

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 2024

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

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**REFERENCE AND ADMINISTRATIVE DETAILS OF THE CHARITY, ITS COUNCIL MEMBERS AND
ADVISERS
FOR THE YEAR ENDED 31 MARCH 2024**

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 (resigned 25 January 2024)
Mr S T Chacko (resigned 10 April 2024)
Mrs K Martin (resigned 31 July 2023)
Dr J Druce
Mr P L H Bowes (appointed 27 July 2023)
Dr A L Brown
Mrs C Dunkerley (appointed 26 March 2024)
Mrs V J Smith (appointed 26 March 2024)

Company Registered Number

01525658

Charity Registered Number

510824

Registered Office

Alice House, Wells Avenue, Hartlepool, TS24 9DA

Co-Chief Executive Officers

Sandra Britten
Nicola Haggan

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 2024

Director of Finance

Mrs K Burrell

Senior Manager Clinical Services

Ms K Gibson

Senior Manager Corporate Services

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

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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COUNCIL MEMBERS' REPORT
FOR THE YEAR ENDED 31 MARCH 2024

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 2024. 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 2024

Structure, governance and management (continued)

Co-Chief Executives

The leadership roles of Co-Chief Executives 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. They are assisted by the Council Members.

The Co-Chief Executives have direct responsibility for the effective delivery of the following services and support services:

- Clinical Services
- Finance
- Facilities/Health & Safety
- Information Governance & Technology
- Administration
- Housekeeping
- Human Resources
- Therapeutic Support Services
- Fundraising, Trusts & Legacies
- Retail
- Lottery
- Communications & Corporate Business Partnerships
- Catering

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 Co 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.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Structure, governance and management (continued)

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.

Objectives and activities

Public benefit

The Council consider that they have complied with their duty in Section 4 of the Charities Act 2006 to have due regard to public benefit guidance published by the Charity Commission when setting objects, strategy and objectives.

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.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Objectives and activities (continued)

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)
FOR THE YEAR ENDED 31 MARCH 2024

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

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Objectives and activities (continued)

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. 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 individualised care, whilst promoting and maintaining the best quality of life possible. Professionals within the Multi-Disciplinary Team include: Consultants in Palliative Medicine, Staff Grade Doctors, Foundation Year 2 Doctor, Specialist Registrar Trainee, GP Trainee, Clinical Lead, Charge Nurse, Practice Development Nurse, Nurse Practitioner, Registered Nurses, Senior Healthcare Assistants, Healthcare Assistants, Complementary Therapists, Occupational Therapist, Physiotherapist, Bereavement Counsellors, Holistic Wellbeing Therapist and Volunteers.

In order to protect the sustainability of the Hospice's core services on the Inpatient Unit, the difficult decision was taken towards the end of 2022/2023 to close the Long Term Care Unit at the beginning of the 2023/2024 financial year. The Hospice was receiving approximately 50% of the operating costs for these beds from Continuing Healthcare (CHC) and the deficit could not continue to be sustained from Hospice funds. Closure of these beds has directly impacted GP, A&E and hospital admissions and placed further strain and pressure on an already struggling system within the NHS as these patients spend a significant amount of time accessing NHS services due to complexity and high medical needs. The Long Term Care Unit also supported both community and hospital discharge and was part of the discharge pathway for other hospices in the Tees Valley patch. Since its closure, together with the shortage of nursing home places within the local area, the Hospice has continued to see much longer bed occupancy rates with 59% of admissions above normal occupancy (i.e. ranging from 15-110 days) when measured by individual patients, as complexity levels make it difficult to find suitable nursing home placements for patients. The Hospice continues to seek viable funding opportunities for the beds on the former Long Term Care Unit for which 6 beds remain registered with the Care Quality Commission but are currently inactive.

Since the closure of the Long Term Care Unit in May 2023, the following inpatient services have been provided:

- Ten inpatient beds providing short-term specialist palliative care for symptom control and end of life care.
- 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)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance

Main achievements of the Charity

After a troubled and uncertain start to 2023/2024, we navigated our way through what was arguably the most difficult period in the Hospice's history, arriving at a point of increased stability, calmer waters and more sustainable fundraising.

Still impacted by Brexit, the Cost of Living Crisis and other social and economic factors, we began the year with contingency meetings to identify ways of stabilising a significant deficit budget and protecting core services. This led to the closure of our Long Term Care Unit, which was a secondary non-core service, together with a number of efficiency savings and streamlined processes.

Whilst the losses of certain services, people and resources caused some unease and unfortunately impacted on individuals, there is no doubt that these changes were vital in both securing the future of the Hospice and protecting core services.

Throughout the year, proactive communication and relationship building helped ensure that stakeholders were kept updated and this led to spikes in support and for the first time since COVID, we saw our event attendances return to healthy levels. With the right processes, partnerships and support in place, we held a number of sell-out events and noted an increased presence in the local business community.

We have continued working in close collaboration with the Hospices North East & North Cumbria Collaborative (12 Hospices) and Hospice UK's Innovation and Clinical ECHO Networks to ensure not only shared learning and best practice but a united voice to politicians and commissioners regarding the shortfall in hospice funding. Alice House has established itself as a leader in several areas with the chairing of a number of collaborative sub-groups being held by members of the Hospice's Senior Management Team.

