

Registered number: 01525658  
Charity number: 510824

**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

**COUNCIL MEMBERS' REPORT AND FINANCIAL STATEMENTS**

**FOR THE YEAR ENDED 31 MARCH 2023**

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND  
ADVISERS  
FOR THE YEAR ENDED 31 MARCH 2023**

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**Council Members**

Mr R Priestman, Chair  
Mrs L Jones, Vice chair  
Mr F M Gibbon  
Mrs J Regan, Treasurer  
Mr C Shotton  
Mr J F Ainslie  
Mrs A Barber  
Mr S T Chacko  
Mrs K Martin (resigned 31 July 2023)  
Mr P Jones-King (resigned 29 September 2022)  
Dr J Druce  
Mr P L H Bowes (appointed 27 July 2023)  
Dr A L Brown (appointed 30 March 2023)

**Company Registered Number**

01525658

**Charity Registered Number**

510824

**Registered Office**

Alice House, Wells Avenue, Hartlepool, TS24 9DA

**Chief Executive Officer**

Ms T Woodall retired September 2022

Co- chief executive officers (appointed September 2022):

Sandra Britten Chief Executive (Operational)

Nicola Haggan Chief Executive (Non Operational)

**Independent Auditors**

Waltons Business Advisers Limited, Maritime House, Harbour Walk, The Marina, Hartlepool, TS24 0UX

**Bankers**

Lloyds TSB, 132 York Road, Hartlepool, TS26 9DD

**Solicitors**

Tilly Bailey & Irvine LLP, York Chambers, York Road, Hartlepool, TS26 9DP

**Director of Information Governance (Chief Executive Operational)**

Ms S Britten

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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND  
ADVISERS (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Director of Finance**

Mrs K Burrell

**Senior Manager Clinical Services**

Ms K Gibson

**Senior Manager Corporate Services (Chief Executive Non Operational)**

Ms N Haggan

**Senior Manager Fundraising**

Ms J Hildreth

**Senior Manager Retail**

Ms K Witherley

**Senior Manager Therapeutic Support Services**

Ms J Grocott

**Senior Manager Business & Communications**

Mr G Hildreth

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**COUNCIL MEMBERS' REPORT**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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The Council Members, who are also Non-Executive Directors of the Charity for the purposes of the Companies Act, submit their Annual Report together with the audited Financial Statements of The Hartlepool Hospice Limited (the charity) for the year ended 31 March 2023. The Council Members confirm that the Annual Report and Financial Statements of the Charity comply with the current statutory requirements, the requirements of the Charity and the Charity's governing document and the provisions of the Statement of Recommended Practice (SORP) applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS102) (effective 1 January 2019).

Since the Charity qualifies as small under section 382 of the Companies Act 2006, the Strategic report required of medium and large companies under the Companies Act 2006 (Strategic Report and Directors' Report) Regulations 2013 has been omitted.

### **Structure, governance and management**

#### **Governing document**

The Charity is a company limited by guarantee and incorporated in England and Wales. It is governed by its Memorandum and Articles of Association adopted on 31 October 1980 and last amended on 26 September 2013.

#### **Governing body**

The Council is responsible for the overall governance of the Charity. Council Members are either elected or co-opted and there must be a minimum of three Council Members, there is no maximum number of Council Members. The board will be made up of not less than 2 lay Council Members (meaning not appointed to act as a professional advisor) and such number of professional Council Members as the Council Members consider appropriate. Each Council Member shall retire from office at the fourth annual general meeting following the date of his appointment. Any professional director who so retires is eligible for re-election by the members or the directors as appropriate.

The Hartlepool Hospice Limited is trading as Alice House Hospice.

The Council aim to maintain a balanced skills and experience base by identifying skills shortages when an opening exists for a new member.

Effective partnership and clarity of differentiation between governance and management roles continues to contribute significantly to our success. Apart from the AGM, Council meetings were bi-monthly. At Council meetings the Council Members review performance against agreed strategy and financial performance against agreed budgets. New Council Members receive an induction pack containing everything they need to know about the Charity and its work for effective and informed decision making. The Council Members take full ownership of the Charity's philosophy, five year rolling strategy and annual income and expenditure budgets.

The Council delegates the exercise of certain powers in connection with the financial control of the Charity as set out below. This is controlled by requiring regular reporting back to the Council, so that all decisions made under delegated powers can be ratified by the full Council in due course.

In setting the pay and remuneration of staff (including the Senior Management Team) the Council Members have regard to local pay conditions for similar roles in similar organisations in the North East region.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Structure, governance and management (continued)**

**Chief Executive Operational & Chief Executive Non-Operational**

The joint leadership roles of Chief Executive Operational and Chief Executive Non-Operational are responsible for the day to day management of the Charity's affairs and for implementing the strategy as agreed by the Council within the boundaries of the budget and various policies and procedures agreed by the Council. The Chief Executive Operational and Chief Executive Non-Operational are assisted by the Council Members.

**Corporate Governance**

Processes are in place to ensure that performance throughout the organisation is measured and monitored and all employees are subject to performance management and achievement of competencies. Where employees do not perform to expected standards support is provided through individual action plans.

Corporate governance is assured through a myriad of meetings and reporting mechanisms and evaluated against the Charity's strategy. Internal audits are reported on a bi-monthly basis to Council Members through the Chief Executive and Senior Management Team reports.

**Finance & Risk Management Sub Committee**

The Finance & Risk Management Sub Committee comprises Council Members who are independent of the management and free of any relationship that in the opinion of the Council would interfere with the exercise of independent judgement as members of the Sub Committee. The Sub Committee has six bi-monthly meetings per year. It is responsible for the setting of annual income and expenditure budgets and the monitoring of such, including quarterly year-end forecasts. The Sub Committee ensures proper procedures are in place to manage cash resources prudently, and to maximise income from liquid resources whilst maintaining sufficient funds to meet daily cash requirements. The Sub Committee also advises the Council on the appropriate level of free reserves and of any significant change needed in investment strategy.

**Risk Management**

The Council have a formal risk management process to assess business risks and implement risk management strategies. This involves identifying the types of risks the Charity faces, prioritising them in terms of potential impact and likelihood of occurrence, and identifying means of mitigating the risks. The Charity maintains a Risk Register, which is regularly reviewed and updated to reflect identified risks. As part of this process the Council Members review the adequacy of the Charity's current internal controls and the costs of operating particular controls relative to the benefits obtained. Procedures have been established for reporting failings immediately to appropriate levels of management.

The significant risks to which the Charity is vulnerable, and methods in which they are controlled, are:

Loss of income	Regular monitoring of financial performance and setting and reviewing budgets.
Disaster	Health, Safety & Environment Manager review; regular risk management meetings (fire/loss of power etc).
Staff crisis	Use of bank staff – relocate patients to other providers.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
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**Objectives and activities**

**Charity Objects**

In setting objectives and planning for activities, the Council Members have given due consideration to general guidance published by the Charity Commission relating to public benefit, including the guidance 'Public benefit: running a charity (PB2)'.

The Charity's Objects, as set out in the Articles of Association, are to promote the relief of sickness by such charitable means as the charity shall from time to time think fit. The Hospice was established in 1980 as a local charity (Hartlepool Hospice Ltd) delivering specialist palliative care to individuals affected by life limiting illnesses within the local communities of Hartlepool, Stockton-on-Tees and East Durham. The Hospice ensures that people affected by a life limiting illness have the care, comfort and support they need and provides services that add value to life which make a difference to patients and their families.

In furtherance of these Objects:

- It is the Hospice's Vision to ensure that every person, to the last moment of their life has the right to dignity, respect, support and care.
- It is the Hospice's Mission to provide services that add value to life and make a difference to patients and their families.
- The Hospice upholds the following Values:
  - o We value each person as an individual.
  - o The patient is at the heart of all of our activities.
  - o We believe in the importance of celebrating life and relationships.
  - o We will demonstrate integrity and professionalism at all times.
  - o We will be modern and progressive and seek out new opportunities to develop our services.
  - o We will strive to be the best we can and encourage staff and volunteers to actively seek opportunities for personal growth and development.
  - o We will exercise responsible financial management to ensure long term sustainability.
- The Hospice subscribes to the following Patients' Charter and will:
  - o Respect your dignity, privacy and freedom of choice.
  - o Involve you and your family when possible in the decision making of your care, adopting an open and honest approach. Supporting those decisions to fulfil your wishes wherever possible.
  - o Provide a Multi-Disciplinary Team with the appropriate skills to meet your ongoing needs.
  - o Work collaboratively with other service providers and professionals involved in your care to ensure you receive the help you need when you need it.
  - o Support you to live as well as you can for as long as you can.
  - o Provide a holistic and individual approach when delivering care and support to you and your family.
  - o Provide support not only to you but to those that are important to you as you approach the end of life and during their bereavement.
  - o Encourage your involvement in service development by making suggestions as to how we can improve on the services we provide.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
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**Objectives and activities (continued)**

**Strategic Objectives**

As the future of Hospice care evolves in the constantly changing health environment, we have developed positive and effective working relationships that ensure cross organisational integration and representation through different working groups, to identify pressures within the healthcare system and to generate innovative solutions to patient service problems. The Hospice has therefore identified the following strategic goals within the Five Year Strategy (2020-2025), which is refreshed annually:

- We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity.
- We will ensure our organisation is governed and managed in accordance with best practice.
- We will seek out opportunities to support our communities in all of their interactions with us.

