

# **Hospiscare**

**(A company limited by guarantee)**

**Charity number 297798**

**Trustees' Report and Financial Statements**

**Year Ended 31 March 2025**

**Registered company number 02164215**

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## Hospiscare

### Trustees' Report For the year ended 31 March 2025

#### Trustees' Report

The Trustees present their annual report (including the Strategic Report for the purpose of the Companies Act 2006) and the audited financial statements for the year ended 31 March 2025

#### CHAIR'S REVIEW OF THE YEAR

We started this year facing a significant and challenging budgeted deficit of £2.5m and with our statutory funding from NHS Devon Integrated Care Board ("NHS Devon ICB") continuing to trail that of neighbouring hospices.

With our financial situation starkly defined, committed action was taken this year to address the deficit and reduce risk to the Group. This included a redesign of our clinical services – in particular the Hospiscare at Home service we offered in part of our geographical patch – to a smaller rapid response at-home team that covers our entire locality. As a result, we made roles redundant within our Hospiscare at Home team and reduced headcount within our senior management and support services teams. These were difficult decisions to make, but necessary for the charity's long-term health.

In addition to reducing spend, the year brought some good, albeit short-term, news in terms of income, with our fair funding campaign finally bringing a positive change to our NHS funding. With the support of our community, we were, at last, able to negotiate greater parity in our statutory funding by securing an increase from the NHS Devon ICB for this year.

Meanwhile, our income generation teams worked incredibly hard and performed strongly. Our community responded to public communication regarding our financial situation with humbling generosity, while our flagship fundraising events and retail stores continued to perform well, with our fundraising and retail income surpassing budgets.

Our income also received unexpected, but much needed and very welcome, boosts from highly fluctuating income streams, such as a single one-off donation worth £625.0k and an unexpectedly strong performance in legacy income from gifts in wills.

However, despite some significant savings and strong performing income streams, we ended the year with an unrestricted operating loss of £65.2k, before net gains on investments are considered.

Another significant development in 2024/25 was the completion of a merger between Hospiscare and Budleigh Salterton & District Hospiscare (BS&D Hospiscare). On 1 November 2024, after approval by the Trustees of Hospiscare and Trustees and Members of BS&D Hospiscare, the two associated charities merged. This step was taken to formalise four decades of partnership working between the two charities and to align with guidance from the Charity Commission that charities should merge where appropriate to reduce duplication and make better use of resources.

Patient services in BS&D Hospiscare's area continue to be provided by Hospiscare, as they always have, and this has not changed. As part of the merger, the charitable reserves of BS&D Hospiscare have been transferred to Hospiscare as restricted reserves, and recognised as other income of £4.9m. These funds are ringfenced for the benefit of patients in BS&D Hospiscare's area. At 31 March 2025, these restricted funds show as £5.2m in the Group's financial statements.

It has been a challenging year for hospice charities nationwide, with distressing news of closures and service cuts in the media, as hospices increasingly grapple with rising costs and stagnant funding.

Looking to the 2025/26 financial year, we foresee a budgeted funding shortfall of £1.3m and must still raise over three quarters of our running costs from our community. Our statutory funding for future years remains unclear – with the announced abolition of NHS England pending and the new 10-year NHS plan emerging – meaning our supporters are needed more than ever.

## Hospiscare

### Trustees' Report For the year ended 31 March 2025

#### WHAT WE DO

Our vision is to ensure those in need receive outstanding end-of-life care in the place of their choice.

Our mission is to provide compassionate, expert end-of-life care to those in need – before, during and after death. Together with our local community, we make every day matter.

We wish to thank our staff, volunteers, supporters, and donors, for their vital contribution to the hospice. Without the dedication of our team, and the generous support of our community, we wouldn't have been able to continue providing expert care this year for patients and families across Exeter, central and east Devon.

As a healthcare provider, we are registered with the Care Quality Commission ('CQC') and the CQC's five lines of enquiry – caring, responsive, effective, safe and well-led – form the basis of our care. In the summer of 2024, we were delighted and proud to have received confirmation from CQC that we have retained our 'outstanding' CQC rating following their inspection of our hospice – a marker of standards that is matched by the 4.95/5 star rating that our services were awarded in 2024/25 by our patients and those close to them.

#### **Providing expert end-of-life care where and how it matters**

At Hospiscare, we are committed to caring for patients according to their needs and in the place of their choice. This year, we therefore redesigned our model of specialist care to further meet the changing needs of our patients and, in October 2024, we launched our rapid response service – bringing at-home care to patients who are experiencing acute symptoms, or whose health is rapidly deteriorating, across our full geographical area. In the first six months of this new service, our rapid response team saw 136 patients across more than 1,000 square miles of Devon and played a vital role in supporting 72% of our patients to die at home during the year.

We are also proud to have continued our respective working relationships with St Petrock's homelessness charity and HM Prison Exeter, to ensure our specialist end-of-life care is available to everyone in our community, no matter their circumstance or location. We are also working to expand our outreach care via developing collaborations with other local charities in our area.

Other opportunities to strengthen our provision and care lie in our work with Children's Hospice South West to tailor our care for young adults with life-limiting illnesses who are transitioning from child hospice services to adult services, and in our work alongside a NHS neurological team to set up and facilitate a neuro 'Living Well' group, with a similar approach to our successful Heart2Heart group for patients in heart failure.

Additional detailed information regarding our services and care quality standards can be found in the Impact Report available on our website.

## Hospiscare

### Trustees' Report For the year ended 31 March 2025

#### FINANCIAL REVIEW

The consolidated financial statements comprise the results of the Charity, together with its subsidiary company, Hospiscare (Shops) Limited and from 1 November 2024, its subsidiary charity, Budleigh Salterton and District Hospiscare ("BS&D Hospiscare"), collectively referred to as "the Group".

#### Financial position at the year end

The financial statements show the consolidated financial position of the Group. At 31 March 2025, the net assets of the Group were £16.7m (2023/24 - £11.7m); an increase of £5.0m during the year predominantly due to the merger with BS&D Hospiscare. In addition, the Group held £8.7m (2023/24 - £5.2m) in fixed asset investments and £3.5m (2023/24 - £1.8m) in cash.

Tangible fixed assets mainly comprise the depreciated cost of the Group's hospices and shops and the plant, fixtures and fittings therein. Investments comprise property held for the generation of rental income and investment portfolios managed by external professional investment managers. The Group's cash balances are receivable on demand and are held in sterling by leading UK banks and financial institutions. Debtors and creditors represent normal working capital. Provisions represent the expected cost of future lease dilapidations in respect of the retail estate.

The main changes in the makeup of the balance sheet during the year are as follows:

- An increase in fixed asset investments by £3.5m due primarily to the investments brought into the Group's financial statements as a result of the merger with BS&D Hospiscare;
- An increase in cash at-bank and in-hand balance by £1.7m, predominantly due to the timing of investment sales and purchases around the year end, and the merger with BS&D Hospiscare bringing an additional £179k of cash held in its investment portfolio at 31 March 2025;
- A reduction in debtors by £753.8k due to the timing of invoices raised to NHS Devon ICB.

#### Financial review and significant events

The overall financial performance for the year was better than expected due to an increase in the level of funding from NHS Devon ICB, a large one-off donation and increases in legacy income, whilst a strategically planned cost reduction exercise aided savings in expenditure against budget throughout the year.

The total level of income generated during 2024/25 increased by £3.3m (35.1%) (excluding the transfer of funds from the merger with BS&D Hospiscare) compared to the previous year. This was made up of £1.9m increase in donations and legacies, £937.1k increase in charitable activities and £461.5k increase in trading activities. The Group has also recognised restricted other income of £4.9m relating to the merger with BS&D Hospiscare during the year.

Funding from NHS Devon ICB represents 18.1% (2023/24 - 15.3%) of total income (excluding the transfer of funds from the merger with BS&D Hospiscare), and 18.2% (2023/24 - 11.9%) of the cost of provision. This compares to the national average of circa 30% of total income. Hospiscare is working with NHS Devon ICB to secure additional funding to achieve parity with other hospices within Devon and across the UK.

Investment income was slightly lower than in previous years by £18.1k, caused by a slight instability in the receipt of income from the investment portfolios and falling interest rates.

All the above funding sources are primarily used to meet both the direct cost of the Group (providing services to patients and their families) and necessary central and support costs.

## Hospiscare

### Trustees' Report For the year ended 31 March 2025

#### FINANCIAL REVIEW (continued)

##### Financial review and significant events (continued)

Expenditure generally remained controlled year-on-year, although expenditure on raising funds increased by 9.9%. This aligns with the Group's conscious and strategic efforts to increase income and minimise costs; with the removal of roles from its senior management team and support services, and within the Hospiscare at Home team, as well as organisation-wide energy and efficiency saving initiatives. In terms of expenditure on charitable activities, Hospiscare invested its resources in establishing its rapid response team to bring at-home care to patients across its full geography, and reconfiguring our clinical care space in Mid Devon.

##### Going concern

Hospiscare's Trustees have assessed the ability of the Group to continue in operational existence for a period of at least 12 months from the date of approval of these consolidated financial statements. The UK is facing significant cost-of-living pressure, and the charity sector is not immune to the effects of this. Over recent years, the Group has been able to generate reserves to ensure that any shortfall in income, or increase in costs, can be absorbed without affecting service delivery. Having reviewed the organisation's latest financial information, the Trustees are assured of the Group's financial viability.