The Hospice received a number of accolades throughout the year, finishing as finalists for Best Community Business in the Hartlepool Business Awards and also in this year's LGBT Alliance Awards, in the category of 'Creating LGBT Inclusion and Accessibility in the Workplace'.

Our most notable achievement throughout the year, however, followed an unannounced inspection by the Care Quality Commission in October 2023 where the Hospice received an overall rating of Good, which could not have been achieved without the ongoing dedication, skills and hard work of all our staff and volunteers.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

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 has 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 2023/2024. 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 03 & 04 October 2023. Prior to this the Hospice was last inspected on 23 March 2015. The formal report and rating from the inspection was received on 01 December 2023 where the Hospice received an overall rating of Good, with each of the 5 Key Lines of Enquiry (Safe, Effective, Caring, Responsive, Well-Led) scoring Good.

The CQC report states 'Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. They provided emotional support to patients, families and carers.'

The full inspection report can be found by following the link below:

- <https://www.cqc.org.uk/location/1-114379452>

A summary from the full inspection report is detailed below:

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Domain	Rating	CQC Comments
Is the service safe?	GOOD	<ul style="list-style-type: none"> • The service had enough staff to care for patients and keep them safe. • Staff had training in key skills, understood how to protect patients from abuse, and managed safety well. • The service controlled infection risk well. • Staff assessed risks to patients, acted on them and kept good care records. • They managed medicines well. • The service managed safety incidents well and learned lessons from them.
Is the service effective?	GOOD	<ul style="list-style-type: none"> • Staff provided good care and treatment, gave patients enough to eat and drink, and gave them pain relief when they needed it. • Managers monitored the effectiveness of the service and made sure staff were competent. • Staff worked well together for the benefit of patients, supported them to make decisions about their care, and had access to good information. • Key services were available 7 days a week.
Is the service caring?	GOOD	<ul style="list-style-type: none"> • Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. • They provided emotional support to patients, families and carers.
Is the service responsive?	GOOD	<ul style="list-style-type: none"> • The service planned care to meet the needs of local people, took account of patients' individual needs, and made it easy for people to give feedback. • People could access the service when they needed it.
Is the service well-led?	GOOD	<ul style="list-style-type: none"> • Leaders ran services well using reliable information systems and supported staff to develop their skills. • Staff understood the service's vision and values, and how to apply them in their work. • Staff felt respected, supported and valued. • They were focused on the needs of patients receiving care. • Staff were clear about their roles and accountabilities. • The service engaged well with patients and the community to plan and manage services and all staff were committed to improving services continually.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

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

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. 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. At the beginning of 2023/2024 each member of the Senior Management Team was assigned a Trustee to support them with the effective monitoring of departmental sub strategies, with periodic reporting back to the Board of Trustees on the following:

- Progress Against Strategic Objectives Within Departmental Sub Strategy.
- Operational Plans.
- Identified Risks.
- Review of Recently Updated Policies & Procedures.
- Review of Adherence to Non-Binding Rules, Codes and Standards.
- Benchmarking of Departmental Performance.
- Review of Third Party Suppliers/Services/SLAs.
- Review of Departmental Sub Strategy Against Budget.
- Feedback/Complaints.

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

Alice House Hospice is an integral partner in the Hospices North East & North Cumbria Collaborative, who take a partnership approach to addressing the ever increasing demands of service provision, education, training and workforce development. This collaboration demonstrates a region wide commitment to working in partnership to improve palliative and end of life care for all patients. The Hospice is a member of the following HNENC collaborative groups:

- Chief Executives
- Executive Clinical Leads in Hospice & Palliative Care (ECLiPH)
- Education
- Marketing & Communications
- Human Resources
- Finance
- Income Generation
- Facilities

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

The Hospice proactively engages with our local community, businesses, schools, colleges and other charities and also key local figures including Members of Parliament and Council Leaders.

Through this proactive approach we have further established ourselves as an organisation that is valued, trusted and supported. We have also noted a cultural shift in terms of our position within these networks; rather than having to ask if Hospice representatives can attend prominent local events, we are usually invited, having built positive relationships with a number of partner organisations.

The work of the Hospice was also recognised in the last year when we were listed as finalists in both Hartlepool Business Awards and Hart Gables LGBTQ Awards, respectively for Community Business of the Year and LGBTQ Inclusion in the workplace.