The strategy provides a Patients, Trustees and Staff Charter which confirms our intentions and provides a commitment to collective responsibility and organisational cohesion.

The following departmental sub strategies have also been developed, with their objectives aligning to the strategic goals of the Hospice's Five Year Strategy 2020-2025:

- Clinical
- Therapeutic Support Services
- Information Governance & Technology
- Human Resources
- Communications
- Fundraising
- Retail
- Finance

**Activities**

The Hospice is an independent charity that is committed to offering high quality, holistic, non-judgmental care which is free to all at the point of delivery regardless of race, religion or belief, sex, sexual orientation, gender reassignment, disability, pregnancy and maternity. The Hospice currently offers a comprehensive range of services from our purpose-built Hospice in Wells Avenue, Hartlepool, which responds to local need. The Hospice provides an 18 bedded unit for Inpatient Services. Day Hospice and Therapeutic Support Services are delivered from the Hospice's Holistic Wellbeing Centre which is set within the Hospice grounds. The Hospice's clinical services are Consultant led and supported by a Multi-Disciplinary Team of professionals who provide patients with holistic and individualised care.

The Hospice delivered the following specialist palliative care services during 2022/2023:

- Ten inpatient beds providing short-term specialist palliative care for symptom control and end of life care.
- Six residential beds providing long-term nursing care for palliative patients.
- Two inpatient beds providing emergency end of life care for patients from North Tees & Hartlepool NHS Foundation Trust.
- Day Hospice.
- Holistic Wellbeing Services.
- Adult Bereavement Counselling Services
- Children's Bereavement Counselling Services
- 24 Hour Helpline

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
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**Achievements and performance**

**Main achievements of the Charity**

It has been a challenging few years with the impact of Brexit, the Coronavirus Pandemic and the Russia-Ukraine war continuing to affect the UK's economy. Whereas the Coronavirus Pandemic brought with it new challenges in the way that the Hospice adapted and continued to deliver its services safely, which required a responsive and innovative approach at a time of rapidly changing guidance and legislation, 2022/2023 has presented significant financial challenges as rising inflation and the cost of living crisis has resulted in increased operating costs.

Yet through these difficult times the warmth, generosity and dedication of our supporters, staff and volunteers has ensured that we have continued to provide care and support to the communities of Hartlepool, Tees Valley and East Durham. As we learn to live with Covid-19, in 2022/2023 we were delighted to see an increase in the number of supporters attending our fundraising events and visiting our charity shops.

**Strategic Goals**

We will ensure all of our services are of a high quality and are delivered safely with compassion and dignity. The Hospice is registered with the Care Quality Commission to carry out the following regulated activities at Alice House, Wells Avenue, Hartlepool, TS24 9DA for adults aged 18 years and over:

- Treatment of Disease, Disorder or Injury

Alice House Hospice is registered with the following conditions:

- To accommodate up to a maximum of 18 patients overnight.
- To provide a service for people over the age of 18 years old.
- The registered provider's regulated activity is managed by a Registered Manager.
- The provider location where regulated activity can be carried out is: Alice House, Wells Avenue, Hartlepool, TS24 9DA.

We have held regular Provider Engagement meetings (quarterly) with our CQC Inspector through Microsoft Teams and have contacted them for advice when necessary.

There have been no formal complaints made in the previous 12 months.

The Care Quality Commission has not taken any enforcement actions against Alice House Hospice during 2022/2023. There have been no special reviews or investigations carried out by the Care Quality Commission during this reporting period.

The Hospice's last inspection by the Care Quality Commission was unannounced and carried out on 23 March 2015. The formal report and rating from the inspection was received on 20 August 2015 and the Hospice received an overall rating of Good.

The Hospice participated in a virtual interview with the Care Quality Commission on 27 June 2022 as part of their monitoring approach, with a focus on safety, access and leadership. The Hospice received notification via the Monitoring Summary Record that the Care Quality Commission had reviewed the information and data made available to them and no further regulatory activity was indicated at the time.

We have continued working in close collaboration with the Hospices North East & North Cumbria Collaborative and Hospice UK's Innovation and Clinical ECHO Networks to ensure shared learning and best practice.

We will ensure our organisation is governed and managed in accordance with best practice.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Achievements and performance (continued)**

The Board receive updates from all members of the Senior Management Team for each meeting to ensure transparency and service developments are always approved by the Board.

All of the Board have fulfilled their mandatory training requirements.

During 2022/2023 the Board completed a full review of the Hospice's governance processes to ensure that they remained 'fit for purpose' and were equipped to lead the Hospice within a framework of prudent and effective controls, enabling risk to be assessed and managed. Trustees adopted the Charity Governance Code for Larger Charities (Charity Governance Code Steering Group, refreshed Code published December 2020) as the audit tool. One of the outcomes from the review was for Trustees to each individually support a member of the Senior Management Team with the review, management and performance of their departmental sub strategies.

We will seek out opportunities to support our communities in all of their interactions with us.

Collaboration has been high on our agenda and we have continued to work with the North Tees & Hartlepool Education Alliance on educating care homes on palliative and end of life care in order to reduce hospital admissions and to help more patients to achieve their preferred place of care.

The Hospice also continues to be an integral partner of the Hospices North East & North Cumbria Collaborative, who take a partnership approach to improving palliative and end of life care for all patients, regardless of demography or diagnosis.

The Hospice is a member of Hartlepool Economic & Business Forum and as members and regular attendees of the Forum, we engage with our local authority, business community and other key stakeholders, to share information and identify opportunities for collaboration and partnership working.

Post-COVID, we strived to re-establish ourselves in the region's flourishing business community and this has borne fruit, with the recruitment of two new Hospice Patrons this year and a notable upturn in networking opportunities, corporate engagement and business referrals.

**Activities**

During 2022/2023, the Hospice prioritised the following three domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- **Implementing an Electronic Recording System for Clinical Incidents (Patient Safety)**  
Patient safety audits in the previous year identified that the manual reporting system for clinical incidents was cumbersome and slow, with duplication of effort and cross checks required to ensure accuracy of information being recorded for multiple reporting requirements. A subsequent process mapping exercise improved the timing for the completion of the clinical incident reporting forms, however it remained a manual process for recording of clinical incidents. During 2022/2023 a clinical incident database has been designed, developed and implemented, which has greatly improved both efficiency and accuracy with all information being recorded centrally for reporting purposes.
- **SystemOne Hospital Palliative Care Module (Clinical Effectiveness)**  
The Hospice gained remote access to the Hospital Palliative Care Module of SystemOne in 2018 and in 2021 gained access to the Integrated Clinical Environment (ICE). All Hospice referrals and admissions are entered into SystemOne, with a limited number of trained clinicians trained to view patient information. In order to move towards fully utilising SystemOne as the Hospice's electronic patient record system, during 2022/2023 all clinical staff completed training on the Hospital Palliative Care Module with the aim of fully transferring to electronic records during 2023/2024.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Achievements and performance (continued)**

- **Rapid Response (Patient Experience)**  
The Hospice received funding from North Tees & Hartlepool NHS Foundation Trust in 2022/2023 to develop a pilot Rapid Response Out-of-Hours Admission Service for patients on the Care for the Dying Patient Document, with the Hospice gradually moving towards 24 hour access and admission in order to reduce Accident & Emergency and Acute bed admissions. The pilot started on 01 October 2022 and has been extended to include patients on the Care for the Dying Patient Document from all wards within the University Hospital of North Tees. The service will be extended to include emergency admissions from the community in late 2023. The Hospice has extended admissions from Monday-Friday to 7 days per week and will be increasing the admission times during 2023/2024 from 09:00-17:00 to 08:00-20:00.