The Group is currently rated 'outstanding' by CQC and has reviewed its ongoing compliance with the CQC framework and believes that, after this assessment, the organisation continues to meet its regulatory requirements.

The Trustees have no knowledge of any other financial or regulatory action which could cause the Group to cease operations. For this reason, they continue to adopt the going concern basis in preparing the financial statements. Further details regarding the adoption of the going concern basis can be found in the accounting policies note of the consolidated financial statements.

##### Reserves and reserves management policy

The Group utilises reserves to fund future service provision where the level of funding raised is not sufficient to meet the cost of delivering services. This enables the organisation to spread the use of money across multiple years and use surpluses from one year to fund deficits in subsequent years. This enables Hospiscare to provide a wide range of services across Exeter, central and east Devon without having to adjust the delivery model on an annual basis.

Hospiscare holds the following reserves:

**Restricted reserves of £5.5m (2023/24: £904.9k)** are the value of monies which have been donated with a specific charitable purpose in mind. These cannot be spent on the overall running of the Group without the express permission of the donor. The increase in the year is due to the BS&D Hospiscare merger.

**Designated reserves of £8.7m (2023/24: £8.5m)** are split between those that are needed to fund an anticipated short-term gap in funding (Stability & working capital reserve), and those which relate to capital assets and are not readily converted to cash for the provision of services (Capital reserve).

**General reserves of £2.5m (2023/24: £2.3m)** are available to fund future projects and are not limited in scope.

## Hospiscare

### Trustees' Report

For the year ended 31 March 2025

#### FINANCIAL REVIEW (continued)

##### Reserves and reserves management policy (continued)

The Group had a total of £16.7m in reserves at 31 March 2025 (2023/24 - £11.7m). Hospiscare's current reserves policy is to keep six to twelve months expenditure within free reserves (total reserves less restricted and capital reserves) unless the Trustees identify a specific future use for the monies which mean that it needs to be retained for a longer period. The full breakdown of the reserves and their use can be found in Note 20 to the consolidated financial statements.

##### Future income streams

The Trustees recognise that an increase in unrestricted funds is required to finance the Group's working capital requirements and to provide a buffer against unexpected shortfalls in income, particularly in respect of fundraising activities, legacies that are unpredictable in amount and timing, and against falls in the value of the Group's investments.

#### OUR INVESTMENT APPROACH AND PERFORMANCE

##### Asset allocation

Any cash which is not required for the immediate payment of the Group's costs is held as either investments or cash.

Short term (less than 12 months) treasury deposits are made which secure a fixed return on investment. There is limited risk to the capital sum invested (the risk being created by a default of a UK bank and the limited protection being offered by the UK government) and the returns are known, however, the overall gain tends to be lower than is achievable with longer term investments.

Medium to long-term investments are held by fund managers, Charles Stanley, who invest in portfolios comprising cash, bonds, equities, property, hedge funds, structured products, private equity, and commodities. These investments should generate a return which is greater than inflation over a medium to long-term investment period but can result in losses within a given year. Medium to long-term investments are necessary to protect the value of the organisation's long-term reserves from being eroded by inflation. The Group's portfolios are classified as being either low or low/medium risk, with the BS&D Hospiscare restricted fund held in a medium/high risk portfolio. This means that for unrestricted funds the risk of capital reduction is low, however, the rate of appreciation is predicted to be lower compared to higher risk portfolios.

##### Method of review

During the year, the Group's investments are kept under regular review by the Audit & Risk Committee on the advice of the investment portfolio managers. This helps to ensure that the Group's investments are positioned to meet the strategy detailed in the investment policy. The Board considers a report on investment performance on an annual basis.

##### Restrictions and ethical policy

The Trustees take account of social, environmental, and ethical issues in the Group's investment policy and endeavour not to invest in companies that draw a major part of their income from tobacco related products and arms manufacturers.

## Hospiscare

### Trustees' Report For the year ended 31 March 2025

#### THE GOVERNANCE OF FUNDRAISING

##### Fundraising standards information

We adhere to the Fundraising Regulator and its Fundraising Code along with the Gambling Commission and its License Conditions and Codes of Practice. We have not had any breaches against these during 2024/25. We regularly monitor and report on all our fundraising activities and provide training and guidance to those taking on our fundraising activities, meeting regularly with our volunteer fundraising groups.

We are very mindful of how we engage with vulnerable people and ensure we work within the Data Protection Laws and Fundraising Code of Practice, and we have a Safeguarding Lead we can seek advice from if needed.

##### Complaints

During the year, we received three complaints linked to our fundraising activities; all were resolved promptly.

#### STRUCTURE, GOVERNANCE AND MANAGEMENT

Hospiscare is a registered charitable company limited by guarantee. The Charity is constituted under Articles of Association and is a registered charity, number 297798. The Charity was set up in 1982 and was established as a company limited by guarantee in 1987. In the event of the company being wound up, members are required to contribute an amount of £1.

The company has three wholly owned subsidiaries:

- Hospiscare (Shops) Limited (company number 02201730 (England & Wales)), an entity which recognises the trading element of Hospiscare.
- Budleigh Salterton and District Hospiscare (charity number 1162329 (England & Wales)), who since the merger with Hospiscare during the year, has had no income or expenditure and its net assets at the year-end were £nil.
- Hospiscare Exmouth and Lympstone (company number 02927336 (England & Wales)), who since its merger with Hospiscare in 2019, has had no income or expenditure and its net assets at the year-end were £nil.

##### Organisational structure

Hospiscare is governed by its Board of Trustees and throughout 2024/25 there have been three sub-committees of the Board which scrutinise specific areas in detail. These sub-committees are:

- Quality Assurance and Improvement Committee – meet quarterly
- Audit and Risk Committees – meet quarterly
- Nominations and Remuneration Committee – meet as required

The Chair of the Trustees is Michael Williams, whose career in NHS management encompassed periods as a Director and a CEO in NHS organisations. The Group is organised so that the Trustees meet collectively four times a year to direct the management of its affairs. Strategy days are also held twice a year.

The operational management of the Group lies with the Senior Leadership Team (SLT) who meet monthly and the Executive Leadership Team (ELT) who meet weekly.

## Hospiscare

### Trustees' Report

For the year ended 31 March 2025

## STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

### Organisational structure (continued)

Hospiscare (Shops) Limited is managed by its Board of Directors comprising members of Hospiscare's ELT.

The Trustees consider they have complied with their duty to have due regard to the guidance on public benefit published by the Charity Commission in exercising their powers or duties.

Hospiscare has reviewed the Charity Governance Code and aspires to meet its principles.

The Board seeks to ensure that it encompasses an appropriate range of skills and talent. Hospiscare's Nominations Committee oversees the recruitment of new Trustees, following the Charity's policy on Trustee recruitment. Trustees are appointed by the Board and serve for three years after which period they may put themselves forward for re-appointment. Trustees may be appointed for a maximum of three consecutive terms of three years after which they may be able to extend for one further year, following which they must then step down. The Trustees also receive training on other topics relevant to governance and their committee membership.

New Trustees are offered an induction which includes an induction pack and a comprehensive induction programme that includes spending time with each of the key services that the Group provides and visiting its shops. Trustees identify topics on which they would like further information or training, and appropriate measures are put in place to provide this. A presentation about patient experience is made by clinical staff, anonymously, at the beginning of every Board meeting.

### Management

The day-to-day operation of the Group is carried out by the Executive Leadership Team (ELT), who have delegated responsibility and are employees of Hospiscare. This work is overseen by Wayne Gale, Interim Chief Executive. The other members of ELT are:

- Ann Rhys – Clinical Director and Deputy CEO
- Lynne Hyland – Interim Director of Finance
- Rhodri Morgan – Director of Retail

### Executive Leadership Team remuneration

The Group has a Nominations and Remuneration Committee, which reviews the pay and benefits of its senior staff every two years. The committee comprises of up to six Trustees, one of which is the Chair of Trustees. The committee considers information from a variety of available sources to benchmark the pay and benefits of its senior staff and makes recommendations to the Board accordingly.

### Employees

The Group is committed to the principle of equal opportunities in employment and recognises its obligations under the Equality Act 2010. The Group declares its opposition to any form of less favourable treatment, whether through direct or indirect, associated or perceived discrimination accorded to Hospiscare staff, or job applicants, on the grounds of their race/nationality or ethnic origin, disability, sex, age, sexual orientation and gender reassignment, marital and civil partnership status, pregnancy and maternity, religion or belief (otherwise known as 'protected characteristics' as defined by the Equality Act 2010), including Human Rights.

## Hospiscare

### Trustees' Report

For the year ended 31 March 2025

#### **STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)**

##### **Employees (continued)**

Hospiscare is committed to creating a positive culture that fosters respect for all staff and promotes positive practice, valuing the diversity of all individuals and communities.

Hospiscare embraces and recognises the importance of diversity, knowing that different people bring different perspectives, ideas, knowledge and culture that brings great strength to our organisation.

Our aim is to create a culture that respects and values each person's differences and promotes dignity, equality, diversity and inclusivity to encourage individuals to develop and maximise their true potential.

Continued close attention is paid to the health and safety of employees and as such, all staff are provided with regular health and safety training in line with Hospiscare's Health and Safety Policy.

Employee views are sought through several forums including one to ones, team meetings and our 'Staff Voice' forum. The Group's strong 'Speaking Up' culture is also encouraged by our 'Freedom to Speak Up Guardians' from across the organisation, with a report submitted to the Board annually. Information concerning the Group and its activities and performance are shared with employees through several mediums including email, the staff intranet and organisational meetings.