Through all of this, we have continued to raise awareness of our work and reached people and groups who may not have otherwise known about, or how to access Hospice care; this support is reciprocal as one of our key messages and aims is to promote the fact that we are here for those who need us and that our service users remain at the heart of all we do.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

Service Activities

During 2023/2024, the Hospice prioritised the following three improvement domains of Patient Safety, Clinical Effectiveness and Patient Experience:

- **Falls Prevention (Patient Safety)**

Alice House Hospice recognise that anyone can experience a fall and palliative patients are at greater risk of injury. The Hospice accepts that patients wish to remain independent for as long as possible and are therefore unable to completely eradicate falls. However, the Hospice has worked towards reducing the incidents of falls as much as possible by educating patients, families and staff of the associated risks. The Hospice has achieved the following improvements during 2023/2024 with Falls Prevention:

 - During 2022/2023 there were 31 falls by 19 patients within the Hospice. This reduced to 18 falls by 13 patients between April 2023 and March 2024, which represents a 41.93% decrease in falls in 2023/2024 compared to 2022/2023.
 - Falls posters have been created to remind patients of the risk of falls and to call for assistance.
 - An information booklet regarding the risk and causes of falls has been produced for patients and their families.
 - Patients with walking aids were identified as at risk when using the en-suite bathrooms independently due to the location of the light switch on the opposite side to the door opening. Automated lighting has been installed in 3 en-suite bathrooms with a schedule of work for the remaining 7 to be completed in Quarter 1 of 2024/2025. This will also complement the planned work of changing the direction of opening for bathroom doors to reduce distance and improve accessibility.
 - A Physiotherapist and Occupational Therapist Service Level Agreement is in place with North Tees & Hartlepool NHS Foundation Trust to assist patients with mobility.

- **Implementation of the Patient Safety incident Response Framework (Clinical Effectiveness)**

The aim of the priority in 2023/2024 was to ensure that Alice House Hospice embedded the Patient Safety Incident Response Framework (PSIRF), which 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 following progress was achieved in 2023/2024:

 - There was initially a delay in the 12 hospices who operate within the North East & North Cumbria ICB area adopting PSIRF, as it was unclear whether hospices had to fully implement PSIRF due to their low number of reportable incidents.
 - During 2023/2024, all hospices within North East and North Cumbria ICB attended three workshops, facilitated by the ICB to support hospices with the introduction of the Patient Safety Incident Response Framework (PSIRF). The workshops discussed patient safety incidents and found that all hospices share similar themes, however, each operates as an independent hospice and individually do not have the manpower or resources required to fully implement PSIRF for the low number of reportable incidences; an example of this is the specialist training to conduct investigations.
 - Following the workshops, a lighter approach has subsequently been agreed with the ICB where the collaborative of 12 hospices will jointly implement a single PSIRF Plan in 2024/2025.

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Rapid Response Out-of-Hours Admission Service (Patient Experience)**

North Tees & Hartlepool NHS Foundation Trust continued to provide funding in 2023/2024 (Year 2) for the provision of a Rapid Response Out-of-Hours Admission Service, with the Hospice moving towards 24 hour access and admission in order to reduce Accident & Emergency and Acute bed admissions. The service was initially directed at patients in the Accident and Emergency Department (A&E) or Emergency Assessment Unit (EAU) who are placed on the Care for the Dying Patient Document. The service enables patients to be rapidly transferred to the Hospice and cared for in an environment where patients and their families receive dignity and comfort at the end of their life. The service is regularly reviewed through multi-agency meetings, with the following actions implemented:

 - After 3 months planning, the service started on 01 October 2022, admitting emergency end of life patients on the Care for the Dying Patient (CDP) Document from the Emergency Department of the University Hospital of North Tees, Monday to Friday, 9.00 a.m. to 5.00 p.m.
 - From 04 February 2023 admissions were increased to include weekends, i.e. 7 days per week from 9.00 a.m. to 5.00 p.m.
 - From 07 March 2023 admissions were increased to include patients on the CDP Document (last 24-72 hours of life) from all wards within the University Hospital of North Tees.
 - From December 2023 the Standard Operation Procedure was revised and circulated to stakeholders to extend the service to patients meeting the criteria within the community.
 - In February 2024 an Annual Review and Audit Evaluation was completed, following which funding for the continuation of the service was confirmed for a further 15 months commencing March 2024. The Hospice will be utilising this funding for the secondment of a Palliative Care Assessment Sister (In-Reach) to work with the Specialist Palliative Care Team within North Tees Hospital to support the identification, assessment and referral pathways for patients with end of life care needs and/or specialist palliative care needs.
 - There has been some excellent qualitative feedback from the project through the Friends & Family survey results, including:

“Oh god yes, second to none. Fantastic staff honest and open. Aftercare for wife and family was beautiful.”

“Absolutely unbelievable. Put everyone at ease. Weight taken off. Cared for really well. Treat like part of the family. Catered for as much as loved one. So, understanding I would give 2000/100. Unbelievable, loved one at peace.”