As a result of the economic climate and cost of living crisis in 2022/2023, the Hospice had to make the difficult decision to close the following enhanced services in order to maintain essential core services:

- **Community Bereavement Services**  
The Hospice provides bereavement services to patients and their families accessing Hospice services. Up until December 2022, the Hospice also provided bereavement support to bereaved adults who had been referred via external services from the local communities of Hartlepool, Stockton and East Durham. This was a strongly established service since 2007 and was in high demand, with the Hospice receiving on average over 60 referrals a month for this free service. Without funding the Hospice had to make the difficult decision to close the community bereavement service from December 2022. The Hospice continues to provide children's bereavement services to external referrals but we are only able to do this through two year funding from a local business for 2022/2023 and 2023/2024.
- **Long Term Care Unit**  
Due to an increasing funding deficit, the Hospice made the difficult decision to close its 6 Continuing Healthcare funded beds on the Long Term Care Unit in March 2023. The Hospice was receiving approximately £275,000 per year from Continuing Healthcare (CHC) but with operating costs of just over £500,000 the deficit could not be sustained from Hospice funds. Closure of these beds will have directly impacted GP, A&E and hospital admissions and placed further strain and pressure on an already struggling system within the NHS. It is anticipated that future patients who would have accessed these beds will now be placed in nursing homes but will spend a significant amount of time accessing NHS services due to complexity and high medical needs. The Long Term Care Unit supported both community and hospital discharge and was part of the discharge pathway for other hospices in the Tees Valley patch, who will also be impacted by the closure potentially causing patients to remain in hospice beds for longer periods until suitable nursing home beds can be identified.
- **Virtual Reality Studio**  
In August 2022 the Hospice's Board of Trustees made the decision to close NEVRlabs, which was set-up by the Hospice as a fundraising initiative. The project was a response to traditional fundraising methods which were severely compromised during the COVID-19 lockdown periods and was intended as a new and sustainable way of creating revenue, whilst introducing a new audience to the Hospice. However, despite regular custom and a number of successful partnerships with schools and businesses, NEVRlabs was unable to attract the level of income needed to support the Hospice. The ongoing impact of COVID-19, cost of living crisis and the end of the Government's Kickstart Scheme in September 2022, which provided funding for many of NEVRlabs staff, resulted in the closure of NEVRlabs on 14 August 2022. Like many organisations in Hartlepool and beyond, the Hospice must invest carefully and focus on its priorities. As the economy continued to head towards further uncertainty, Trustees reviewed their commitments and felt that it was the most financially responsible thing to do in order to help protect the future of the Hospice. The difficult decision was therefore made to close NEVRlabs and move all virtual reality services back to the Hospice, thereby returning the project to its original focus of offering entertainment and wellbeing support to Hospice patients. Equipment from NEVRlabs which could not be used within the Hospice was sold, with all funds being directed towards patient care.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
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**Achievements and performance (continued)**

**Factors relevant to achieve objectives**

It is acknowledged within the NHS Tees Valley Place Integrated Care Board's Adult Palliative and End of Life Care Strategy that there is historic disparity in the way that service providers are funded, which is reflective of the historic Clinical Commissioning Group footprints. During 2022/2023 meetings have taken place both in Parliament and with Tees Valley MPs, the Minister of State in the Department of Health & Social Care and the Chief Executive of the North East & North Cumbria ICB to discuss the commissioning challenges in the Tees Valley region and to challenge when equitable funding for palliative and end of life care will be implemented in accordance with the Statutory Guidance for Integrated Care Boards on Palliative & End of Life Care (July 2022).

Alice House Hospice has experienced significant pressure over the last 3 years due to the inability of another local hospice to provide care and the consequential demand on our beds. Through the partnership working of Tees Valley Hospices, we have been able to secure additional temporary funding for increasing our specialist beds to meet demand. We will continue to monitor capacity and demand for future commissioning discussions.

The Hospice has been working in collaboration with the Tees Valley Task & Finish Groups (including Contracting & Finance, Service Delivery and Education & Training) established by NHS Tees Valley Place Integrated Care Board (ICB) to make recommendations for the key themes highlighted in their Developing an Adult Palliative & End of Life Care Strategy. The aim of the strategy is to commission and deliver high quality, cost effective and resilient systems of care across Tees Valley so that patients approaching the end of life and their families have a positive, high quality and personalised experience wherever they wish to be cared for.

Tracy Woodall had been in post as Chief Executive since 17 November 2008 and due to ill health made the difficult decision to retire in September 2022. Trustees appointed a joint leadership role, with Sandra Britten as Chief Executive Operational and Nicola Haggan as Chief Executive Non-Operational. Both incumbents have a long-term knowledge of the Hospice (since September 2000 and April 2002 respectively), its workings, its threats and failures, but also a realistic approach to solutions and opportunities. Trustees felt that they were also familiar trusted faces to restore and maintain employee morale and bring stability at a time of economic uncertainty. The joint Chief Executive roles have brought a more stable leadership structure and long-term cost savings as both also continue to carry out the duties of their original substantive posts (Deputy Chief Executive/Director of Information Governance and Deputy Chief Executive/Senior Manager Corporate Services), removing the need for the post of Deputy Chief Executive.

The Chief Executive (Operational) has direct responsibility for the effective delivery of the following services and support services:

- Clinical Services
- Finance
- Facilities/Health & Safety
- Information Governance
- Administration
- Housekeeping

The Chief Executive (Non-Operational) will have direct responsibility for the effective delivery of the following services and support services:

- Human Resources
- Therapeutic Support Services
- Fundraising, Trusts & Legacies
- Retail
- Lottery
- Communications & Corporate Business Partnerships
- Catering

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
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**Achievements and performance (continued)**

**Financial review**

We continue to run a highly professional organisation with a stable financial position which reflects ethical fundraising and cash holding policies decided by our Council Members.

The credit rating during the reporting period has remained at level A.

**Reserves policy**

Free reserves available for use by the Charity are deemed to be those that are readily realisable, less funds whose uses are restricted or else designated for particular purposes.

As a matter of policy, the Charity aims to build up and hold a maximum of two months running costs as reserves. This objective is secondary to the achievement of the Charity's strategic objectives as stated in the current strategy, so that reserves will not be built or maintained at the expense of planned or current patient care.

Two months running costs would be approximately £588k. With free reserves (after removing long term liabilities) of £376k the Charity is behind target. The Charity expects to build the reserves over the next year to support the Charity as it recovers income streams post Covid.

Aspirational objectives for reserves: The Charity aims to become financially independent of Clinical Commissioning Group contracts as a security measure against diminishing contract values and the uncertainty of the level of tariff funding arising from the End of Life & Palliative Care Review. Nevertheless, it will still seek appropriate contracts to advance patient services. The achievement of this will be through the continuation of regular monitoring of financial management.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Financial review and results for the year**

The Charity has made a deficit before depreciation of £22,916 but after depreciation a deficit of £220,617 has been declared. The impact of the Covid-19 pandemic has still been significant along with the rising cost of inflation. Donations income increased by £69k but the Charity received support in the form of additional Hospice funding (£191k) last year that ensured the Hospice was able to continue to provide its services throughout the pandemic, this has now ended.

The detailed results are as follows:

Gross income increased marginally by 0.7% to £3.8m, while expenditure on charitable activities increased by 8% to £3.09m. After taking depreciation into account total resources expended of £4.07m (2022: £3.96m) resulted in a net deficit for the year of £221k (2022: £140k).

Income received in furtherance of charitable objects totalled £1.7m. Expenditure incurred on furthering charitable objects was £3.09m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

Fundraising activities, donations, legacies and Kickstart funding generated a surplus of unrestricted income of £962k to be used to pursue charitable activities.

£322k of grants were received to support the work of the Hospice, this included £158k of Kickstart monies.

The lottery generated a surplus of £135k (2022: £155k) and Trading Activities generated a surplus of £159k (2022: £73k).

£10k of unrestricted income was spent on the governance costs of the organisation.

Total reserves stand at £3m (2022: £3.2m), including £426k of restricted reserves.

At 31 March 2023 there is a deficit on unrestricted free reserves of £123k. Excluding the long term bank loans, a loan which was used to purchase the freehold and develop the Wellbeing Centre and the Coronavirus Business Interruption Loan, and the pension deficit, there is a surplus of £376k.

**Investment policy and performance**

The Memorandum of Association authorises the Council Members to invest surplus funds as may be thought fit. The Council Members' policy is to hold any surplus cash on deposit to obtain the most attractive interest rate available. The Council Members' have directed that funds will be used in the charitable activities of the company instead.

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
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### **Fundraising**

The Hospice's Fundraising Sub Strategy 2020-2025 has the following objectives:

- Develop strong partnerships with organisations and individuals.
- Be proactive, research and implement opportunities to embrace the current climate.
- Develop sustainable corporate relationships.
- Ensure our approach to fundraising is respectful and non-aggressive and compliant with the Fundraising Regulator.
- Promote the Hospice in a positive and professional manner.

Our shops remain very busy and continue to perform well against budget. However, the loss of many volunteers following COVID-19 continues to be a challenge in keeping our shops open six days a week. The cost of living crisis has impacted the communities which we serve but this has resulted in increased demand for our charity shops. The current economic climate also affects our general Fundraising, with the emergence of more local charities to meet the growing needs of the community, who are all chasing what is understood to be a smaller pool of available donations.

We have successfully responded to the public's post-COVID appetite for leisure and socialising, having hosted the most successful and well attended versions of a number of established events, which are forecast to continue this in upward trend. A proactive post-Lockdown approach to community engagement has led to a number of fruitful new contacts and income generating opportunities. Our essential focus on reducing expenditure has also led to a leaner Fundraising outlay, meaning that the majority of events are staged at little to no financial risk, which in turn has seen a return to 'no-frills' or traditional fundraising methods, to which the public have responded positively. This is evident in our supermarket tombola stalls, bucket collections and presence at the recent Tall Ships Festival.