##### **Risk management, principal risks and uncertainties**

The responsibility for the management and control of a charitable group rests with the trustee body and therefore their involvement in the key aspects of the risk management process is essential, particularly in setting the parameters of the process and reviewing and considering the results. The corporate risk register is reviewed quarterly by the Audit and Risk Committee and Quality Assurance and Improvement Committee, and then annually to the Board. Departmental risks are reviewed by SLT and appropriate departments. Update reports are presented to Committees and the Board.

The Board has considered risk appetite and recognises that the Group's long-term sustainability depends upon the delivery of its strategic objectives and its relationships with patients, supporters, the local community and strategic partners.

## Hospiscare

### Trustees' Report

For the year ended 31 March 2025

#### STRUCTURE, GOVERNANCE AND MANAGEMENT (continued)

##### Risk management, principal risks and uncertainties (continued)

The principal risks and uncertainties facing the Group and the Trustees' plans and strategies for managing those risks are set out in the table below:

<b>Risk Title</b>	<b>Summary of Control</b>
Insufficient quality of care	Adherence to CQC regulation and statutory obligations. Systematic quality review and audit. In-house monitoring of clinical governance by Quality Assurance and Improvement Committee and Patient Experience and Safety meetings. Robust systems and processes for clinical and care work.
Long-term sustainability of the business model	Strategic planning to stabilise and reduce budget deficit, including 3-year Income Generation plan and sustainable cost management. Ongoing dialogue with the Integrated Care Board.
Organisational Governance	Appropriate policies and procedures put into place and updated as and when required so all staff and volunteers are aware of their obligations to uphold required legislation. Diverse Board of Trustees with relevant knowledge and experience, identified and monitored through a formal skills matrix.
Emerging technology and increased cybersecurity threats	Implementation of both proactive and reactive cyber secure measures such as Penetration testing, Phishing campaigns, ongoing I.T. training, Multi-Factor Authentication and remote monitoring.

Monthly reviews are carried out with the Directors and SLT to ensure the risks are kept up to date and managed.

The Group will not accept risks that materially impact on patient safety, however does have a greater appetite to take considered risks in terms of their impact on organisational issues and reputation. Hospiscare has appetite to pursue innovation and to take opportunities where positive gains can be anticipated, within the constraints of the regulatory environments.

Hospiscare is compliant with all relevant legal, statutory and regulatory standards. It has followed Charity Commission guidance.

The Group has updated its information governance and security in line with the General Data Protection Regulation (GDPR) and has appointed an outsourced Data Protection Officer who is provided by Delt Shared Services. The Senior Information Risk Owner (SIRO) role has been held by the Clinical Director with overall responsibility for the Charity's Data Security and Protection policy and other information governance policies. The SIRO is accountable and responsible for information risk across the organisation.

##### Related parties

The Articles of Association of Hospiscare (Shops) Limited give the Charity power to control the decisions of that company.

## Hospiscare

### Trustees' Report For the year ended 31 March 2025

#### REFERENCE AND ADMINISTRATION

Company Number 02164215  
Charity Number 297798

#### Directors and Trustees

Secretary Wayne Gale  
Registered Office Searle House, Dryden Road, Exeter, Devon, EX2 5JJ  
Trustee Dr Helen Enright  
Trustee Dr Sarah Jackson  
Trustee Michael Williams  
Trustee Nicholas Frost  
Trustee Anthony Martin  
Trustee Dr Tim Harlow  
Trustee Martin Briggs (appointed 1 November 2024)  
Trustee Susan Hudson (appointed 1 November 2024)  
Trustee Beth Reynolds (appointed 30 September 2025)  
Trustee Sarah Hughes (appointed 30 September 2025)  
Trustee Sarah Dodd (appointed 30 September 2025)  
Trustee Sandra Sampson (appointed 30 September 2025)  
Trustee Brian Aird (resigned 9 January 2025)  
Trustee Cathy Durston (resigned 24 September 2024)  
Trustee Craig Smith (resigned 24 June 2025)  
Trustee Jose Cortizo (resigned 6 January 2025)  
Trustee Jennifer Winslade (resigned 20 May 2024)

#### Senior Management Team

Chief Executive Officer Wayne Gale (appointed 1 January 2025)  
Chief Executive Officer Andrew Randall (resigned 31 December 2024)  
Operations Director and Deputy CEO Wayne Gale (resigned 31 December 2024)  
Director of Care Ann Rhys  
Interim Director of Finance and Governance Lynne Hyland (appointed 10 March 2025)  
Director of Finance and Governance Martin Cordy (resigned 31 March 2025)  
Retail Director Rhodri Morgan

#### Advisors

Principal Bankers National Westminster Bank Plc, 59 High Street, Exeter, EX4 3DL  
Independent Auditors PKF Francis Clark, Centenary House Peninsula Park, Rydon Ln, Exeter EX2 7XE

## Hospiscare

### Trustees' Report

For the year ended 31 March 2025

#### STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees (who are also directors of Hospiscare for the purposes of company law) are responsible for preparing the Trustees' report (including the group strategic report) and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

Charity and company law requires the Trustees to prepare financial statements for each financial year. Under company law, the Trustees must not approve the financial statements unless they are satisfied that they give a true and fair view of the state of affairs of the Charitable Company and the Group, and of the incoming resources and application of resources, including the income and expenditure, of the charitable group for that period. 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 and FRS 102
- make judgements and accounting estimates that are reasonable and prudent
- prepare the financial statements on the going concern basis, unless it is appropriate to presume that the Charitable Company and the Group will continue in operation.

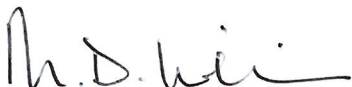
The Trustees are responsible for keeping adequate accounting records that are sufficient to show and explain the Charitable Company and the Group's transactions; to disclose, with reasonable accuracy at any time, the financial position of the Charitable Company and the Group and enable them to ensure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

#### Disclosure of Information to Auditors

Each of the persons who are Trustees at the time when this Trustees' report is approved has confirmed that:

- so far as that Trustee is aware, there is no relevant audit information of which the charitable group's auditors are unaware, and
- that Trustee has taken all the steps that ought to have been taken as a Trustee in order to be aware of any information needed by the charitable group's auditors in connection with preparing their report and to establish that the charitable group's auditors are aware of that information.

This report, incorporating the group strategic report, was approved by the Trustees, in their capacity as company directors, and signed on their behalf by:



Michael Williams  
Chair of Trustees

Date: 9.12.25

## Hospiscare

### Independent Auditors' Report to the Members of Hospiscare For the year ended 31 March 2025

#### Opinion

We have audited the Financial Statements of Hospiscare (the "Charity") for the year ended 31 March 2025 which comprise the Group Statement of Financial Activities, Group and Parent Charity Balance Sheets, Statement of Consolidated Cash Flows 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 (United Kingdom Generally Accepted Accounting Practice), including Financial Reporting Standard 102: The Financial Reporting Standard applicable in the UK and Republic of Ireland.

In our opinion, the financial statements:

- Give a true and fair view of the state of the group's and charity's affairs as at 31 March 2025 and of its income and expenditure for the year then ended
- Have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice (GAAP)
- Have been prepared in accordance with the requirements of the Companies Act 2006

#### Basis for opinion

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

#### Conclusions relating to going concern

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

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

## Hospiscare

### **Independent Auditors' Report to the Members of Hospiscare (continued) For the year ended 31 March 2025**

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

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

In the light of the knowledge and understanding of the Charity and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' report.

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

- Adequate accounting records have not been kept or returns adequate for our audit have not been received from branches not visited by us; or
- The financial statements are not in agreement with the accounting records and returns; or
- Certain disclosures of 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 the Trustees**

As explained more fully in the Statement of Trustees' Responsibilities set out on page 12, the Trustees (who are also the Directors of the Charity for the purposes of Company Law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as 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 Charity'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 Charity or to cease operations, or have no realistic alternative but to do so.

## Hospiscare

### Independent Auditors' Report to the Members of Hospiscare (continued) For the year ended 31 March 2025

#### 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:

As part of our audit planning, we obtained an understanding of the legal and regulatory framework that is applicable to the Charity. We gained an understanding of the Charity and the industry in which the Charity operates as part of this assessment to identify the key laws and regulations affecting the Charity. As part of this, we reviewed the Charity's website for indication of any regulations and certification in place and discussed these with the relevant individuals responsible for compliance. The key regulations we identified were Charity Legislation, compliance with the Care Quality Commission ("CQC"), safeguarding, health and safety regulations and The General Data Protection Regulation ("GDPR"). We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006.

We discussed with management and trustees how the compliance with these laws and regulations is monitored and discussed policies and procedures in place. We also identified the individuals who have responsibility for ensuring that the Charity complies with laws and regulations and deals with reporting any issues if they arise. As part of our planning procedures, we assessed the risk of any non-compliance with laws and regulations on the Charity's ability to continue trading and the risk of material misstatement to the accounts.

Based on this understanding we designed our audit procedures to identify non-compliance with such laws and regulations. Our procedures involved the following:

- Enquiries of management regarding their knowledge of any non-compliance with laws and regulations that could affect the financial statements. As part of these enquiries, we also discussed with management whether there have been any known instances, allegations or suspicions of fraud, of which there were none.
- Reviewed filings with the Charity Commission and whether there were any serious incident reports made during the year, of which there were none.
- Reviewed audit documentation from the CQC to confirm compliance with standards, and ensuring continued registration with the CQC through the CQC website.
- Discussed with the Health and Safety Officer if any incidents have been reported during the year under The Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 2013 ("RIDDOR").
- Review of the group's GDPR policy and enquiries to the Data Protection Officer as to the occurrence and outcome of any reportable breaches.

