649	1,085,490	1,613,318
Amounts owed by group undertakings	-	-	1,178,999	932,976
	2,194,386	3,159,745	3,241,983	3,925,981

The Charity's intercompany debtor balance includes an intercompany loan of £543,093 repayable to the charity, and due after more than one year.

18. Creditors

	Group		Charity	
	2022	2021	2022	2021
	£	£	£	£
Amounts falling due within one year				
Trade creditors	210,407	142,835	145,537	125,318
Tax and social security	191,270	181,073	170,525	161,884
Accruals and deferred income	415,903	516,174	297,376	393,423
Finance lease creditor	6,597	19,790	6,597	19,790
	824,177	859,872	620,035	700,415

Deferred income includes lottery money received in advance for future draws. At 31 March 2022 this totalled £100,790 (2021: £96,931). All deferred income from 2020/21 was released in the year.

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

	Group		Charity	
	2022	2021	2022	2021
	£	£	£	£
Other creditors	355,000	355,000	355,000	355,000
Finance lease creditors	-	6,597	-	6,597
	355,000	361,597	355,000	361,597

Notes to the financial statements

For the year ended 31 March 2022

20. Operating lease commitments

At 31 March 2022 the charity had future minimum lease payments under non cancellable operating leases as follows:

	Group		Charity	
	2022	2021	2022	2021
	£	£	£	£
Within one year	277,709	277,063	12,743	3,189
Within two to five years	365,622	396,421	3,634	1,499
In more than five years	-	-	-	-
	643,331	673,484	16,377	4,688

21. Pension costs

The pension costs relate to the amounts contributed by the Group and paid over to the Health Service pension scheme or to eligible employees' pension schemes. The pension costs amounted to £495,474 (2021: £525,239). The amount owed to the pension providers at the year-end was £39,688 (2021: £42,876). All schemes are treated as defined contribution and payments are charged to the SOFA in the year they are payable.

22. Capital commitments

There were no capital commitments at 31 March 2022 (2021: £nil).

23. Related party transactions and trustee remuneration

No Trustee received or waived any remuneration during either year. There were no other transactions with Trustees during either year.

The only related party transactions were between the parent charity and the trading subsidiary. These were routine items, primarily where shops in the subsidiary receive donations of the sale proceeds of donated goods but then transfer such donations, net of commission, into the parent charity accounts. Also, payroll costs where the parent charity administers payroll for the group but transfers the relevant costs to the subsidiary. Year end balances are shown in the charity columns of Note 17 Debtors. Net recharges in the year were £2,238k (2021: £1,600k).

24. Taxation

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

	Group	
	2022	2021
	£	£
Corporation Tax current year	-	(21,431)
Adjustments in respect of prior years	-	1,704
	-	(19,727)

Notes to the financial statements

For the year ended 31 March 2022

25. (a) Statement of funds current year

	Balance at 1 April 2021	Income	Expenditure	Transfers in/out	Designated	Gains	Corporation Tax	Balance at 31 March 2022
	£	£	£	£	£	£	£	£
Unrestricted Funds								
General Funds	7,292,645	9,980,897	(10,652,559)	106,497	2,279,085	19,941	-	9,026,506
Designated Funds	2,379,085	-	-	-	(2,279,085)	-	-	100,000
	9,671,730	9,980,897	(10,652,559)	106,497	-	19,941	-	9,126,506
Restricted Funds								
Earmarked Donations	171,721	214,073	(34,486)	(106,497)	-	-	-	244,811
HUK/NHSE COVID-19	-	880,154	(880,154)	-	-	-	-	-
	171,721	1,094,227	(914,640)	(106,497)	-	-	-	244,811
Total of Funds	9,843,451	11,075,124	(11,567,199)	-	-	19,941	-	9,371,317

(b) Statement of funds prior year

	Balance at 1 April 2020	Income	Expenditure	Transfers in/out	Designated	Gains	Corporation Tax	Balance at 31 March 2021
	£	£	£	£	£	£	£	£
Unrestricted Funds								
General Funds	6,554,801	10,629,237	(7,882,690)	210,179	(2,379,085)	140,476	19,727	7,292,645
Designated funds	-	-	-	-	2,379,085	-	-	2,379,085
	6,554,801	10,629,237	(7,882,690)	210,179	-	140,476	19,727	9,671,730
Restricted Funds								
Earmarked Donations	144,151	260,826	(23,077)	(210,179)	-	-	-	171,721
HUK/NHSE COVID-19	-	3,077,114	(3,077,114)	-	-	-	-	-
	144,151	3,337,940	(3,100,191)	(210,179)	-	-	-	171,721
Total of Funds	6,698,952	13,967,177	(10,982,881)	-	-	140,476	19,727	9,843,451

Notes to the financial statements

For the year ended 31 March 2022

Transfer of Funds

The transfer of £106,497 relates to expenditure on restricted projects which has been disclosed as unrestricted expenditure on the face of the SOFA. This predominantly relates to staff costs which are reported within the costs of charitable activities.