Our increased catchment area has enabled us to 'broaden the net' and provided additional opportunities for our Fundraisers to reach donors who were previously beyond our perceived boundaries.

Alice House Hospice is a subscribed member of the Fundraising Regulator and as such adheres to the Code of Fundraising Practice. We review each Code on a rolling programme to ensure that we are compliant in all areas. An action plan is in progress for any areas where improvements are to be made to ensure full compliance with the Code and is managed by the Senior Manager Fundraising.

All Staff and Volunteers within Income Generation have access to the Code of Fundraising and the Institute of Fundraising 'Treating Donors Fairly' policy.

### **Plans for the Future**

Alice House has worked closely with North Tees & Hartlepool NHS Foundation Trust and has been commissioned for a second year in 2023/2024 to provide the following services:

- Rapid Response Out-of-Hours Admissions Service, with the Hospice moving towards 24 hour access and admission in order to reduce Accident & Emergency and Acute bed admissions. The service will be extended to include emergency admissions from the community in late 2023.
- NHS Staff Wellbeing Services, with referrals from the NHS Trust's Occupational Health to the Hospice's Holistic Wellbeing Support, including holistic therapies, restorative sessions, pain management and menopause support.

The Hospice has prioritised the following three domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- Falls Prevention (Patient Safety)  
Palliative patients are at greater risk of injury when they fall in comparison to older people who do not

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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have a palliative condition, as they can have falls risks specific to palliative care such as symptomatic decline, opioid use and brain metastases. From April 2022 to March 2023, Alice House Hospice recorded 31 falls by 19 patients. Patients currently receive a falls assessment within 6 hours of admission and for those identified as being at risk of falling, all receive a care plan/prescription of care within 24 hours of admission. If a patient has a history of falls prior to admission preventative measures are put in place to ensure their safety. In the event of a fall, a falls analysis is conducted, care plans are updated, risk assessments are conducted if required and a medical assessment is carried out. Other professionals are involved as appropriate, i.e. Physiotherapist and Occupational Therapist. Patients are also encouraged to use the nurse call system for assistance and regular staff checks are conducted. Alice House Hospice respect that many patients like to remain independent and to maintain their dignity, for example attempting to go to the toilet by themselves or do not appreciate/accept that their physical condition has deteriorated as much as it has and may psychologically still perceive themselves as before their illness, (sudden onset of symptoms). Although we recognise that falls among older people are common, we also recognise that some are avoidable and we aim to lessen the risk where possible through a range of measures including additional training for staff in falls prevention, use of FallSafe care bundle, visual aids, identification of medications which contribute to falls.

- **Implementation of the Patient Safety Incident Response Framework (Clinical Effectiveness)**  
The Patient Safety Incident Response Framework (PSIRF) sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. As Alice House Hospice are commissioned to provide services, PSIRF is a contractual requirement and is mandatory for providers of NHS funded care. The Hospice will be implementing the Patient Safety Incident Response Framework when it is introduced in Autumn 2023.
- **Increasing Inpatient Volunteers to Support Agitated Patients at Night (Patient Experience)**  
Many of our inpatients can feel anxious or frightened, especially at night and fear going to sleep as they do not feel ready not to wake up again. We have found that some of our patients will stay in their chair overnight due to fear of never getting out of bed again. Anxiety can be heightened when the patient is alone and their visitors have left for the day. Visitors can spend the night at Alice House Hospice but many have other commitments such as other family members and work commitments or even just find it difficult. Although the Inpatient Unit is well staffed, there are still many duties to be carried out and patients' needs to be met, which can restrict staff from spending long periods of time giving an individual patient reassurance and comfort. Patients with conditions such as dementia can often be more confused in the evening and during the night and may experience sundowning, which is a set of symptoms or behaviours that include difficulty sleeping, anxiety, agitation, hallucinations, pacing and disorientation. We have identified that we may not require more qualified members of staff to give people that one to one support. We will recruit and train volunteers to evolve the services offered to our patients and transform and enrich the current offer of support by offering reassurance that everything is alright and that someone is with them. This may just be to sit quietly with the person or to find out if they need anything, such as a drink. It may be to walk with a person so they do not feel trapped and are better able to orientate to their surroundings. Some patients are unable or reluctant to use the nurse call system, volunteers will not be required to give medication but will be able to use the nurse call system for patients who are unable or reluctant to do so.

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Going concern**

The financial position of the Charity is under constant review and closely monitored by Trustees, who will take action as needed to preserve the financial stability of the Hospice. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Trustees have an expectation that the Charity has adequate resources to continue delivering services for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing financial statements.

**Employees**

Employees are fully involved with the development and delivery of the strategy and it is integral to all daily activities and used to support their appraisals.

Regular staff updates and a summary of the key points from each Senior Management Team meeting are communicated to all employees to ensure that they are aware of the activities of the Charity.

**Volunteers**

The survival and growth of the Charity could not be achieved without the unstinting support of the volunteer workforce, who enable the fulfilment of the Hospice's Vision by complimenting the work of the patient care staff, supporting fundraising efforts and serving as Council Members. The volunteers bring skills, knowledge and experience which greatly enhances the professional profile of the Charity. This in turn enables the Charity to reach further into the community, not only by caring for those with life limiting illnesses but by offering opportunities for the development of skills and expertise which individuals can take with them in their own personal development, back into the community, thus enhancing the profile of the Charity and encouraging more individuals to offer their service on a voluntary basis.

**Council Members' liability**

The Council Members guarantee to contribute an amount not exceeding £1 to the assets of the Charity in the event of winding up.

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**COUNCIL MEMBERS' REPORT (CONTINUED)**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**Statement of Council Members' responsibilities**

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

Company law requires the Council Members to prepare financial statements for each financial year. Under company law, the Council Members 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 Charity and of its incoming resources and application of resources, including its income and expenditure, for that period. In preparing these financial statements, the Council Members are required to:

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

The Council Members are responsible for keeping adequate accounting records that are sufficient to show and explain the Charity's transactions and disclose with reasonable accuracy at any time the financial position of the Charity 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 Charity and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

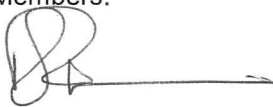
**Disclosure of information to auditors**

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

- so far as that Council Member is aware, there is no relevant audit information of which the charity's auditors are unaware, and
- that Council Member has taken all the steps that ought to have been taken as a Council Member in order to be aware of any relevant audit information and to establish that the charity's auditors are aware of that information.

**Auditors**

The auditors, Waltons Business Advisers Limited, have indicated their willingness to continue in office. The designated Council Members will propose a motion reappointing the auditors at a meeting of the Council Members.



**Mr R Priestman**  
(Chair of Trustees)



**Mrs J Regan**  
(Treasurer)

23 November 2023

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A  
ALICE HOUSE HOSPICE**

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**UNQUALIFIED OPINION**

We have audited the financial statements of The Hartlepool Hospice Limited T/A Alice House Hospice (the 'charity') for the year ended 31 March 2023 which comprise the Statement of financial activities, the Balance sheet, the Statement of cash flows and the related notes, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 'The Financial Reporting Standard applicable in the UK and Republic of Ireland' (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2023 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

**BASIS FOR OPINION**

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

**CONCLUSIONS RELATING TO GOING CONCERN**

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

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

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A  
ALICE HOUSE HOSPICE (CONTINUED)**

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**OTHER INFORMATION**

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

We have nothing to report in this regard.

**OPINION ON OTHER MATTERS PRESCRIBED BY THE COMPANIES ACT 2006**

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

- the information given in the Council Members' Report for the financial year for which the financial statements are prepared is consistent with the financial statements.
- the Council Members' Report has been prepared in accordance with applicable legal requirements.

**MATTERS ON WHICH WE ARE REQUIRED TO REPORT BY EXCEPTION**

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

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

- 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 Council Members' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit; or
- the Council Members were not entitled to prepare the financial statements in accordance with the small companies regime and take advantage of the small companies' exemptions in preparing the Council Members' Report and from the requirement to prepare a Strategic Report.

**RESPONSIBILITIES OF COUNCIL MEMBERS**

As explained more fully in the Council Members' responsibilities statement, the Council Members (who are also the directors of the charitable company for the purposes of company law) are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the Council Members 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 Council Members are responsible for assessing the charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A  
ALICE HOUSE HOSPICE (CONTINUED)**

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and using the going concern basis of accounting unless the Council Members either intend to liquidate the charitable company or to cease operations, or have no realistic alternative but to do so.

**AUDITORS' 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 Auditors' 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:

In identifying and assessing risks of material misstatement in respect of irregularities, including fraud, the audit engagement team:

- Obtained an understanding of the nature of the sector, including the legal and regularity framework that the charitable company operates in and how they are complying with the legal and regularity framework
- Inquired of management and those charged with governance about their own identification and assessment of the risks of irregularities including any known, actual, suspected or alleged instances of fraud,
- Discussed matters about non-compliance with laws and regulations and how fraud might occur including assessment of how and where the financial statements might be susceptible to fraud.