## Hospiscare

### Independent Auditors' Report to the Members of Hospiscare (continued) For the year ended 31 March 2025

- Reviewed legal and professional costs to identify any possible non-compliance or legal costs in respect of non-compliance.
- Reviewed board minutes.

As part of our enquiries, we discussed with management whether there have been any known instances, allegations or suspicions of fraud, of which there were none. We evaluated the risk of fraud through management override. The key risks we identified were management bias in accounting judgements and estimates. We also evaluated the risk of fraud through misapplication of grant funding.

In response to the identified risk, as part of our audit work, we:

- Audited the risk of management override of controls, including through testing journal entries and other adjustments or appropriateness, and evaluating the business rationale of significant transactions outside the normal course of business of which there were none.
- Reviewed estimates and judgements made in the accounts for any indication of bias and challenged assumptions used by management in making the estimates.

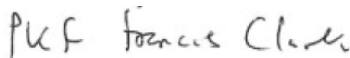
Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements. The risk of not detecting a material misstatement due to fraud is higher than the risk of not detecting one resulting from error, as fraud may involve deliberate omissions, collusion, forgery and misrepresentations, or the override of controls. We are also less likely to become aware of instances of non-compliance with laws and regulations that are not closely related to events and transactions reflected in the financial statements.

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

This description forms part of our auditor's report.

### Use of our Report

This report is made solely to the Charity'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 Charity'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 Charity's members as a body, for our audit work, for this report, or for the opinions we have formed.



Neil Hitchings (Senior Statutory Auditor)

For and on behalf of

PKF FRANCIS CLARK, Chartered Accountants & Statutory Auditor

Centenary House,

Peninsula Park

Rydon Lane,

Exeter, EX2 7XE

Date: 10 December 2025

## Hospiscare

### Consolidated Statement of Financial Activities (including income and expenditure account) For the year ended 31 March 2025

	Note	Restricted funds 2025 £	Unrestricted funds 2025 £	Total funds 2025 £	Total funds 2024 £
<b>Income and endowments</b>					
Donations and legacies	4	1,041,600	4,567,969	<b>5,609,569</b>	3,749,829
Charitable activities	5	184,099	2,716,550	<b>2,900,649</b>	1,963,502
Other trading activities	6	-	3,727,212	<b>3,727,212</b>	3,265,739
Investment income	7	58,841	128,928	<b>187,769</b>	205,825
Other income	8	-	103,156	<b>103,156</b>	87,748
Other income – BS&D Hospiscare	16	4,894,314	-	<b>4,894,314</b>	-
<b>Total income and endowments</b>		<u>6,178,854</u>	<u>11,243,815</u>	<u><b>17,422,669</b></u>	<u>9,272,643</u>
<b>Expenditure on:</b>					
Expenditure on raising funds	9	-	4,456,125	<b>4,456,125</b>	4,054,276
Expenditure on charitable activities	10	1,097,153	6,852,857	<b>7,950,010</b>	7,877,935
<b>Total expenditure</b>		<u>1,097,153</u>	<u>11,308,982</u>	<u><b>12,406,135</b></u>	<u>11,932,211</u>
Net (expenditure)/income before net gains on investments		5,081,701	(65,167)	<b>5,016,534</b>	(2,659,568)
Net gains/(losses) on investments	16	(88,817)	104,618	<b>15,801</b>	119,295
Net income/(expenditure) excluding other income – BS&D Hospiscare		98,570	39,451	<b>138,021</b>	(2,540,273)
Net income/(expenditure) including other income – BS&D Hospiscare		4,992,884	39,451	<b>5,032,335</b>	(2,540,273)
Transfers between funds	20	(381,099)	381,099	-	-
<b>Net movement in funds</b>		<u>4,611,785</u>	<u>420,550</u>	<u><b>5,032,335</b></u>	<u>(2,540,273)</u>
<b>Reconciliation of funds:</b>					
Total funds brought forward		904,852	10,774,592	<b>11,679,444</b>	14,219,717
Net movement in funds		4,611,785	420,550	<b>5,032,335</b>	(2,540,273)
<b>Total funds carried forward</b>		<u>5,516,637</u>	<u>11,195,142</u>	<u><b>16,711,779</b></u>	<u>11,679,444</u>

The statement of financial activities includes all gains and losses recognised in the year.

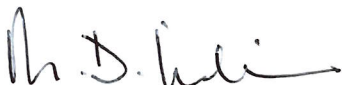
## Hospiscare

### Consolidated Balance Sheet For the year ended 31 March 2025

	Note	2025 £	2024 £
<b>Fixed assets</b>			
Tangible fixed assets	14	4,317,836	4,626,071
Investments	16	8,732,614	5,231,678
Investment properties	15	851,252	370,000
		<u>13,901,702</u>	<u>10,227,749</u>
<b>Current assets</b>			
Stocks		65,523	42,981
Debtors	17	567,189	1,320,952
Cash at bank and in hand		3,525,828	1,841,510
		<u>4,158,540</u>	<u>3,205,443</u>
<b>Creditors: amounts falling due within one year</b>	18	<u>(1,151,728)</u>	<u>(1,556,165)</u>
<b>Net current assets</b>		<u>3,006,812</u>	<u>1,649,278</u>
<b>Total assets less current liabilities</b>		<u>16,908,514</u>	<u>11,877,027</u>
Provision for liabilities	19	(196,735)	(197,583)
<b>Total net assets</b>		<u>16,711,779</u>	<u>11,679,444</u>
<b>Funds of the Group</b>			
Restricted funds	20	5,516,637	904,852
Unrestricted funds	20	11,195,142	10,774,592
<b>Total Group funds</b>		<u>16,711,779</u>	<u>11,679,444</u>

The notes on pages 21 to 48 form part of these financial statements.

These financial statements were approved for issue on 9.12.25..... These have been signed on behalf of the Board by:



Michael Williams  
Chair of Trustees

Company registered number: 02164215

## Hospiscare

### Charity Balance Sheet For the year ended 31 March 2025

	Note	2025 £	2024 £
<b>Fixed assets</b>			
Tangible fixed assets	14	4,317,836	4,626,071
Investments	16	8,822,617	5,321,681
Investment properties	15	851,252	370,000
		<u>13,991,705</u>	<u>10,317,752</u>
<b>Current assets</b>			
Debtors	17	675,575	1,320,946
Cash at bank and in hand		3,420,820	1,841,510
		<u>4,096,395</u>	<u>3,162,456</u>
<b>Creditors: amounts falling due within one year</b>	18	<u>(1,151,728)</u>	<u>(1,597,658)</u>
<b>Net current assets</b>		<u>2,944,667</u>	<u>1,564,798</u>
<b>Total assets less current liabilities</b>		<u>16,936,372</u>	<u>11,882,550</u>
Provisions for liabilities	19	(196,735)	(197,583)
<b>Total net assets</b>		<u>16,739,637</u>	<u>11,684,967</u>
<b>Funds of the Charity</b>			
Restricted funds		5,516,637	904,852
Unrestricted funds		11,223,000	10,780,115
<b>Total Charity funds</b>		<u>16,739,637</u>	<u>11,684,967</u>

The Charity's movement in funds for the year was net income of £5,054,670 (2024: net expenditure of £2,543,468).

The notes on pages 21 to 48 form part of these financial statements.

These financial statements were approved for issue on 9.12.25 These have been signed on behalf of the Board by:



Michael Williams  
Chair of Trustees

Company registered number: 02164215

## Hospiscare

### Consolidated Statement of Cash Flows For the year ended 31 March 2025

	Note	2025 £	2024 £
<b>Cash flows from operating activities</b>			
<i>Net cash provided by/(used in) operating activities</i>	22	<b>406,009</b>	(2,923,655)
<b>Cash flows from investing activities</b>			
Dividends, interests and rents from investments	7	<b>187,769</b>	205,825
Purchase of tangible fixed assets	14	<b>(455,135)</b>	(327,251)
Purchase of investments	16	<b>(1,289,562)</b>	(4,023,312)
Cash gained on merger with BS&D Hospiscare		<b>77,943</b>	-
Proceeds from sale of investments	16	<b>2,757,294</b>	3,409,965
Divestment of short-term deposits		-	2,500,000
<i>Net cash from investing activities</i>		<b>1,278,309</b>	1,765,227
<b>Change in cash and cash equivalents in the year</b>		<b>1,684,318</b>	(1,158,428)
Cash and cash equivalents at the beginning of the year		<b>1,841,510</b>	2,999,938
<b>Cash and cash equivalents at the end of the year</b>	23	<b>3,525,828</b>	1,841,510

## Hospiscare

### Notes to the Financial Statements For the year ended 31 March 2025

#### 1. General Information

The Charity is a company limited by guarantee, incorporated in England in the United Kingdom. Its registered office is Searle House, Dryden Road, Exeter, EX2 5JJ. The members of the Charity are the Trustees named on page 11. 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.

#### 2. Accounting Policies

##### 2.1 Basis of Preparation of the Financial Statements

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

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

The Consolidated Statement of Financial Activities (SOFA) and Consolidated Balance Sheet consolidate the financial statements of the Charity and its subsidiary undertakings. The results of the subsidiary are consolidated on a line by line basis.