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

During 2023/2024, the Hospice delivered and achieved the following service outcomes:

- **Inpatient Unit**

*"To all staff, we are extremely grateful that xxxx was able to be transferred to stay with you for his final days.
Your kind and thoughtful care meant he could relax and feel more settled and comfortable.
It brought so much relief to know he was so well looked after.
He also felt comforted by the kindness and support you showed to us every time we visited.
We can't thank you enough for everything you have done for xxxx and for us as a family."*

- The Hospice's Inpatient Unit comprises of:
 - 8 single en-suite bedrooms providing short-term specialist palliative care for symptom control, psychological and end of life care. Funded by North East & North Cumbria Integrated Care Board (Tees Valley) for 6 beds and North East & North Cumbria Integrated Care Board (County Durham) for 2 beds.
 - Butterwick Hospice's adult inpatient unit remained closed until August 2023, when it opened 2 end of life care beds under Care Quality Commission restrictions. Alice House Hospice received funding during 2023/2024 from North East & North Cumbria Integrated Care Board (Tees Valley) for the provision of 2 additional beds for patients from the Stockton-on-Tees area for short-term specialist palliative care for symptom control, psychological and end of life care.
- During 2023/2024, the Hospice's healthcare professionals provided the following telephone support for both Tees Valley and County Durham inpatients

Telephone Support	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Advice to Patients, Carers & Family Members	634	838	867	825	3,164
Advice to Healthcare Professionals	1,198	1,128	1,183	1,147	4,656
Multi-Disciplinary Team (patients discussed)	111	125	140	146	522
Total	1,943	2,091	2,190	2,118	8,342

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Day Hospice**

“Day Hospice is the highlight of my week.

When I am at home it keeps me going knowing that I will be attending again the next week.”

- Day Hospice operates in the Holistic Wellbeing Centre each Thursday between 10.00 a.m. and 3.00 p.m. with a light lunch and refreshments provided. Patients still have the opportunity to visit on an appointment basis but also benefit from the opportunity to stay for peer support. Patients report that the greatest benefit from attending Day Hospice is the relief from social isolation and spending time with other people who are going through a life limiting experience. The service is designed to provide support to patients who may have issues with their health including:
 - Management of symptoms.
 - Providing psychological and emotional support.
 - Administration of treatments, such as blood transfusions and intravenous fluids.
 - Providing an introduction to Hospice services.
 - Signposting/referring to other healthcare professionals.
 - Supporting individual and carers' wellbeing.
 - Providing relaxation and complementary therapies.
- During 2023/2024, the Hospice's healthcare professionals provided the following Day Hospice support to both Tees Valley and County Durham patients:

Day Hospice	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Support to Patients, Carers & Family	87	32	43	55	177

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Therapeutic Support Services - Counselling Support**

“Thank you for seeing me and helping me, I truly did not think I could move on, with xxxx help I have done just that and I am so grateful.”

“xxxx has really responded well to her time here and the activities that have helped her to work through her difficult memories and emotions. I have noticed her becoming more ‘herself’ and less melancholy. She is more lively and happy. Thank you for all you have done and continue to do!”

- The Hospice is commissioned to provide bereavement services to patients and their families accessing Hospice services.
- The Hospice also provides community bereavement support to bereaved adults who have been referred via external services from the local communities of Hartlepool, Stockton and East Durham. This is not a commissioned service and is wholly reliant upon the ability to source external funding. The service has been strongly established since 2007 and is constantly in high demand, with the Hospice receiving on average over 60 referrals a month for this service. Fortunately, the Hospice received a grant from the Masonic Charitable Foundation to provide this service in 2023/2024 and has received confirmation of funding from another external source for 2024/2025.
- The Hospice also offers a specialist Children’s Bereavement Service to support bereaved children from our local communities who are experiencing grief and loss. The Hospice received funding from a local corporate business partner to provide this service during 2023/2024.
- The Counselling Team provide emotional and psychological support to Hospice staff members as part of the Staff Wellbeing Service, which is offered alongside holistic therapies.
- For the reporting period (April 2023 to March 2024) the Counselling Team provided the following face to face sessions for adults and children:

Counselling Support	Total
Referrals Received Adult	316
Referrals Received Children	132
Adult Assessments	121
Adult Counselling	831
Child Assessments	73
Child Counselling	271

- During 2023/2024 the Counselling Team also engaged in telephone support calls to and from bereaved adults as detailed below:

Counselling Telephone Support	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Telephone Contacts/Support Calls	1,005	858	769	889	3,521

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Achievements and performance (continued)

- **Therapeutic Support Services - Holistic Therapies**

“The ability to release stress and stop anxiety building up since my sessions have taught me excellent coping mechanisms. Personalised and relaxing experience. Felt valued and listened to and given hope for the future.”

- As well as providing a wide range of holistic therapies and treatments for paying members of the public, the Hospice received funding to deliver the following therapies in 2023/2024:
- Funding from Cancer Project Services at North Tees & Hartlepool NHS Foundation Trust to enable newly diagnosed cancer patients to access a choice of holistic therapies.
- Funding from North Tees & Hartlepool NHS Foundation Trust to provide a Staff Wellbeing Service to NHS staff, to address the increasing mental health burden and associated sickness and absence levels following COVID-19 and the challenges regarding care delivery, consumer increase and manpower (recruitment and retention).
- During 2023/2024, therapeutic support activities to staff and the public have been delivered as detailed below:

Holistic Therapies	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Therapeutic Support Contacts/Activities	585	579	622	588	2,374