As a result of these procedures we considered the most significant laws and regulations which have a direct impact on the financial statements are FRS 102, Charities SORP (FRS 102), Companies Act 2006 and the charitable company's governing document. We performed audit procedures to detect non-compliance which may have a material impact on the financial statements which included reviewing the financial statements including the council members report and remaining alert to new or unusual transactions which may not be in accordance with the governing documents.

The audit engagement team identified the risk of management override of controls and income recognition as the areas where the financial statements were most susceptible to material misstatement due to fraud. We designed audit procedures to respond to the risk, recognising that 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 concealment by, for example, forgery or intentional misrepresentations, or through collusion.

Audit procedures performed included, but were not limited to:

- testing manual journal entries and other adjustments
- evaluating the business rationale in relation to significant or unusual transactions and transactions entered into outside the normal course of business
- challenging judgments and estimates
- reviewing income transactions around the year end to look for potential "window dressing".

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 Auditors' Report.

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
(A company limited by guarantee)

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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A  
ALICE HOUSE HOSPICE (CONTINUED)**

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**USE OF OUR REPORT**

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



**Heather O'Driscoll FCA (Senior statutory auditor)**

for and on behalf of

**Waltons Business Advisers Limited**

Chartered Accountants

Statutory Auditors

Maritime House

Harbour Walk

The Marina

Hartlepool

TS24 0UX

Date: 28 November 2023

**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
(A company limited by guarantee)

**STATEMENT OF FINANCIAL ACTIVITIES (INCORPORATING INCOME AND EXPENDITURE ACCOUNT)  
FOR THE YEAR ENDED 31 MARCH 2023**

	Note	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
<b>INCOME FROM:</b>					
Donations and legacies	4	297,394	736,923	1,034,317	1,402,823
Charitable activities	5	977,489	729,623	1,707,112	1,438,504
Other trading activities	6	-	1,104,804	1,104,804	978,726
<b>TOTAL INCOME</b>		<b>1,274,883</b>	<b>2,571,350</b>	<b>3,846,233</b>	<b>3,820,053</b>
<b>EXPENDITURE ON:</b>					
Raising funds	8	100,999	871,191	972,190	1,095,397
Charitable activities	9	1,187,468	1,907,856	3,095,324	2,864,958
<b>TOTAL EXPENDITURE</b>		<b>1,288,467</b>	<b>2,779,047</b>	<b>4,067,514</b>	<b>3,960,355</b>
<b>NET MOVEMENT IN FUNDS BEFORE OTHER RECOGNISED GAINS/(LOSSES)</b>					
		(13,584)	(207,697)	(221,281)	(140,302)
<b>OTHER RECOGNISED GAINS/(LOSSES):</b>					
Other gains	25	-	664	664	4,655
<b>NET MOVEMENT IN FUNDS</b>		<b>(13,584)</b>	<b>(207,033)</b>	<b>(220,617)</b>	<b>(135,647)</b>
<b>RECONCILIATION OF FUNDS:</b>					
Total funds brought forward		439,434	2,785,913	3,225,347	3,360,994
Net movement in funds		(13,584)	(207,033)	(220,617)	(135,647)
<b>TOTAL FUNDS CARRIED FORWARD</b>		<b>425,850</b>	<b>2,578,880</b>	<b>3,004,730</b>	<b>3,225,347</b>

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

The notes on pages 25 to 50 form part of these financial statements.

**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**  
**REGISTERED NUMBER: 01525658**

**BALANCE SHEET**  
**AS AT 31 MARCH 2023**

	Note	2023 £	2022 £
<b>FIXED ASSETS</b>			
Tangible assets	14	3,128,077	3,309,093
Investments	15	100	100
		<u>3,128,177</u>	<u>3,309,193</u>
<b>CURRENT ASSETS</b>			
Debtors	16	198,470	500,537
Cash at bank and in hand	22	522,648	493,379
		<u>721,118</u>	<u>993,916</u>
Creditors: amounts falling due within one year	17	(345,096)	(458,344)
		<u>376,022</u>	<u>535,572</u>
<b>NET CURRENT ASSETS</b>		<b>376,022</b>	<b>535,572</b>
<b>TOTAL ASSETS LESS CURRENT LIABILITIES</b>		<b>3,504,199</b>	<b>3,844,765</b>
Creditors: amounts falling due after more than one year	18	(498,300)	(617,585)
<b>NET ASSETS EXCLUDING PENSION LIABILITY</b>		<b>3,005,899</b>	<b>3,227,180</b>
Defined benefit pension scheme liability	25	(1,169)	(1,833)
<b>TOTAL NET ASSETS</b>		<b>3,004,730</b>	<b>3,225,347</b>
<b>CHARITY FUNDS</b>			
Restricted funds	19	425,850	439,434
Unrestricted funds	19	2,578,880	2,785,913
<b>TOTAL FUNDS</b>		<b>3,004,730</b>	<b>3,225,347</b>

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**  
**REGISTERED NUMBER: 01525658**

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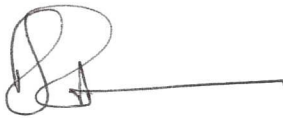
**BALANCE SHEET (CONTINUED)**  
**AS AT 31 MARCH 2023**

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

The financial statements have been prepared in accordance with the provisions applicable to entities subject to the small companies regime.

The financial statements were approved and authorised for issue by the Council Members on  
23 November 2023 and signed on their behalf by:



**Mr R Priestman**  
(Chair of Trustees)



**Mrs J Regan**  
(Treasurer)

The notes on pages 25 to 50 form part of these financial statements.

**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
(A company limited by guarantee)

**STATEMENT OF CASH FLOWS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

	Note	2023 £	2022 £
<b>CASH FLOWS FROM OPERATING ACTIVITIES</b>			
Net cash used in operating activities	21	<b>176,350</b>	66,897
<b>CASH FLOWS FROM INVESTING ACTIVITIES</b>			
Proceeds from the sale of tangible fixed assets		<b>25,353</b>	-
Purchase of tangible fixed assets	14	<b>(48,679)</b>	(125,795)
<b>NET CASH USED IN INVESTING ACTIVITIES</b>		<b>(23,326)</b>	(125,795)
<b>CASH FLOWS FROM FINANCING ACTIVITIES</b>			
Repayments of borrowing		<b>(113,287)</b>	(81,922)
Repayments of finance leases		<b>(9,804)</b>	(9,803)
Gain on pension deficit		<b>(664)</b>	-
<b>NET CASH USED IN FINANCING ACTIVITIES</b>		<b>(123,755)</b>	(91,725)
<b>CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR</b>		<b>29,269</b>	(150,623)
Cash and cash equivalents at the beginning of the year		<b>493,379</b>	644,002
<b>CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR</b>	22	<b>522,648</b>	493,379

The notes on pages 25 to 50 form part of these financial statements

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**1. GENERAL INFORMATION**

The Charity is a private company incorporated in England and Wales and limited by guarantee. The members of the company are the Council Members named on page 2. 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.

The registered address is:

Alice House  
Wells Avenue  
Hartlepool  
TS24 9DA

**2. ACCOUNTING POLICIES**

**2.1 Basis of preparation of financial statements**

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

The Hartlepool Hospice Limited T/A Alice House Hospice meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy.

**2.2 Fund accounting**

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

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

**2.3 Going concern**

The financial position of the Charity is under constant review and closely monitored by Trustees, who will take action as needed to preserve the financial stability of the Hospice. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Trustees have an expectation that the Charity has adequate resources to continue delivering services for the foreseeable future. For this reason they continue to adopt the going concern basis in preparing financial statements

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**THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE**  
**(A company limited by guarantee)**

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**2. ACCOUNTING POLICIES (CONTINUED)**

**2.4 Income**

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

For legacies, entitlement is taken as the earlier of the date on which either: the Charity is aware that probate has been granted, the estate has been finalised and notification has been made by the executor(s) to the Trust 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 Charity has been notified of the executor's intention to make a distribution. Where legacies have been notified to the Charity, or the Charity is aware of the granting of probate, and the criteria for income recognition have not been met, then the legacy is treated as a contingent asset and disclosed if material.

Gifts donated for resale are included as income when they are sold.

The Council Members acknowledge that they are assets of the Charity as soon as received but due to the fact that a very large number of small value items are received the time and cost of valuing donated goods at receipt would outweigh any benefit to the users of the financial statements of having them so valued.

Where goods are donated under the Gift Aid scheme the Charity is not entitled to the income until the goods are sold and the donor has confirmed that they are gifting the proceeds. In this case the income is included as a donation rather than as a sale.

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

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**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.

Costs of generating voluntary income are those incurred in seeking voluntary contributions and do not include the costs of disseminating information in support of the charitable activities.

Fundraising costs are the direct costs of operating the charity shops and other trading activities. Support costs are those costs incurred directly in support of expenditure on the objects of the charity and include central costs. Governance costs are those incurred in connection with administration of the Charity and compliance with constitutional and statutory requirements.