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

In the year ended 31 March 2025, Hospiscare merged with Budleigh Salterton and District Hospiscare (BS&D Hospiscare). The assets and liabilities of BS&D Hospiscare were transferred to Hospiscare on 1 November 2024 for £nil consideration. In accordance with the Charities SORP guidance on mergers, the transaction is considered to be in substance a gift. The net assets acquired have been recognised at their fair value. Where the fair value of assets received exceeds the fair value of liabilities assumed, the resulting gain has been recognised within income and classified as other income.

##### 2.2 Going Concern

The Trustees have assessed whether the use of the going concern basis is appropriate and have considered possible events or conditions that might affect the ability of the Group to continue as a going concern. Given the improvement in financial performance during the year, and the strong cash position at the balance sheet date, the Trustees are assured of the Group's financial viability for a period of at least 12 months from the date of approval of these consolidated financial statements.

##### 2.3 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 Group and which have not been designated for other purposes.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

## 2. Accounting Policies

### 2.3 Fund Accounting (continued)

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 note 20. Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the Group for particular purposes. The costs of raising and administering such funds are charged against the specific fund. The aim and use of each restricted fund is set out in note 20.

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

### 2.4 Income

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

For legacies, entitlement is taken as the earlier of the date on which either: the Group is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Group that a distribution will be made, or when a distribution is received from the estate. Receipt of a legacy, in whole or in part, is only considered probable when the amount can be measured reliably and the Group has been notified of the executor's intention to make a distribution. Where a property is appropriated to the Group, the value of that appropriation will be recognised in the accounts. If advanced payment is offered to Hospiscare subject to an indemnity being required that means that the money could be repaid, this will not be considered confirmation that the amount should be recognised in the accounts.

Where legacies have been notified to the Group, or the Group is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Income from grants is included in incoming resources when receivable. When donors specify that grants are for a particular restricted purpose, which do not amount to pre-conditions regarding entitlement, this income is included in incoming resources within restricted funds when receivable.

When income is received in advance of delivering the service, it is deferred until the Group is entitled to that income.

Investment income is brought into the accounts when it is received.

Lottery income is accounted for based on the date of the lottery for which the ticket has been purchased.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

## 2. Accounting Policies (continued)

### 2.5 Expenditure

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

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

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

All expenditure is inclusive of irrecoverable VAT.

### 2.6 Interest Receivable

Interest on funds held on deposit is included when receivable and the amount can be measured reliably by the Group; this is normally upon notification of the interest paid or payable by the institution with whom the funds are deposited.

### 2.7 Tangible Fixed Assets and Depreciation

Tangible fixed assets costing £2,000 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably. Tangible fixed assets are initially recognised at cost. After recognition, under the cost model, tangible fixed assets are measured at cost less accumulated depreciation and any accumulated impairment losses. All costs incurred to bring a tangible fixed asset into its intended working condition should be included in the measurement of cost.

At each reporting date the Group assesses whether there is any indication of impairment. If such indication exists, the recoverable amount of the asset is determined to be the higher of its fair value less costs to sell and its value in use. An impairment loss is recognised where the carrying amount exceeds the recoverable amount.

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

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 2. Accounting Policies (continued)

##### 2.7 Tangible Fixed Assets and Depreciation (continued)

Depreciation is provided on the following bases:

- Freehold property – 2% straight line
- Long-term leasehold property – 2% straight line or over the term of the lease if shorter
- Short-term leasehold property – 2% straight line or over the term of the lease if shorter
- Plant and machinery – 20% straight line
- Motor vehicles – 20% straight line
- Fixtures and fittings – 15-33% straight line

##### 2.8 Investments

Fixed asset investments are a form of financial instrument and are initially recognised at their transaction cost and subsequently measured at fair value at the balance sheet date, unless the value cannot be measured reliably in which case it is measured at cost less impairment.

Investment gains and losses, whether realised or unrealised, are combined and presented as 'Net gains/(losses) on investments' in the Consolidated Statement of Financial Activities. Investments in subsidiaries are valued at cost less provision for impairment.

##### 2.9 Stocks

Stocks are stated at the lower of cost and net realisable value, being the estimated selling price less costs to complete and sell. Cost is based on the cost of purchase on a weighted average basis. At each reporting date, stocks are assessed for impairment. If stock is impaired, the carrying amount is reduced to its selling price less costs to complete and sell. The impairment loss is recognised immediately in profit or loss.

FRS 102 recommends that goods donated for resale are valued. However, estimating the fair value of donated goods for resale is impractical because of the high level of low value items received. The Trustees have therefore determined that no meaningful valuation can be made, and no value has been assigned to the stock of donated goods.

##### 2.10 Debtors

Trade and other debtors are recognised at the settlement amount after any trade discount offered.

Prepayments are valued at the amount prepaid.

##### 2.11 Cash at bank 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.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

## 2. Accounting Policies (continued)

### 2.12 Liabilities

Liabilities and provisions are recognised when there is an obligation at the balance sheet date as a result of a past event, it is probable that a transfer of economic benefit will be required in settlement, and the amount of the settlement can be estimated reliably. Liabilities are recognised at the amount that the Group anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation.

### 2.13 Financial Instruments

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

### 2.14 Leases

Leases where the Group retains a significant portion of the risks and benefits of ownership of the asset are classified as operating leases and rentals payable are charged in the Statement of Financial Activities on a straight-line basis over the lease term.

Assets leased out under operating leases are included in investment property. Rental income is recognised on a straight-line basis over the lease term.

### 2.15 Pensions

All staff who are eligible to remain within the NHS Pension Scheme do so. The NHS Pension Scheme is an unfunded, multi-employer defined benefit pension scheme. The Group, like similar employers in this sector, is unable to identify its share of the underlying assets and liabilities in the scheme and therefore, as required by FRS 102, accounts for this scheme as if it was a defined contribution scheme. Contributions are paid to the scheme by the Group and by employees.

Additionally, the Group operates a further defined contribution pension scheme for other staff.

The pension charge represents the amounts payable by the Group to the funds in respect of the year.

### 3. 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 Group makes estimates and assumptions concerning the future. The resulting accounting estimates and assumptions will, by definition, seldom equal the related actual results. In the application of the Group's accounting policies, the Trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

The estimates and assumptions which have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities are outlined below.

#### Useful Economic Lives of Tangible Assets

The annual depreciation charge is sensitive to any changes in the estimated useful life and residual values of tangible assets. The useful economic lives and residual value is assessed on an annual basis and are amended only when evidence shows a change in the estimated economic lives or residual life. Criteria used to assess the economic life and residual value includes technological advancement, economic utilisation and physical condition of the asset and future investments.

#### Dilapidations

The dilapidation provision is assessed on a lease-by-lease basis, calculated as a proportion of the annual rent in light of previous experience of actual dilapidation costs. The provision accrues over the term of the lease.

#### Legacies

Entitlement to legacies is assessed on a case by case basis taking into account factors such as whether probate has been granted and whether the amount receivable can be reliably estimated. Legacies are only accrued when the conditions set out in note 2.4 have been met.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 4. Donations and legacies

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Donations and fundraising	297,641	2,868,961	<b>3,166,602</b>	2,136,960
Legacies	739,896	1,373,207	<b>2,113,103</b>	1,427,338
Grants	-	-	-	5,335
Gift Aid	4,063	325,801	<b>329,864</b>	180,196
<b>Total 2025</b>	<b><u>1,041,600</u></b>	<b><u>4,567,969</u></b>	<b><u>5,609,569</u></b>	<b><u>3,749,829</u></b>
Total 2024	<u>469,841</u>	<u>3,279,988</u>	<u>3,749,829</u>	

#### 5. Income from charitable activities

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Education	-	222,891	<b>222,891</b>	204,323
NHS Devon ICB	-	2,262,439	<b>2,262,439</b>	1,416,804
DHSC capital grant	184,099	-	<b>184,099</b>	-
Coastal towns homecare services	-	231,220	<b>231,220</b>	342,375
<b>Total 2025</b>	<b><u>184,099</u></b>	<b><u>2,716,550</u></b>	<b><u>2,900,649</u></b>	<b><u>1,963,502</u></b>
Total 2024	<u>-</u>	<u>1,963,502</u>	<u>1,963,502</u>	

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 6. Income from other trading activities

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Hospiscare shops	-	3,035,177	<b>3,035,177</b>	2,697,698
Lottery	-	692,035	<b>692,035</b>	568,041
<b>Total 2025</b>	<b>-</b>	<b>3,727,212</b>	<b>3,727,212</b>	<b>3,265,739</b>
Total 2024	-	3,265,739	3,265,739	

#### 7. Investment income

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Rental income	8,010	2,100	<b>10,110</b>	9,650
Income on investments	50,831	114,065	<b>164,896</b>	193,381
Income on cash deposits	-	12,763	<b>12,763</b>	2,794
<b>Total 2025</b>	<b>58,841</b>	<b>128,928</b>	<b>187,769</b>	<b>205,825</b>
Total 2024	5,969	199,856	205,825	

#### 8. Other income

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Catering income	-	26,081	<b>26,081</b>	16,069
Renewable energy income	-	12,588	<b>12,588</b>	13,842
VAT refund	-	64,487	<b>64,487</b>	57,837
<b>Total 2025</b>	<b>-</b>	<b>103,156</b>	<b>103,156</b>	<b>87,748</b>
Total 2024	-	87,748	87,748	

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 9. Expenditure on raising funds