- **24 Hour Helpline**

- We recognise and understand the need for support when living at home with a life-limiting illness and that this need can come at any time. Our 24 Hour Helpline is designed to provide help at the earliest opportunity or to put callers in contact with others that can help.
- The Helpline is staffed by specialist Nurses and Doctors, based at the Hospice, who are ready to offer support and advice to individuals and their families, at any time during the day or night.
- This service is also available for Healthcare Professionals who can access this service during a 24 hour period where they will receive specialist support and advice in the management of a patient's ongoing specialist palliative care needs. The patient can be at home, in hospital or another Hospice.
- The Helpline is not funded and during 2023/2024 the Hospice's healthcare professionals provided the following telephone support via the Hospice's 24 hour Helpline for both Tees Valley and County Durham patients and healthcare professionals:

24 Hour Helpline	Qtr 1	Qtr 2	Qtr 3	Qtr 4	Total
Helpline Calls (Patients & Healthcare Professionals)	147	168	173	103	591

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

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 £663k. With free reserves (after removing long term liabilities) of £698k the Charity is meeting their 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 2024

Financial review and results for the year

The Charity has made a surplus before depreciation of £467,461 and after depreciation a surplus of £296,767 has been declared.

The detailed results are as follows:

Gross income decreased by 0.7% to £3.8m, while expenditure on charitable activities decreased by 14.4% to £2.7m. After taking depreciation into account total resources expended of £3.5m (2023: £4.0m) resulted in a net surplus for the year of £297k (2023: £221k deficit).

Income received in furtherance of charitable objects totalled £1.4m. Expenditure incurred on furthering charitable objects was £2.7m. The Charity supports its charitable activities with successful fundraising activities, including charity shops and a lottery.

Fundraising activities, donations and legacies generated a surplus of unrestricted income of £1,047k to be used to pursue charitable activities.

£226k of grants were received to support the work of the Hospice.

The lottery generated a surplus of £92k (2023: £104k) and Trading Activities generated a surplus of £135k (2023: £159k).

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

Total reserves stand at £3.3m (2023: £3m), including £421k of restricted reserves.

At 31 March 2024 there is a surplus on unrestricted free reserves of £325k. 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 are free reserves of £698k.

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)
FOR THE YEAR ENDED 31 MARCH 2024

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.

Following organisational changes and in these times of ongoing economic and political uncertainty, a less experimental and 'back to basics' approach to Fundraising has proven effective with a consistent presence in our community and traditional, low-cost processes such as bucket collections or tombolas in local shops, at public events etc. This engaging approach has enabled us to build relationships with stakeholders at all levels. Other innovative Fundraising processes include our 2p appeal, which has seen a positive response and is inclusive, enabling most people to give.

An organisation-wide focus on Fundraising as a priority has built stronger teams within the Hospice and brought staff and volunteers together from all departments.

Most of our Fundraising staff and many of our volunteers are long-serving and able to maintain ongoing relationships with our community. Our fundraising approaches are respectful, friendly and compliant with all regulations; we receive consistently positive feedback and engagement on our social media pages, especially around our larger scale events such as the Colour Run, which has grown into a prominent annual event for Hartlepool.

Our shops continue to perform well and provide an essential community resource, whilst being a highly effective income generator for our services.

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.

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

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Staff

The Hospice completed the annual Staff Satisfaction Survey in November 2023, which received a good response rate of 53.8%, with 50 surveys received out of a possible 93. Responses included:

- 100% agreed that if a friend or relative needed treatment they would be happy with the standard of care provided by this organisation.
- 98% agree that their work is meaningful to the Hospice.
- “I feel privileged to be part of the Hospice Team and am very proud of the work we do. I truly believe that our work really makes a difference.”
- “Alice House Hospice is an amazing place to work, it’s like one big happy family.”
- “I feel blessed to be part of an amazing team.”

The Hospice completed its first Workforce Equality Survey in December 2023 with an excellent response rate of 64.5% (60 surveys received out of a possible 93). Responses included:

- 97% of staff feel safe to speak up about harassment or discrimination at work.
- 93% of staff agreed that the organisation respects individual differences, such as cultural backgrounds.
- 89% of staff agreed that they are able to access the right learning and development opportunities when needed.
- “The Freedom to Speak-up Guardian is always available and the Management Team are very approachable.”
- “Alice House Hospice is an amazing place to work, colleagues and management are always supportive.”

Alice House Hospice offer all staff an option to join the Westfield Health Plan, which supports staff with their health and wellbeing. All staff also have access to our Holistic Wellbeing Services which offer meditation, reflexology, acupuncture, Indian head massages, complementary therapies, etc. This is highly successful for preventing staff going on sick leave for stress/anxiety etc. and also successful for staff returning back to work earlier.

Alice House Hospice is also part of the Better Health at Work Award Scheme, which helps to facilitate a healthy workplace and workforce. During 2023/2024 the Hospice has delivered different sessions for staff to attend, for example:

- Free mocktail tasting sessions (to help reduce alcohol intake).
- Lunchtime circuit training (to help with weight control).
- Speed “get to know you” sessions between colleagues (to improve healthy working relationships).