Designation of Funds

The Trustees have designated £100,000 to support the pilot of new income generation initiatives.

Restricted Funds

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

Earmarked Donations

These are donations contributed by the general public to help fund specific clinical activities. At the end of the year £244,811 remained unspent and this will be expended in 2022/2023 onwards.

Hospice UK/NHSE

Non recurring funding of a restricted nature was received from NHSE as explained in Note 9. The cost of charitable activities (Note 11) is greater than the combination of this NHSE funding and other income from charitable activities (Note 8) and therefore the Trustees consider that this restricted funding has been fully utilised within the year.

Notes to the financial statements

For the year ended 31 March 2022

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

	Restricted Funds	Unrestricted Funds	Total Funds
	£	£	£
Fixed assets	2,500	5,900,888	5,903,388
Current assets	242,311	4,404,795	4,647,106
Current liabilities	-	(824,177)	(824,177)
Liabilities due after one year	-	(355,000)	(355,000)
	244,811	9,126,506	9,371,317

(b) Analysis of net assets between funds prior year

	Restricted Funds	Unrestricted Funds	Total Funds
	£	£	£
Fixed assets	2,500	5,978,734	5,981,234
Current assets	169,221	4,914,465	5,083,686
Current liabilities	-	(859,872)	(859,872)
Liabilities due after one year	-	(361,597)	(361,597)
	171,721	9,671,730	9,843,451

27. Ashgate Hospicecare Shops Limited:

Profit and loss account for the year ended 31 March 2022

	2022	2021
	£	£
Turnover	2,500,559	953,703
Furlough	12,659	423,967
Retail Grant	57,337	189,868
Total income	2,570,555	1,567,538
Cost of sales	(1,898,882)	(1,526,557)
Gross Profit	671,673	40,981
Administrative expenses	(671,754)	(595,661)
Other interest payable	(8,258)	-
Other interest relievable	166	50
Tax on profit	-	19,727
Retained (loss) for the year	(8,173)	(534,903)
Number of shops and coffee shops	18	18

Notes to the financial statements

For the year ended 31 March 2022

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

	2022	2021
	£	£
Net movement in funds	(472,134)	3,144,499
Depreciation charges	347,023	355,001
(Decrease) in creditors	(22,502)	(124,091)
Decrease / (Increase) in debtors	965,359	(1,788,587)
(Increase) in stocks	(8,626)	(3,079)
(Gain) on investments	(19,941)	(140,476)
Interest received	(1,372)	(1,041)
Net cash generated by operating activities	787,807	1,442,226

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

29. Contingent assets – legacy income

As at the reporting date, it is probable that additional legacies totalling £0.5m (20/21 £0.5m) are to be received. These have not been included within accrued income, as although the income is probable, the amounts have not yet been confirmed.

Notes to the financial statements

For the year ended 31 March 2022

30. Consolidated statement of financial activities – prior year

	Unrestricted Funds	Designated Funds	Restricted Funds	2021 Total
	£	£	£	£
Income:				
Donation and legacies				
Donations	2,625,418	-	260,826	2,886,244
Legacies	1,704,114	-	-	1,704,114
	4,329,532	-	260,826	4,590,358
Income from other trading activities:				
Shops	1,374,196	-	-	1,374,196
Fundraising	826,037	-	-	826,037
Other	122,022	-	-	122,022
	2,322,255	-	-	2,322,255
Investment income	1,041	-	-	1,041
Income from charitable activities	3,491,398	-	-	3,491,398
Income from COVID-19 Grants	-	-	3,077,114	3,077,114
Income from furlough	485,011	-	-	485,011
Total income	10,629,237	-	3,337,940	13,967,177
Expenditure:				
Costs of raising voluntary income	570,407	-	-	570,407
Fundraising & other trading costs	3,231,594	-	-	3,231,594
Costs of charitable activities	4,080,689	-	3,100,191	7,180,880
Total expenditure	7,882,690	-	3,100,191	10,982,881
Net income/(expenditure) before investment gains	2,746,547	-	237,749	2,984,296
Gains/(Losses) on investments	140,476	-	-	140,476
Corporation tax	19,727	-	-	19,727
Net income/(expenditure)	2,906,750	-	237,749	3,144,499
Reserves transfer	210,179	-	(210,179)	-
Designated funds transfer	(2,379,085)	2,379,085	-	-
Net movement in funds	737,844	2,379,085	27,570	3,144,499
Reconciliation of funds				
Total funds brought forward	6,554,801	-	144,151	6,698,952
Total funds carried forward	7,292,645	2,379,085	171,721	9,843,451

**Thank you to everyone
who supports us and
helps us to be there
when it matters most.**

For more information

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

Call us on **01246 567 250**

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

Looking for support?

Call us on **01246 568 801**

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

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