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Costs of raising voluntary income – direct costs	-	333,376	<b>333,376</b>	262,789
Costs of raising voluntary income – wages and salaries	-	589,187	<b>589,187</b>	580,044
Costs of raising voluntary income - NI	-	56,263	<b>56,263</b>	55,344
Costs of raising voluntary income – pension costs	-	37,778	<b>37,778</b>	39,541
Allocated centrally incurred fundraising and governance costs including depreciation	-	385,543	<b>385,543</b>	405,628
<b>Total 2025</b>	<b>-</b>	<b>1,402,147</b>	<b>1,402,147</b>	<b>1,343,346</b>
Total 2024	-	1,343,346	1,343,346	

#### Other trading expenses

	Restricted funds £	Unrestricted funds £	Total funds 2025 £	Total funds 2024 £
Hospiscare shops' expenditure	-	1,215,637	<b>1,215,637</b>	1,051,725
Lottery expenditure	-	157,170	<b>157,170</b>	198,813
Staff costs	-	1,663,874	<b>1,663,874</b>	1,459,678
Hospiscare shops' depreciation	-	17,297	<b>17,297</b>	714
<b>Total 2025</b>	<b>-</b>	<b>3,053,978</b>	<b>3,053,978</b>	<b>2,710,930</b>
Total 2024	-	2,710,930	2,710,930	

Staff costs comprise up to £1,577,375 (2024: £1,391,671) attributable to Hospiscare Shops' expenditure and £86,499 (2024: £68,007) attributable to lottery expenditure.

Costs of raising voluntary income £1,402,147 (2024: £1,343,346) and other trading expenses £3,053,978 (2024: £2,710,930) total £4,456,125 (2024: £4,054,276).

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 10. Analysis of expenditure by activities

	Activities undertaken directly £	Support costs £	Total funds 2025 £	Total funds 2024 £
Ward	1,760,885	1,069,799	<b>2,830,684</b>	2,662,918
Community nursing services	2,522,359	1,413,223	<b>3,935,582</b>	4,529,651
Rapid response	251,900	128,884	<b>380,784</b>	-
Supportive care services	62,698	33,045	<b>95,743</b>	109,768
Education	78,269	22,880	<b>101,149</b>	86,718
Other clinical	456,283	149,785	<b>606,068</b>	488,880
<b>Total 2025</b>	<b><u>5,132,394</u></b>	<b><u>2,817,616</u></b>	<b><u>7,950,010</u></b>	<b><u>7,877,935</u></b>
Total 2024	<u>5,201,025</u>	<u>2,676,910</u>	<u>7,877,935</u>	

Expenditure on charitable activities totalling £7,950,010 (2024: £7,877,935) includes £1,097,153 on restricted funds (2024: £1,723,981) and £6,852,857 (2024: £6,153,954) on unrestricted funds.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

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

##### Analysis of direct costs

	Ward £	Community nursing services £	Rapid response £	Supportive care services £	Education £	Other clinical £	Total funds 2025 £	Total funds 2024 £
Staff costs	1,673,565	2,419,127	233,682	49,739	69,334	415,190	4,860,637	4,700,864
Medical supplies	5,322	308	101	3	1	242	5,977	29,873
Bank staff	34,345	35,478	5,611	10,282	6,035	15,783	107,534	291,116
Travel expenses	8,204	38,287	2,114	929	2,287	8,709	60,530	53,690
Other direct costs	38,984	28,818	10,279	1,745	612	16,030	96,468	124,816
Administration	465	341	113	-	-	329	1,248	666
<b>Total 2025</b>	<b>1,760,885</b>	<b>2,522,359</b>	<b>251,900</b>	<b>62,698</b>	<b>78,269</b>	<b>456,283</b>	<b>5,132,394</b>	<b>5,201,025</b>
Total 2024	1,678,443	2,995,172	-	64,329	71,367	391,714	5,201,025	

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

10. Analysis of expenditure by activities (continued)

Analysis of support costs

	Ward £	Community nursing services £	Rapid response £	Supportive care services £	Education £	Other clinical £	Total funds 2025 £	Total funds 2024 £
Staff costs	578,120	763,706	69,947	17,559	12,365	80,939	1,522,636	1,558,876
Depreciation	65,151	86,066	7,883	1,979	1,393	9,121	171,593	165,000
Administration	408,003	538,979	49,365	12,392	8,726	57,122	1,074,587	914,090
Catering	12,432	16,423	1,504	378	266	1,740	32,743	28,102
Governance	6,093	8,049	185	737	130	863	16,057	10,842
<b>Total 2025</b>	<b>1,069,799</b>	<b>1,413,223</b>	<b>128,884</b>	<b>33,045</b>	<b>22,880</b>	<b>149,785</b>	<b>2,817,616</b>	<b>2,676,910</b>
Total 2024	984,475	1,534,479	-	45,439	15,351	97,166	2,676,910	

Support costs are allocated based on staff numbers.

The cost allocation methodology and departmental structure were reviewed and updated by the Senior Leadership Team in March 2025. As a result, certain cost departments have been redefined or newly introduced (e.g., 'Rapid response'), and percentage allocations have been revised. These changes have resulted in variances in year-on-year comparisons.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 11. Auditors' remuneration

	2025 £	2024 £
Fees payable to the Group's auditor for the audit of the Group's annual accounts	12,500	10,530
Fees payable to the Group's auditor in respect of: The audit of the annual accounts of the Group's subsidiary undertakings	3,750	3,240

#### 12. Trustees' Remuneration and Expenses

During the year, no Trustees received any remuneration or other benefits (2024: £nil).

During the year, no expenses were reimbursed to Trustees (2024: £76).

#### 13. Staff costs

The total staff costs and employee benefits for the reporting period are analysed as follows:

	Group 2025 £	Group 2024 £	Charity 2025 £	Charity 2024 £
Wages and salaries	7,541,184	7,579,199	7,541,184	7,579,199
Social security costs	700,399	663,579	700,399	663,579
Pension costs	696,370	681,997	696,370	681,997
	<u>8,937,953</u>	<u>8,924,775</u>	<u>8,937,953</u>	<u>8,924,775</u>

During 2024/25, Hospiscare made termination payments (including PILON) totalling £117,936 (2024: £53,549). This has been recognised within the 2024/25 annual accounts, with no provision being required in either the current or previous financial years. This includes compensation for loss of office of £30,000 (2024: £nil).

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 13. Staff costs (continued)

The average number of persons employed by the Group and Charity during the year was as follows:

	2025 No.	2024 No.
Doctors	7	9
Nurses	89	105
Health care assistants	20	22
Care managers	1	1
Volunteer co-ordinators	3	2
Fundraising staff	19	23
Administration	34	39
Trading	70	62
Lottery	2	2
Complementary therapies	5	5
Catering/cleaning	14	17
Education	4	3
	<u>268</u>	<u>290</u>

The average headcount in the Group and Charity expressed as full-time equivalents was:

	2025 No.	2024 No.
Employees	<u>200</u>	<u>208</u>

The number of employee benefits in the Group and Charity (excluding employer pension costs) that exceeded £60,000 was:

	2025 No.	2024 No.
In the band £60,001 - £70,000	2	3
In the band £70,001 - £80,000	1	3
In the band £80,001 - £90,000	1	3
In the band £90,001 - £100,000	3	-
In the band £100,001 - £110,000	-	2
In the band £110,001 - £120,000	1	-
In the band £120,001 - £130,000	1	-

Senior management team personnel of the parent Charity and Group comprise the Trustees and senior management team. The total employee benefits (including employer pension contributions and employer national insurance contributions) of the key management personnel were £597,918 (2024: £578,389).

Although Trustees are within the definition of key management personnel, none of the remuneration reported relates to them.

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

14. Tangible fixed assets

Group	Freehold property £	Long-term leasehold property £	Short-term leasehold property £	Plant and machinery £	Motor vehicles £	Fixtures and fittings £	Total £
<b>Cost or valuation</b>							
At 1 April 2024	2,384,878	3,900,162	9,725	514,477	31,050	1,175,047	8,015,339
Additions	13,735	315,169	-	113,445	-	12,786	455,135
Transfer	(680,869)	-	-	-	-	-	(680,869)
<b>At 31 March 2025</b>	<b>1,717,744</b>	<b>4,215,331</b>	<b>9,725</b>	<b>627,922</b>	<b>31,050</b>	<b>1,187,833</b>	<b>7,789,605</b>
<b>Depreciation</b>							
At 1 April 2024	425,728	1,613,608	730	360,499	31,050	957,653	3,389,268
Charge for the year	63,014	85,799	145	54,422	-	78,738	282,118
Transfer	(199,617)	-	-	-	-	-	(199,617)
<b>At 31 March 2025</b>	<b>289,125</b>	<b>1,699,407</b>	<b>875</b>	<b>414,921</b>	<b>31,050</b>	<b>1,036,391</b>	<b>3,471,769</b>
<b>Net book value</b>							
<b>At 31 March 2025</b>	<b>1,428,619</b>	<b>2,515,924</b>	<b>8,850</b>	<b>213,001</b>	<b>-</b>	<b>151,442</b>	<b>4,317,836</b>
At 31 March 2024	1,959,150	2,286,554	8,995	153,978	-	217,394	4,626,071