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

Plans for the Future

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

- **Electronic Patient Record Management System (Patient Safety)**
The Hospice currently registers patients and records all admissions on SystmOne, with members of the Medical and Nursing Team trained to view patient information. The priority for 2024/2025 will be to complete the business mapping/change process from paper based to electronic patient care records, which will move all of the Hospice's clinical records over to the Palliative Care Module of SystmOne.
- **Progression of Implementation of the Patient Safety Incident Response Framework (PSIRF) in Collaboration with Hospices North East & North Cumbria (Clinical Effectiveness)**
Following the workshops in 2023/2024, where a lighter approach was agreed with the ICB, the collaborative of 12 hospices will meet in Quarter 1 in 2024/2024 to jointly implement a single PSIRF Plan, which will include the following:
 - Patient Safety Incident Investigation training for managers which gives PSIRF oversight, a system approach to investigating and learning from patient safety incidents and involving patients and families affected by patient safety incidents.
 - Examination of the differing systems to record incidences within the hospice network and identification of methods of collating comparable data.
- **Pilot In-Reach Hospital Worker to Increase the Flow of Patients into Hospice Emergency End of Life Beds (Patient Experience)**
The Hospice has received continuation funding in 2024/2025 (Year 3) from North Tees & Hartlepool NHS Foundation Trust for the Rapid Response Out-of-Hours Admission. During 2024/2025, the Hospice will be seconding a Palliative Care Assessment Sister (In-Reach) to work with the Specialist Palliative Care Team within the University Hospital of North Tees to support the identification, assessment and referral pathways for patients with end of life care needs and/or specialist palliative care needs.

The Hospice has also prioritised the following two strategic and operational priorities for 2024/2025:

- **Commissioning of Clinical Services**
 - 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 2023/2024 meetings continued to take 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).
 - 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 Adult Palliative and 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.
 - The Hospice will continue to petition regional and national MPs and to be represented on the relevant ICB groups and committees during 2024/2025, to ensure delivery of the ICB's commitment towards an investment programme of levelling up Hospice funding to the NHS national average reference cost for a bed day rate (NHS England National Cost Collection Data Publication).

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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

• **Facilities**

- During 2023/2024 a risk was identified with the ageing hot water and central heating plant, which operate 24 hours a day and are in an advanced state of decline. The main risk to their functionality is the obsolescence of many internal components, which may render them unrepairable in the event of a breakdown. Trustees have therefore approved capital spend in 2024/2025 to replace the hot water, heating and boiler management system with more energy efficient plant.

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, Mission and Values by complimenting the work of the patient care staff, supporting fundraising efforts and serving as Council Members. The volunteers bring skill, 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.

The Hospice completed a Volunteer Satisfaction Survey in November 2023, where 35 surveys were received out of a possible 70. Responses included:

- 100% agree that if a friend or relative needed treatment they would be happy with the standard of care provided by this organisation.
- 85% said that supporting a local charity was one of the main reasons for volunteering.
- Examples of personal qualities which volunteers felt were essential for their roles included patience, empathy, good communication skills, hardworking, friendly, helpful, kind, a listening ear, smiley face.
- *"I feel very much part of a team and my contribution is always acknowledged."*
- *"I feel blessed to be part of an amazing team."*

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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COUNCIL MEMBERS' REPORT (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2024

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 . 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)

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

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 2024 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 2024 and of its incoming resources and application of resources, including its income and expenditure for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

BASIS FOR OPINION

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the 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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**INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF THE HARTLEPOOL HOSPICE LIMITED T/A
ALICE HOUSE HOSPICE (CONTINUED)**

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.

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

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.

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

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 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

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

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

- 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. This description forms part of our Auditors' Report.

USE OF OUR REPORT

This report is made solely to the charitable company's members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so that we might state to the charitable company's members those matters we are required to state to them in an 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

10 December 2024

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 2024

	Note	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	Total funds 2023 £
INCOME FROM:					
Donations and legacies	3	212,882	1,075,207	1,288,089	1,034,317
Charitable activities	4	1,272,934	167,346	1,440,280	1,707,112
Other trading activities	5	-	1,091,016	1,091,016	1,104,804
TOTAL INCOME		1,485,816	2,333,569	3,819,385	3,846,233
EXPENDITURE ON:					
Raising funds	7	-	872,110	872,110	972,190
Charitable activities	8	1,461,585	1,189,546	2,651,131	3,095,324
TOTAL EXPENDITURE		1,461,585	2,061,656	3,523,241	4,067,514
NET INCOME/(EXPENDITURE)		24,231	271,913	296,144	(221,281)
Transfers between funds	18	(10,809)	10,809	-	-
NET MOVEMENT IN FUNDS BEFORE OTHER RECOGNISED GAINS/(LOSSES)		13,422	282,722	296,144	(221,281)
OTHER RECOGNISED GAINS/(LOSSES):					
Other gains	24	-	623	623	664
NET MOVEMENT IN FUNDS		13,422	283,345	296,767	(220,617)
RECONCILIATION OF FUNDS:					
Total funds brought forward		425,850	2,578,880	3,004,730	3,225,347
Net movement in funds		13,422	283,345	296,767	(220,617)
TOTAL FUNDS CARRIED FORWARD		439,272	2,862,225	3,301,497	3,004,730

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

The notes on pages 36 to 61 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 2024