**2.6 Tangible fixed assets and depreciation**

Tangible fixed assets costing £1,500 or more are capitalised and recognised when future economic benefits are probable and the cost or value of the asset can be measured reliably.

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

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

Depreciation is provided on the following bases:

Freehold property	- 20/50 years straight line
Plant and machinery	- 7 years straight line
Motor vehicles	- 7 years straight line
Fixtures and fittings	- 7 years straight line
Computer equipment	- 3/5 years straight line
Other fixed assets	- 3 years straight line

**2.7 Redundancy/termination payments**

Redundancy and termination payments are recognised when an approved formal plan is in place and the employees which it affects have been made aware of the situation.

**2.8 Investments**

Investments represent the shares held in a subsidiary company which are stated at cost.

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**2. ACCOUNTING POLICIES (CONTINUED)**

**2.9 Debtors**

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

**2.10 Cash at bank and in hand**

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

**2.11 Liabilities**

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 Charity anticipates it will pay to settle the debt or the amount it has received as advanced payments for the goods or services it must provide.

Provisions are measured at the best estimate of the amounts required to settle the obligation. Where the effect of the time value of money is material, the provision is based on the present value of those amounts, discounted at the pre-tax discount rate that reflects the risks specific to the liability. The unwinding of the discount is recognised within interest payable and similar charges.

**2.12 Finance leases and hire purchase**

Assets obtained under hire purchase contracts and finance leases are capitalised as tangible fixed assets. Assets acquired by finance lease are depreciated over the shorter of the lease term and their useful lives. Assets acquired by hire purchase are depreciated over their useful lives. Finance leases are those where substantially all of the benefits and risks of ownership are assumed by the Charity. Obligations under such agreements are included in creditors, net of the finance charge allocated to future periods. The finance element of the rental payment is charged to the Statement of Financial Activities so as to produce a constant periodic rate of charge on the net obligation outstanding in each period.

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**FOR THE YEAR ENDED 31 MARCH 2023**

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**2. ACCOUNTING POLICIES (CONTINUED)**

**2.13 Pensions**

The Charity contributes to a defined contribution pension scheme and the pension charge represents the amounts payable by the Charity to the fund in respect of the year.

**Defined benefit schemes**

The Charity makes contributions to the National Health Service Pension Scheme and The Pension Scheme Trust.

The Charity is however unable to identify its share of the underlying assets and liabilities in the schemes and has accounted for contributions as if they were defined contributions schemes as follows:

The amount charged to the statement of financial activities in respect of pension costs is the contributions payable in the year. Differences between contributions payable in the year and contributions actually paid are shown as either accruals or prepayments in the balance sheet.

Amounts included in expenses are allocated between activities on the basis of staff time in line with other support costs.

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

**3. CRITICAL ACCOUNTING ESTIMATES AND AREAS OF JUDGMENT**

During the year an exercise has been conducted to review the debtors ledger which has historically contained a number of old balances.

These were reviewed and the NHS (as the relevant party) contacted about these debts in order to repay money if necessary. The NHS has replied that the ledgers for these patients are closed and no balance remains.

The Council Members have therefore taken the decision to write off these old balances. In total this has resulted in an increase to debtors of £118,455.

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**4. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES**

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	<i>Total funds 2022 £</i>
Coronavirus job retention scheme funding	-	-	-	33,293
Donations	-	643,082	643,082	573,841
Legacies	-	62,396	62,396	166,508
Grants	297,394	25,057	322,451	600,031
Other Covid-19 income	-	-	-	23,850
Similar incoming resources	-	6,388	6,388	5,300
<b>Total 2023</b>	<b>297,394</b>	<b>736,923</b>	<b>1,034,317</b>	<b>1,402,823</b>
<i>Total 2022</i>	<i>516,709</i>	<i>886,114</i>	<i>1,402,823</i>	

In 2023 there is £157,944 (2022: £442,659) included in grant income which was received from the Kickstart scheme.

**5. INCOME FROM CHARITABLE ACTIVITIES**

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £	<i>Total funds 2022 £</i>
In Patient Unit	924,542	508,496	1,433,038	922,648
Medical	52,947	-	52,947	86,762
Multi Disciplinary Team	-	-	-	34,482
Bereavement	-	40,153	40,153	142,329
National Health Service England	-	-	-	191,141
Insurance income	-	180,974	180,974	61,142
<b>Total 2023</b>	<b>977,489</b>	<b>729,623</b>	<b>1,707,112</b>	<b>1,438,504</b>
<i>Total 2022</i>	<i>933,064</i>	<i>505,440</i>	<i>1,438,504</i>	

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**6. FUNDRAISING INCOME**

	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>	<i>Total funds 2022 £</i>
Lottery	226,847	226,847	243,567
Fundraising events	147,527	147,527	119,026
Kitchen income	22,879	22,879	21,010
Shop income	672,654	672,654	569,537
Catering and merchandising income	13,471	13,471	12,086
VR centre	21,426	21,426	13,500
<b>Total 2023</b>	<b>1,104,804</b>	<b>1,104,804</b>	978,726
<i>Total 2022</i>	<i>978,726</i>	<i>978,726</i>	

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**7. TRADING ACTIVITIES**

	<b>Restricted funds 2023 £</b>	<b>Unrestricted funds 2023 £</b>	<b>Total funds 2023 £</b>	<i>Total funds 2022 £</i>
<b>Charity trading income</b>				
Charity shop takings	-	672,654	672,654	569,537
Catering and merchandising income	-	13,471	13,471	12,086
VR centre	-	21,426	21,426	13,500
Sub total trading income	-	707,551	707,551	595,123
Grant income (included in note 4)	100,999	-	100,999	291,269
Total income	100,999	707,551	808,550	886,392
<b>Fundraising trading expenses</b>				
Charity shop costs	-	138,675	138,675	133,905
VR centre costs	-	57,619	57,619	77,605
Catering and merchandising costs	-	3,166	3,166	4,106
Salaries	100,999	348,806	449,805	597,491
Total expenditure	100,999	548,266	649,265	813,107
Net income from trading activities	-	159,285	159,285	73,285
Total 2022	-	73,285	73,285	

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**NOTES TO THE FINANCIAL STATEMENTS**  
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**8. COST OF RAISING FUNDS**

	Unrestricted funds 2023 £	Restricted funds 2023 £	Total funds 2023 £	Total funds 2022 £
Fundraising expenditure	48,486	-	48,486	36,473
Lottery costs	91,835	-	91,835	89,010
Support costs allocated	5,974	-	5,974	8,187
Wages and salaries	136,522	-	136,522	108,512
Depreciation	40,108	-	40,108	40,108
Fundraising trading expenses (note 7)	548,266	100,999	649,265	813,107
<b>Total 2023</b>	<b>871,191</b>	<b>100,999</b>	<b>972,190</b>	<b>1,095,397</b>
<i>Total 2022</i>	<i>804,128</i>	<i>291,269</i>	<i>1,095,397</i>	

**9. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES**

**Summary by fund type**

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total 2023 £	Total 2022 £
In Patient Unit	1,134,521	1,208,369	2,342,890	2,115,334
Medical	52,947	228,676	281,623	249,828
Multi Disciplinary Team	-	237,381	237,381	271,448
Bereavement & Therapeutic Services	-	233,430	233,430	228,348
<b>Total 2023</b>	<b>1,187,468</b>	<b>1,907,856</b>	<b>3,095,324</b>	<b>2,864,958</b>
<i>Total 2022</i>	<i>1,153,366</i>	<i>1,711,592</i>	<i>2,864,958</i>	

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**NOTES TO THE FINANCIAL STATEMENTS**  
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**10. ANALYSIS OF EXPENDITURE BY ACTIVITIES**

	<b>Activities undertaken directly 2023 £</b>	<b>Support costs 2023 £</b>	<b>Total funds 2023 £</b>	<i>Total funds 2022 £</i>
In Patient Unit	1,185,093	1,157,797	2,342,890	2,115,334
Medical	258,350	23,273	281,623	249,828
Multi Disciplinary Team	217,370	20,011	237,381	271,448
Bereavement & Therapeutic Services	214,818	18,612	233,430	228,348
<b>Total 2023</b>	<b>1,875,631</b>	<b>1,219,693</b>	<b>3,095,324</b>	<b>2,864,958</b>
<i>Total 2022</i>	<i>1,688,615</i>	<i>1,176,343</i>	<i>2,864,958</i>	

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**Analysis of direct costs**

	In Patient Unit 2023 £	Medical 2023 £	Multi Disciplinary Team 2023 £	Bereavement & Therapeutic Services 2023 £	Total funds 2023 £	Total funds 2022 £
Staff costs	1,111,264	131,056	205,186	201,082	1,648,588	1,504,803
Consumables	30,733	-	-	1,427	32,160	22,631
Drugs	-	85,105	-	-	85,105	63,140
Equipment and maintenance	24,404	-	-	-	24,404	21,749
Medical and professional fees	17,523	42,189	12,184	7,351	79,247	66,902
Travel	400	-	-	858	1,258	694
Office costs and sundries	769	-	-	655	1,424	5,762
Facilities	-	-	-	3,445	3,445	2,934
<b>Total 2023</b>	<b>1,185,093</b>	<b>258,350</b>	<b>217,370</b>	<b>214,818</b>	<b>1,875,631</b>	<b>1,688,615</b>
<b>Total 2022</b>	<b>999,549</b>	<b>227,997</b>	<b>251,398</b>	<b>209,671</b>	<b>1,688,615</b>	