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

14. Tangible fixed assets (continued)

Charity	Freehold property £	Long-term leasehold property £	Short-term leasehold property £	Plant and machinery £	Motor vehicles £	Fixtures and fittings £	Total £
<b>Cost or valuation</b>							
At 1 April 2024	2,384,878	3,900,162	9,190	515,646	31,050	1,082,558	7,923,484
Additions	13,735	315,169	-	113,445	-	12,786	455,135
Transfer	(680,869)	-	-	-	-	-	(680,869)
<b>At 31 March 2025</b>	<b>1,717,744</b>	<b>4,215,331</b>	<b>9,190</b>	<b>629,091</b>	<b>31,050</b>	<b>1,095,344</b>	<b>7,697,750</b>
<b>Depreciation</b>							
At 1 April 2024	425,728	1,613,608	195	360,499	31,050	866,333	3,297,413
Charge for the year	63,014	85,799	145	54,422	-	78,738	282,118
Transfer	(199,617)	-	-	-	-	-	(199,617)
<b>At 31 March 2025</b>	<b>289,125</b>	<b>1,699,407</b>	<b>340</b>	<b>414,921</b>	<b>31,050</b>	<b>945,071</b>	<b>3,379,914</b>
<b>Net book value</b>							
<b>At 31 March 2025</b>	<b>1,428,619</b>	<b>2,515,924</b>	<b>8,850</b>	<b>214,170</b>	<b>-</b>	<b>150,273</b>	<b>4,317,836</b>
At 31 March 2024	1,959,150	2,286,554	8,995	155,147	-	216,225	4,626,071

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 15. Investment property

Group and charity	Freehold investment property £
<b>Valuation</b>	
At 1 April 2024	370,000
Transfer from freehold property	481,252
<b>At 31 March 2025</b>	<b><u>851,252</u></b>

Investments are based on Trustees' valuation based on market data and previous professional valuations.

#### 16. Investments

Group	Listed investments
<b>Cost or valuation</b>	
At 1 April 2024	5,231,678
Additions	1,289,562
Acquired on acquisition - BS&D Hospiscare	4,952,867
Disposals	(2,757,294)
Revaluations	15,801
<b>At 31 March 2025</b>	<b><u>8,732,614</u></b>
<b>Net book value</b>	
Fixed asset investments	8,732,614
<b>At 31 March 2025</b>	<b><u>8,732,614</u></b>
At 31 March 2024	<u>5,231,678</u>

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 16. Investments (continued)

Charity	Investments in subsidiary companies	Listed investments	Total
Cost or valuation	£	£	£
At 1 April 2024	90,003	5,231,678	<b>5,321,681</b>
Additions	-	1,289,562	<b>1,289,562</b>
Acquired on acquisition - BS&D Hospiscare	-	4,952,867	<b>4,952,867</b>
Disposals	-	(2,757,294)	<b>(2,757,294)</b>
Revaluations	-	15,801	<b>15,801</b>
<b>At 31 March 2025</b>	<b>90,003</b>	<b>8,732,614</b>	<b>8,822,617</b>
<b>Net book value</b>			
Fixed asset investments	90,003	8,732,614	<b>8,822,617</b>
<b>At 31 March 2025</b>	<b>90,003</b>	<b>8,732,614</b>	<b>8,822,617</b>
At 31 March 2024	90,003	5,231,678	5,321,681

#### Principal Subsidiaries

The following were subsidiary undertakings of the Charity:

Names	Company number	Included in consolidation	Holding
Hospiscare (Shops) Limited	02201730	Yes	100%
Hospiscare Exmouth and Lypstone	02927336	Yes	100%
Budleigh Salterton and District Hospiscare (BS&D Hospiscare)	01162329	Yes	100%

The financial results of the subsidiaries for the year were:

Names	Income	Expenditure	Profit for the year	Net assets
	£	£	£	£
Hospiscare (Shops) Limited	182,370	175,146	7,224	62,145

Hospiscare Exmouth and Lypstone merged with Hospiscare in 2019 and all operations, assets and liabilities of that charity were transferred to Hospiscare. Accordingly, after the date of the merger, there has been no income or expenditure recognised by Hospiscare Exmouth and Lypstone and its net assets at the year-end were £nil.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 16. Investments (continued)

BS&D Hospiscare merged with Hospiscare on 1 November 2024. Hospiscare obtained beneficial control of BS&D Hospiscare on the above date, and all operations, assets and liabilities of that charity were transferred to Hospiscare for £nil proceeds. The negative goodwill arising on the acquisition has been released to the Statement of Financial Activities in accordance with the Charities SORP and is disclosed as Other income – BS&D Hospiscare. Accordingly, after the date of the merger, there has been no income or expenditure recognised by BS&D Hospiscare and its net assets at the year-end were £nil.

Fair value of BS&D Hospiscare at acquisition date	£ <b>4,894,314</b>
Proceeds	-
Negative goodwill released to the Statement of Financial Activities as Other income – BS&D Hospiscare	<b>4,894,314</b>

#### 17. Debtors

	2025 £	Group 2024 £	2025 £	Charity 2024 £
Trade debtors	<b>167,032</b>	1,020,530	<b>167,032</b>	1,020,530
Amounts owed by group undertakings	-	-	<b>108,386</b>	-
Other debtors	<b>77,568</b>	97,831	<b>77,568</b>	97,825
Prepayments and accrued income	<b>322,589</b>	202,591	<b>322,589</b>	202,591
	<b><u>567,189</u></b>	<u>1,320,952</u>	<b><u>675,575</u></b>	<u>1,320,946</u>

#### 18. Creditors: amounts falling due within one year

	2025 £	Group 2024 £	2025 £	Charity 2024 £
Trade creditors	<b>336,942</b>	260,540	<b>336,942</b>	260,540
Social security and other taxes	<b>154,045</b>	161,386	<b>154,045</b>	161,386
Amounts owed to group undertakings	-	-	-	41,492
Other creditors	<b>13,872</b>	8,914	<b>13,872</b>	8,915
Accruals and deferred income	<b>646,869</b>	1,125,325	<b>646,869</b>	1,125,325
	<b><u>1,151,728</u></b>	<u>1,556,165</u>	<b><u>1,151,728</u></b>	<u>1,597,658</u>

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 18. Creditors: amounts falling due within one year

	2025 £	Group 2024 £	2025 £	Charity 2024 £
<b>Deferred income</b>				
Deferred income at 1 April 2024	531,312	9,790	531,312	9,790
Resources deferred during the year	15,757	521,522	15,757	521,522
Amounts released from previous periods	(480,000)	-	(480,000)	-
<b>As at 31 March 2025</b>	<u>67,069</u>	<u>531,312</u>	<u>67,069</u>	<u>531,312</u>

#### 19. Provisions

##### Group and charity

	Dilapidations £
At 1 April 2024	197,583
Released in the year	(848)
<b>As at 31 March 2025</b>	<u>196,735</u>

##### Dilapidations

The Group dilapidations provision is based on the future expected repair costs required to restore the leased buildings to their fair condition at the end of their respective lease terms.

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

20. Consolidated statement of funds

Consolidated statement of funds – current year

	Balance at 1 April 2024 £	Income £	Expenditure £	Transfers in/out £	Gains/ (losses) £	Balance at 31 March 2025 £
<b>Unrestricted funds</b>						
<b>Designated funds</b>						
Capital	4,250,219	271,036	(282,118)	184,099	-	4,423,236
Stability & working capital	4,255,925	-	-	-	-	4,255,925
	<u>8,506,144</u>	<u>271,036</u>	<u>(282,118)</u>	<u>184,099</u>	<u>-</u>	<u>8,679,161</u>
<b>General funds</b>						
General reserves	2,268,448	10,972,779	(11,026,864)	197,000	104,618	2,515,981
Total unrestricted funds	<u>10,774,592</u>	<u>11,243,815</u>	<u>(11,308,982)</u>	<u>381,099</u>	<u>104,618</u>	<u>11,195,142</u>

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

20. Consolidated statement of funds (continued)

	Balance at 1 April 2024 £	Income £	Expenditure £	Transfers in/out £	Gains/ (losses) £	Balance at 31 March 2025 £
<b>Restricted funds</b>						
Medical research fund	61,597	4,440	(14,734)	-	-	51,303
Hospiscare Exmouth and Lympstone	385,115	214,914	(600,029)	-	-	-
Fundraising - Pine Lodge	-	115	(115)	-	-	-
Fundraising - Searle House	-	73,052	-	-	-	73,052
Fundraising - Kings House	-	1,714	(1,714)	-	-	-
Fundraising	23,737	1,275	-	-	-	25,012
Hospiscare@Home	413,232	5,694	(203,281)	(209,500)	-	6,145
CNS Mid Devon	-	1,734	(1,734)	-	-	-
CNS East Devon	12,500	57,293	-	-	-	69,793
Admiral nursing	3,450	24,588	-	-	-	28,038
Hearts and bags	3,000	-	-	-	-	3,000
Wellbeing hub	-	12,400	(105)	-	-	12,295
Family room	2,221	-	(2,221)	-	-	-
BS&D Hospiscare	-	5,509,167	(269,459)	-	(88,817)	5,150,891
Rapid response	-	62,500	-	12,500	-	75,000
Ashworth patient fund	-	10,465	(3,761)	-	-	6,704
Bereavement	-	8,480	-	-	-	8,480
Transition grant	-	6,924	-	-	-	6,924
DHSC capital grant	-	184,099	-	(184,099)	-	-
<b>Total restricted funds</b>	<b>904,852</b>	<b>6,178,854</b>	<b>(1,097,153)</b>	<b>(381,099)</b>	<b>(88,817)</b>	<b>5,516,637</b>
<b>Total funds</b>	<b>11,679,444</b>	<b>17,422,669</b>	<b>(12,406,135)</b>	<b>-</b>	<b>15,801</b>	<b>16,711,779</b>

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 20. Consolidated statement of funds (continued)

##### Designated funds

###### Capital

This fund represents the net book value of the tangible fixed assets employed by the group, excluding those held in restricted funds.