	Note	2024 £	2023 £
FIXED ASSETS			
Tangible assets	13	2,971,542	3,128,077
Investments	14	100	100
		<u>2,971,642</u>	<u>3,128,177</u>
CURRENT ASSETS			
Debtors	15	262,880	198,470
Cash at bank and in hand	21	720,308	522,648
		<u>983,188</u>	<u>721,118</u>
Creditors: amounts falling due within one year	16	(279,560)	(345,096)
		<u>703,628</u>	<u>376,022</u>
NET CURRENT ASSETS		703,628	376,022
TOTAL ASSETS LESS CURRENT LIABILITIES		3,675,270	3,504,199
Creditors: amounts falling due after more than one year	17	(373,227)	(498,300)
NET ASSETS EXCLUDING PENSION LIABILITY		3,302,043	3,005,899
Defined benefit pension scheme liability	24	(546)	(1,169)
TOTAL NET ASSETS		3,301,497	3,004,730
CHARITY FUNDS			
Restricted funds	18	420,924	425,850
Unrestricted funds	18	2,880,573	2,578,880
TOTAL FUNDS		3,301,497	3,004,730

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

BALANCE SHEET (CONTINUED)
AS AT 31 MARCH 2024

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 03 December 2024 and signed on their behalf by:



Mr R Priestman
(Chair of Trustees)



Mrs J Regan
(Treasurer)

The notes on pages 36 to 61 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 2024

	Note	2024 £	2023 £
CASH FLOWS FROM OPERATING ACTIVITIES			
Net cash used in operating activities	20	342,672	176,350
CASH FLOWS FROM INVESTING ACTIVITIES			
Proceeds from the sale of tangible fixed assets		700	25,353
Purchase of tangible fixed assets	13	(24,150)	(48,679)
NET CASH USED IN INVESTING ACTIVITIES		(23,450)	(23,326)
CASH FLOWS FROM FINANCING ACTIVITIES			
Repayments of borrowing		(111,135)	(113,287)
Repayments of finance leases		(9,804)	(9,804)
Gain on pension deficit		(623)	(664)
NET CASH USED IN FINANCING ACTIVITIES		(121,562)	(123,755)
CHANGE IN CASH AND CASH EQUIVALENTS IN THE YEAR			
Cash and cash equivalents at the beginning of the year		522,648	493,379
CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR	21	720,308	522,648

The notes on pages 36 to 61 form part of these financial statements

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

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.

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

2. ACCOUNTING POLICIES (CONTINUED)

2.3 Going concern

With the continuing impact of Brexit, the Cost of Living Crisis and other social and economic factors, the Charity started the year with a significant deficit budget which required some difficult decisions in order to stabilise the financial position and protect core services, including the closure of the Long Term Care Unit which was a secondary non-core funded service. This, together with efficiency savings, streamlined processes and a return to pre-COVID support and fundraising levels, has resulted in turning a deficit budget into a surplus budget for the year.

At all times, the financial position of the Charity is under constant review and closely monitored by the Senior Management Team and Council Members, who take immediate action as required to preserve the financial stability of the Charity. The Risk Register is regularly reviewed and updated to reflect the exposures faced by the Charity.

After making appropriate enquiries, the Council Members 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

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.

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

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.

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

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.

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

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.

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

3. DONATIONS, LEGACIES AND SIMILAR INCOMING RESOURCES

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Donations	-	776,314	776,314	643,082
Legacies	-	267,206	267,206	62,396
Grants	212,882	12,976	225,858	322,451
Similar incoming resources	-	18,711	18,711	6,388
Total 2024	212,882	1,075,207	1,288,089	1,034,317
<i>Total 2023</i>	<i>297,394</i>	<i>736,923</i>	<i>1,034,317</i>	

In 2024 there is £Nil (2023: £157,944) included in grant income which was received from the Kickstart scheme.

4. INCOME FROM CHARITABLE ACTIVITIES

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
In Patient Unit	1,189,790	4,734	1,194,524	1,433,038
Medical	53,745	-	53,745	52,947
Bereavement & Therapeutic Services	29,399	162,612	192,011	40,153
Insurance income	-	-	-	180,974
Total 2024	1,272,934	167,346	1,440,280	1,707,112
<i>Total 2023</i>	<i>977,489</i>	<i>729,623</i>	<i>1,707,112</i>	

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

5. FUNDRAISING INCOME

	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Lottery	219,700	219,700	226,847
Fundraising events	208,046	208,046	147,527
Kitchen income	27,047	27,047	22,879
Shop income	624,373	624,373	672,654
Catering and merchandising income	11,850	11,850	13,471
VR centre	-	-	21,426
Total 2024	1,091,016	1,091,016	1,104,804
<i>Total 2023</i>	<i>1,104,804</i>	<i>1,104,804</i>	