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	Analysis of Support costs				Total funds 2023	Total funds 2022
	In Patient Unit 2023	Medical 2023	Multi Disciplinary Team 2023	Bereavement & Therapeutic Services 2023		
Staff costs	726,016	14,500	12,519	11,536	764,571	698,040
Depreciation	151,299	3,148	1,573	1,573	157,593	148,332
Kitchen	40,566	416	414	-	41,396	40,957
Administration	10,841	222	(665)	21	10,419	22,450
Human resources	4,153	79	96	96	4,424	8,884
Management costs	2,817	119	1,478	798	5,212	42,642
Facilities	116,153	2,525	2,525	2,531	123,734	112,521
IT/Communications	96,068	2,058	1,968	1,954	102,048	93,216
Governance costs	9,884	206	103	103	10,296	9,301
<b>Total 2023</b>	<b>1,157,797</b>	<b>23,273</b>	<b>20,011</b>	<b>18,612</b>	<b>1,219,693</b>	<b>1,176,343</b>
<b>Total 2022</b>	<b>1,115,785</b>	<b>21,831</b>	<b>20,050</b>	<b>18,677</b>	<b>1,176,343</b>	

Support costs have been allocated to activities based on the staff numbers and hours involved in the activities.

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**11. AUDITORS' REMUNERATION**

	<b>2023</b>	<b>2022</b>
	£	£
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	<b>9,900</b>	8,580
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	<b>90</b>	55
	<u><b>9,990</b></u>	<u>8,635</u>

**12. STAFF COSTS**

	<b>2023</b>	<b>2022</b>
	£	£
Wages and salaries	<b>2,691,913</b>	2,634,522
Social security costs	<b>214,275</b>	190,384
Contribution to defined contribution pension schemes	<b>93,298</b>	83,940
	<u><b>2,999,486</b></u>	<u>2,908,846</u>

Included in wages and salaries above is £32,713 in respect of termination payments to 15 employees

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

	<b>2023</b>	<b>2022</b>
	No.	No.
Communications	<b>3</b>	3
Fundraising	<b>15</b>	24
Management & administration	<b>10</b>	10
In Patient Unit	<b>61</b>	55
Medical	<b>3</b>	2
Multi Disciplinary Team	<b>5</b>	5
Support staff	<b>16</b>	18
Bereavement	<b>13</b>	10
Kickstart	<b>24</b>	32
	<u><b>150</b></u>	<u>159</u>

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**12. STAFF COSTS (CONTINUED)**

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

	<b>2023</b>	<i>2022</i>
	<b>No.</b>	<i>No.</i>
In the band £60,001 - £70,000	-	1
In the band £70,001 - £80,000	-	1
In the band £90,001 - £100,000	1	-

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £505,380 (2022: £456,864).

Contributions were made to defined benefit pension schemes on behalf of higher paid employees.

The Charity also uses the services of volunteers who assist in the charity shops.

**13. COUNCIL MEMBERS' REMUNERATION AND EXPENSES**

During the year, no Council Members received any remuneration or other benefits (2022 - £NIL).

During the year ended 31 March 2023, no Council Member expenses have been incurred (2022 - £NIL).

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**NOTES TO THE FINANCIAL STATEMENTS  
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**14. TANGIBLE FIXED ASSETS**

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
<b>Cost</b>					
At 1 April 2022	3,731,290	88,728	443,508	347,439	4,610,965
Additions	-	-	35,123	13,556	48,679
Disposals	-	(39,708)	(4,482)	(127,695)	(171,885)
At 31 March 2023	<u>3,731,290</u>	<u>49,020</u>	<u>474,149</u>	<u>233,300</u>	<u>4,487,759</u>
<b>Depreciation</b>					
At 1 April 2022	778,453	53,130	273,054	197,235	1,301,872
Charge for the year	75,706	7,004	44,145	70,846	197,701
On disposals	-	(39,709)	(3,855)	(96,327)	(139,891)
At 31 March 2023	<u>854,159</u>	<u>20,425</u>	<u>313,344</u>	<u>171,754</u>	<u>1,359,682</u>
<b>Net book value</b>					
At 31 March 2023	<u><u>2,877,131</u></u>	<u><u>28,595</u></u>	<u><u>160,805</u></u>	<u><u>61,546</u></u>	<u><u>3,128,077</u></u>
At 31 March 2022	<u><u>2,952,837</u></u>	<u><u>35,598</u></u>	<u><u>170,454</u></u>	<u><u>150,204</u></u>	<u><u>3,309,093</u></u>

Included in freehold land & property is freehold land of £375,000 (2022: £375,000) which is not depreciated.

Included within the net book value of assets is £28,595 (2022 – £35,598) relating to assets held under hire purchase agreements.

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**FOR THE YEAR ENDED 31 MARCH 2023**

**15. FIXED ASSET INVESTMENTS**

	<b>Investments in subsidiary companies £</b>
<b>Cost</b>	
At 1 April 2022	100
	100
At 31 March 2023	100

**PRINCIPAL SUBSIDIARIES**

The following was a subsidiary undertaking of the Charity:

<b>Name</b>	<b>Registered office or principal place of business</b>	<b>Class of shares</b>	<b>Holding</b>
Alice House Trading Limited (dormant) company number 07170334	Alice House, Wells Avenue, Hartlepool, Cleveland, TS24 9DA	Ordinary	<b>100%</b>

The financial results of the subsidiary for the year were:

<b>Name</b>	<b>Net assets £</b>
Alice House Trading Limited (dormant) company number 07170334	<b>3,998</b>

**16. DEBTORS**

	<b>2023 £</b>	<b>2022 £</b>
Trade debtors	46,749	106,553
Other debtors	16,047	3,227
Prepayments	52,982	56,483
Accrued income	82,692	334,274
	<b>198,470</b>	<b>500,537</b>

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

**17. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR**

	<b>2023</b>	<b>2022</b>
	<b>£</b>	<b>£</b>
Bank loans	<b>110,787</b>	114,594
Pension creditor	<b>15,412</b>	18,275
Trade creditors	<b>79,918</b>	63,625
Amounts owed to group undertakings	<b>3,998</b>	3,998
Other taxation and social security	<b>39,645</b>	53,166
Obligations under finance lease and hire purchase contracts	<b>9,805</b>	9,804
Other creditors	<b>10,182</b>	157,940
Accruals and deferred income	<b>75,349</b>	36,942
	<b>345,096</b>	458,344
	<b>2023</b>	<b>2022</b>
	<b>£</b>	<b>£</b>
Deferred income at 1 April 2022	<b>24,716</b>	23,012
Resources deferred during the year	<b>27,909</b>	24,716
Amounts released from previous periods	<b>(24,716)</b>	(23,012)
	<b>27,909</b>	24,716

Deferred income relates to Lottery money paid in advance.

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**NOTES TO THE FINANCIAL STATEMENTS**  
**FOR THE YEAR ENDED 31 MARCH 2023**

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**18. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR**

	<b>2023</b>	<b>2022</b>
	<b>£</b>	<b>£</b>
Bank loans	<b>487,680</b>	<i>597,160</i>
Net obligations under finance lease and hire purchase contracts	<b>10,620</b>	<i>20,425</i>
	<u><b>498,300</b></u>	<u><i>617,585</i></u>

The aggregate amount of liabilities payable or repayable wholly or in part more than five years after the reporting date is:

	<b>2023</b>	<b>2022</b>
	<b>£</b>	<b>£</b>
Payable or repayable by instalments	<b>56,183</b>	<i>130,298</i>
	<u><b>56,183</b></u>	<u><i>130,298</i></u>

The bank loans are repayable in monthly instalments ending March 2028 and June 2029 respectively. Interest is charged at the Bank of England base rate plus 2% per annum.

The Coronavirus Business Interruption Loan is repayable in monthly instalments ending November 2026. Interest is charged at 6.36% per annum.

The bank loans are secured by a fixed and floating unlimited debenture and a charge over the land and buildings owned at The University Hospital of Hartlepool.

The hire purchase agreement is secured over the assets to which the agreement relates.