###### Stability & working capital

This fund is intended to provide a buffer for working capital requirements and against unexpected shortfalls in fundraising and legacy income and falls in the value of investments.

###### General reserves

This fund represents the free reserves of the Group and are available for general use.

##### Restricted Funds

###### Medical research fund

This is a general fund operated by the medical team. At their discretion it may be used for capital purchasing, professional fees, books, educational costs etc.

###### Hospiscare Exmouth and Lympstone

This fund represents the net assets remaining following the transfer of assets from Exmouth and Lympstone Hospiscare in 2019 and includes income and gains from the underlying assets. The fund will be used to meet the costs of palliative care for persons terminally ill in the Exmouth and Lympstone area and to support those patients and their families.

###### Fundraising

This is used to manage small amounts where the restriction requested by the supporter does not fit into other restricted fund categories.

###### Hospiscare@ Home

This fund is to support the Group's plans to roll-out the service in the Mid and West Devon area.

###### CNS Mid and East Devon

This provides funding to enable services to be delivered in patients homes across Exeter, East, and Mid Devon.

###### BS&D Hospiscare

This is the fund held following the merger of BS&D Hospiscare to provide a continuing service to this community.

###### Rapid response

This fund is delivering a service across our full geographical area, the service provides at-home care for patients who are experiencing acute symptoms or whose health is rapidly deteriorating.

###### DHSC capital grant

This funding is a capital grant provided by the government and distributed by Hospice UK and is designed to help hospices improve their physical environment, improve efficiency by investing in digital technology and other objectives.

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

20. Consolidated statement of funds (continued)

Consolidated statement of funds – prior year

	Balance at 1 April 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (losses) £	Balance at 31 March 2024 £
<b>Unrestricted funds</b>						
<b>Designated funds</b>						
Capital	4,184,175	327,253	(261,209)	-	-	4,250,219
Stability & working capital	5,003,342	-	(1,807,957)	1,060,540	-	4,255,925
Hospiscare@Home	1,060,540	-	-	(1,060,540)	-	-
	<u>10,248,057</u>	<u>327,253</u>	<u>(2,069,166)</u>	<u>-</u>	<u>-</u>	<u>8,506,144</u>
<b>General funds</b>						
General reserves	1,805,655	8,469,580	(8,139,064)	12,982	119,295	2,268,448
Total unrestricted funds	<u>12,053,712</u>	<u>8,796,833</u>	<u>(10,208,230)</u>	<u>12,982</u>	<u>119,295</u>	<u>10,774,592</u>
<b>Endowment funds</b>						
Endowment funds – all funds	<u>20,000</u>	<u>-</u>	<u>-</u>	<u>(20,000)</u>	<u>-</u>	<u>-</u>

Hospiscare

Notes to the Financial Statements (continued)  
For the year ended 31 March 2025

20. Consolidated statement of funds (continued)

	Balance at 1 April 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (losses) £	Balance at 31 March 2024 £
<b>Restricted funds</b>						
Medical research fund	62,441	8,263	(9,107)	-	-	61,597
Dementia project	-	10,000	(10,000)	-	-	-
Early referral research fund	47,940	-	(47,940)	-	-	-
Hospiscare Exmouth and Lymptstone	1,211,737	35,484	(862,106)	-	-	385,115
Other restricted funds	6,521	-	(2,204)	(4,317)	-	-
Fundraising - Pine Lodge	-	2,332	(2,332)	-	-	-
Fundraising - Searle House	-	79,314	(79,314)	-	-	-
Fundraising - Kings House	-	36,555	(36,555)	-	-	-
Fundraising	87,348	31,512	(101,123)	6,000	-	23,737
Hospiscare@Home	730,018	170,814	(487,600)	-	-	413,232
CNS Mid Devon	-	2,738	(2,738)	-	-	-
CNS East Devon	-	75,813	(63,313)	-	-	12,500
CNS Exeter	-	1,035	(6,370)	5,335	-	-
Admiral nursing	-	3,450	-	-	-	3,450
Hearts and bags	-	3,000	-	-	-	3,000
Wellbeing hub	-	10,500	(10,500)	-	-	-
Family room	-	5,000	(2,779)	-	-	2,221
<b>Total restricted funds</b>	<b>2,146,005</b>	<b>475,810</b>	<b>(1,723,981)</b>	<b>7,018</b>	<b>-</b>	<b>904,852</b>
<b>Total funds</b>	<b>14,219,717</b>	<b>9,272,643</b>	<b>(11,932,211)</b>	<b>-</b>	<b>119,295</b>	<b>11,679,444</b>

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 21. Analysis of net assets between funds

Analysis of net assets between funds – current year

	Restricted funds £	Unrestricted funds £	Total funds 2025 £
Tangible fixed assets	-	4,317,836	<b>4,317,836</b>
Fixed asset investments	4,649,323	4,083,291	<b>8,732,614</b>
Investment property	-	851,252	<b>851,252</b>
Current assets	867,314	3,291,226	<b>4,158,540</b>
Creditors: amounts due within one year	-	(1,151,728)	<b>(1,151,728)</b>
Provisions for liabilities and charges	-	(196,735)	<b>(196,735)</b>
	<b><u>5,516,637</u></b>	<b><u>11,195,142</u></b>	<b><u>16,711,779</u></b>

Analysis of net assets between funds – prior year

	Restricted funds £	Unrestricted funds £	Total funds 2024 £
Tangible fixed assets	367,738	4,258,333	<b>4,626,071</b>
Fixed asset investments	-	5,231,678	<b>5,231,678</b>
Investment property	370,000	-	<b>370,000</b>
Current assets	167,114	3,038,329	<b>3,205,443</b>
Creditors: amounts due within one year	-	(1,556,165)	<b>(1,556,165)</b>
Provisions for liabilities and charges	-	(197,583)	<b>(197,583)</b>
	<b><u>904,852</u></b>	<b><u>10,774,592</u></b>	<b><u>11,679,444</u></b>

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

	2025 Group £	2024 Group £
Net income for the year (as per Statement of Financial Activities)	<b>5,032,335</b>	(2,540,273)
Adjustments for:		
Depreciation charges	<b>282,118</b>	261,823
Release of negative goodwill – BS&D Hospiscare	<b>(4,894,314)</b>	-
Losses/(gains) on investments	<b>(15,801)</b>	(119,295)
Dividends, interests and rents from investments	<b>(187,769)</b>	(205,825)
(Increase)/decrease in stocks	<b>(22,542)</b>	(33,673)
(Increase)/decrease in debtors	<b>757,897</b>	(923,788)
(Decrease)/increase in creditors	<b>(545,915)</b>	637,376
Net cash generated by operating activities	<b><u>406,009</u></b>	<b><u>(2,923,655)</u></b>

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 23. Analysis of cash and cash equivalents

	<b>2025</b> <b>Group</b> £	2024 Group £
Cash at bank and in hand	<b>3,525,828</b>	1,841,510
	<u><b>3,525,828</b></u>	<u>1,841,510</u>

#### 24. Analysis of changes in net funds

	2024 Group £	Cash flows Group £	<b>2025</b> <b>Group</b> £
Cash at bank and in hand	<u>1,841,510</u>	<u>1,684,318</u>	<u><b>3,525,828</b></u>

#### 25. Contingent assets

Legacies are not recognised until the Group has entitlement to the funds, the amount can be quantified and there is probability of receipt. The estimated value of legacies, not included as income in these accounts and which have been notified but not received as at 31 March 2025, was £1,037,463 (2024: £1,259,176).

#### 26. Pension commitments

The Group pays contributions to a defined contributions pension scheme. The assets of the scheme are held separately from those of the Group in an independently administered fund. The pension cost charge represents contributions payable by the Group to the fund and amounted to £263,987 (2024: £262,915). Contributions totalling £35,161 (2024: £51,864) were payable to the fund at the balance sheet date and are included in creditors.

Additionally, the Group pays contributions to the NHS Pension Scheme. Although the scheme provides defined benefits to members, it is an unfunded multi-employer scheme, with no ongoing liability for the Group beyond the level of employer contributions specified by the scheme. Accordingly, it is accounted for as if it was a defined contribution scheme. The pension cost charge represents contributions payable by the Group to the fund and amounted to £432,384 (2024: £426,333). Contributions totalling £57,199 (2024: £133,752) were payable to the fund at the balance sheet date and are included in creditors.

## Hospiscare

### Notes to the Financial Statements (continued) For the year ended 31 March 2025

#### 27. Operating lease commitments

Lessee	2025 Group £	2024 Group £	2025 Charity £	2024 Charity £
Not later than 1 year	411,125	301,903	411,125	301,903
Later than 1 year but not later than 5 years	622,034	413,919	622,034	413,919
Later than 5 years	126,621	-	126,621	-
	<u>1,159,780</u>	<u>715,822</u>	<u>1,159,780</u>	<u>715,822</u>

#### 28. Related party transactions

The Charity is taking advantage of the exemption allowed under FRS102 from the requirement of Section 33 "Related Party Disclosures" not to disclose related party transactions with members of the Group. There are no other related party transactions other than those disclosed in note 13. There were no amounts outstanding from any Trustee at the year end.