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**NOTES TO THE FINANCIAL STATEMENTS**  
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**19. STATEMENT OF FUNDS**

**STATEMENT OF FUNDS - CURRENT YEAR**

	Balance at 1 April 2022 £	Income £	Expenditure £	Gains/ (Losses) £	Balance at 31 March 2023 £
General funds	2,785,913	2,571,350	(2,779,047)	664	2,578,880
<b>Restricted funds</b>					
Restricted appeal funds	3,384	139,450	(142,834)	-	-
Primary Care Trust	-	924,542	(924,542)	-	-
Pharmacy income	-	52,947	(52,947)	-	-
Help the Hospices - fixed asset fund	436,050	-	(10,200)	-	425,850
Kickstart funding	-	157,944	(157,944)	-	-
	<u>439,434</u>	<u>1,274,883</u>	<u>(1,288,467)</u>	<u>-</u>	<u>425,850</u>
<b>Total of funds</b>	<u><u>3,225,347</u></u>	<u><u>3,846,233</u></u>	<u><u>(4,067,514)</u></u>	<u><u>664</u></u>	<u><u>3,004,730</u></u>

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**19. STATEMENT OF FUNDS (CONTINUED)**

**STATEMENT OF FUNDS - PRIOR YEAR**

	<i>Balance at 1 April 2021</i>	<i>Income</i>	<i>Expenditure</i>	<i>Transfers in/out</i>	<i>Gains/ (Losses)</i>	<i>Balance at 31 March 2022</i>
	£	£	£	£	£	£
<b>Unrestricted funds</b>						
General funds	2,914,744	2,370,280	(2,515,720)	11,954	4,655	2,785,913
<b>Restricted funds</b>						
Restricted appeal funds	-	62,096	(58,712)	-	-	3,384
Primary Care Trust	-	689,643	(689,643)	-	-	-
Pharmacy income	-	52,280	(52,280)	-	-	-
Capital fund	-	11,954	-	(11,954)	-	-
Help the Hospices - fixed asset fund	446,250	-	(10,200)	-	-	436,050
National Health Service England	-	191,141	(191,141)	-	-	-
Kickstart funding	-	442,659	(442,659)	-	-	-
	<u>446,250</u>	<u>1,449,773</u>	<u>(1,444,635)</u>	<u>(11,954)</u>	<u>-</u>	<u>439,434</u>
<b>Total of funds</b>	<u><u>3,360,994</u></u>	<u><u>3,820,053</u></u>	<u><u>(3,960,355)</u></u>	<u><u>-</u></u>	<u><u>4,655</u></u>	<u><u>3,225,347</u></u>

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STATEMENT OF FUNDS - (CONTINUED)

Restricted funds

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgefield Integrated Care Boards and the Hartlepool & Stockton Integrated Care Board which totalled £924,542.

Pharmacy income represents income from drugs purchased and recharged of £52,947.

The fixed asset fund represents a grant of £510,000 received from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. This fund is depreciated in line with the asset.

Funding to support unemployment people gain employment placements through the Government Kickstart scheme. This has been administered to other organisations to provide employment opportunities in accordance with the scheme.

**20. ANALYSIS OF NET ASSETS BETWEEN FUNDS**

**ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT YEAR**

	Restricted funds 2023 £	Unrestricted funds 2023 £	Total funds 2023 £
Tangible fixed assets	425,850	2,702,227	3,128,077
Fixed asset investments	-	100	100
Current assets	-	721,118	721,118
Creditors due within one year	-	(345,096)	(345,096)
Creditors due in more than one year	-	(498,300)	(498,300)
Provisions for liabilities and charges	-	(1,169)	(1,169)
<b>Total</b>	<b>425,850</b>	<b>2,578,880</b>	<b>3,004,730</b>

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**20. ANALYSIS OF NET ASSETS BETWEEN FUNDS (CONTINUED)**

**ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR YEAR**

	<i>Restricted funds 2022 £</i>	<i>Unrestricted funds 2022 £</i>	<i>Total funds 2022 £</i>
Tangible fixed assets	436,050	2,873,043	3,309,093
Fixed asset investments	-	100	100
Current assets	3,384	990,532	993,916
Creditors due within one year	-	(458,344)	(458,344)
Creditors due in more than one year	-	(617,585)	(617,585)
Provisions for liabilities and charges	-	(1,833)	(1,833)
	<u>439,434</u>	<u>2,785,913</u>	<u>3,225,347</u>
<b>Total</b>			

**21. RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FLOW FROM OPERATING ACTIVITIES**

	<b>2023 £</b>	<b>2022 £</b>
Net expenditure for the year (as per Statement of Financial Activities)	<b>(221,281)</b>	<b>(140,302)</b>
<b>Adjustments for:</b>		
Depreciation charges	<b>197,701</b>	191,468
Loss on the sale of fixed assets	<b>6,641</b>	8,669
Decrease/(increase) in debtors	<b>302,067</b>	(101,270)
Increase/(decrease) in creditors	<b>(109,442)</b>	103,677
Gain on pension deficit	<b>664</b>	4,655
<b>Net cash provided by operating activities</b>	<b>176,350</b>	<b>66,897</b>

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**22. ANALYSIS OF CASH AND CASH EQUIVALENTS**

	2023 £	2022 £
Cash in hand	522,648	493,379
<b>Total cash and cash equivalents</b>	<b>522,648</b>	<b>493,379</b>

**23. ANALYSIS OF CHANGES IN NET DEBT**

	At 1 April 2022 £	Cash flows £	At 31 March 2023 £
Cash at bank and in hand	493,379	29,269	522,648
Debt due within 1 year	(114,594)	3,807	(110,787)
Debt due after 1 year	(597,160)	109,480	(487,680)
Finance leases	(30,229)	9,804	(20,425)
	<b>(248,604)</b>	<b>152,360</b>	<b>(96,244)</b>

**24. CONTINGENT LIABILITIES**

Included in the 2005 financial statements was a grant of £500,000 from the Big Lottery Fund towards the capital costs of the new hospice. This grant agreement remains in force for a period of 80 years and the grant may become repayable if there is a breach of the terms and conditions in this period.

During the financial year 2013/14 and 2014/15 the Hospice received a grant totalling £510,000 from the Help the Hospices Fund (NHS England) towards the capital costs of the new Wellbeing Centre. In the event that the Hospice closes down or the building ceases to be used for the purpose of palliative care of patients, NHS England shall have the right to repayment of all monies advanced under this grant, subject to a reduction reflecting benefits from services already delivered.

**25. PENSION COMMITMENTS**

The pension cost charge represents contributions payable by the Charity and amounted to £93,298 (2022: £83,940). Contributions totalling £15,412 (2022: £18,275) were payable at the balance sheet date and are included in creditors.

The Charity is also making deficit payments and has included the net present value of these payments, £1,169 (2022: £1,833) in provisions.

**The Pensions Trust**

The company participates in the scheme, a multi-employer scheme which provides benefits to some 638 non-associated participating employers. The scheme is a defined benefit scheme in the UK. It is not possible for the company to obtain sufficient information to enable it to account for the scheme as a

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**25. PENSION COMMITMENTS (CONTINUED)**

defined benefit scheme. Therefore it accounts for the scheme as a defined contribution scheme.

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

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

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

Deficit contributions

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

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

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

Deficit contributions

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

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

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

**PRESENT VALUES OF PROVISION**

31 March 2023	31 March 2022	31 March 2021
1,169	1,833	6,488

**RECONCILIATION OF OPENING AND CLOSING PROVISIONS**

	Period Ending 31 March 2023 £	Period Ending 31 March 2022 £
Provision at start of period	1,833	6,488
Unwinding of the discount factor (interest expense)	35	37
Deficit contribution paid	(668)	(1,642)
Remeasurements - impact of any change in assumptions	(31)	(42)
Remeasurements - amendments to the contribution schedule	-	(3,008)
Provision at end of period	1,169	1,833

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**25. PENSION COMMITMENTS (CONTINUED)**

INCOME AND EXPENDITURE IMPACT

	Period Ending 31 March 2023	Period Ending 31 March 2022
	£	£
Interest expense	35	37
Remeasurements – impact of any change in assumptions	(31)	(42)
Remeasurements – amendments to the contribution schedule	-	(3,008)
Contributions paid in respect of future service*	*	*
Costs recognised in income and expenditure account	*	*

\*includes defined contribution schemes and future service contributions (i.e. excluding any deficit reduction payments) to defined benefit schemes which are treated as defined contribution schemes. To be completed by the company.

ASSUMPTIONS

	31 March 2023	31 March 2022	31 March 2022
	% per annum	% per annum	% per annum
Rate of discount	5.52	2.35	0.66

The discount rates shown above are the equivalent single discount rates which, when used to discount the future recovery plan contributions due, would give the same results as using a full AA corporate bond yield curve to discount the same recovery plan contributions.

**26. OPERATING LEASE COMMITMENTS**

At 31 March 2023 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	<b>2023</b>	<b>2022</b>
	£	£
Not later than 1 year	<b>85,192</b>	93,430
Later than 1 year and not later than 5 years	<b>49,292</b>	31,595
Later than 5 years	-	824
	<b>134,484</b>	125,849

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**27. RELATED PARTY TRANSACTIONS**

During the year the charity paid £13,543 for rent and insurance to a Council Member.

During the year the charity received income of £167 from a company in which a Council Member is also a director.

**28. GENERAL RESERVES**

At 31 March 2023 there is a deficit on unrestricted free reserves of £123,447. Excluding the long term bank loans and the pension deficit, there is a surplus of £376,022.