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

6. TRADING ACTIVITIES

	Unrestricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Charity trading income			
Charity shop takings	624,373	624,373	672,654
Catering and merchandising income	11,850	11,850	13,471
VR centre	-	-	21,426
Sub total trading income	636,223	636,223	707,551
Grant income (included in note 3)	-	-	100,999
Total income	636,223	636,223	808,550
Fundraising trading expenses			
Charity shop costs	168,003	168,003	138,675
VR centre costs	41,780	41,780	57,619
Catering and merchandising costs	3,163	3,163	3,166
Salaries	287,899	287,899	449,805
Total expenditure	500,845	500,845	649,265
Net income from trading activities	<u>135,378</u>	<u>135,378</u>	<u>159,285</u>
Total 2023	<u>159,285</u>	<u>159,285</u>	

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

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

7. COST OF RAISING FUNDS

	Unrestricted funds 2024 £	Restricted funds 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
Fundraising expenditure	62,947	-	62,947	48,486
Lottery costs	94,676	-	94,676	91,835
Support costs allocated	5,952	-	5,952	5,974
Wages and salaries	167,582	-	167,582	136,522
Depreciation	40,108	-	40,108	40,108
Fundraising trading expenses (note 6)	500,845	-	500,845	649,265
Total 2024	872,110	-	872,110	972,190
<i>Total 2023</i>	<i>871,191</i>	<i>100,999</i>	<i>972,190</i>	

8. ANALYSIS OF EXPENDITURE ON CHARITABLE ACTIVITIES

Summary by fund type

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total 2024 £	<i>Total 2023 £</i>
In Patient Unit	1,402,840	495,697	1,898,537	2,342,890
Medical	53,745	213,045	266,790	281,623
Multi Disciplinary Team	-	257,076	257,076	237,381
Bereavement & Therapeutic Services	5,000	223,728	228,728	233,430
Total 2024	1,461,585	1,189,546	2,651,131	3,095,324
<i>Total 2023</i>	<i>1,187,468</i>	<i>1,907,856</i>	<i>3,095,324</i>	

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

NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

9. ANALYSIS OF EXPENDITURE BY ACTIVITIES

	Activities undertaken directly 2024 £	Support costs 2024 £	Total funds 2024 £	<i>Total funds 2023 £</i>
In Patient Unit	797,483	1,101,054	1,898,537	2,342,890
Medical	245,145	21,645	266,790	281,623
Multi Disciplinary Team	238,687	18,389	257,076	237,381
Bereavement & Therapeutic Services	211,441	17,287	228,728	233,430
Total 2024	1,492,756	1,158,375	2,651,131	3,095,324
<i>Total 2023</i>	<i>1,875,631</i>	<i>1,219,693</i>	<i>3,095,324</i>	

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

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

Analysis of direct costs

	In Patient Unit 2024 £	Medical 2024 £	Disciplinary Team 2024 £	Multi Bereavement & Therapeutic Services 2024 £	Total funds 2024 £	Total funds 2023 £
Staff costs	722,202	130,242	225,582	201,110	1,279,136	1,648,588
Consumables	26,928	-	-	721	27,649	32,160
Drugs	-	80,090	-	-	80,090	85,105
Equipment and maintenance	28,244	-	-	-	28,244	24,404
Medical and professional fees	19,166	34,813	13,105	4,916	72,000	79,247
Travel	281	-	-	282	563	1,258
Office costs and sundries	662	-	-	1,750	2,412	1,424
Facilities	-	-	-	2,662	2,662	3,445
Total 2024	797,483	245,145	238,687	211,441	1,492,756	1,875,631
<i>Total 2023</i>	<i>1,185,093</i>	<i>258,350</i>	<i>217,370</i>	<i>214,818</i>	<i>1,875,631</i>	

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

**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

Analysis of Support costs

	In Patient Unit 2024 £	Medical 2024 £	Disciplinary Team 2024 £	Multi Therapeutic Services 2024 £	Bereavement & Therapeutic Services 2024 £	Total funds 2024 £	Total funds 2023 £
Staff costs	601,953	11,540	10,186	9,424	9,424	633,103	764,571
Depreciation	125,361	2,612	1,305	1,305	1,305	130,583	157,593
Kitchen	33,094	337	337	-	-	33,768	41,396
Administration	48,114	1,002	506	505	505	50,127	10,419
Human resources	16,796	175	174	174	174	17,319	4,424
Management costs	82,123	1,781	1,782	1,781	1,781	87,467	5,212
Facilities	104,005	2,261	2,261	2,261	2,261	110,788	123,734
IT/Communications	79,815	1,734	1,734	1,734	1,735	85,018	102,048
Governance costs	9,791	203	104	102	102	10,200	10,296
Total 2024	1,101,052	21,645	18,389	17,287	17,287	1,158,373	1,219,693
<i>Total 2023</i>	<i>1,157,797</i>	<i>23,273</i>	<i>20,011</i>	<i>18,612</i>	<i>18,612</i>	<i>1,219,693</i>	

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

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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**NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024**

10. AUDITORS' REMUNERATION

	2024	2023
	£	£
Fees payable to the Charity's auditor for the audit of the Charity's annual accounts	10,400	9,900
Fees payable to the Charity's auditor in respect of: All non-audit services not included above	90	90
	<u><u> </u></u>	<u><u> </u></u>

11. STAFF COSTS

	2024	2023
	£	£
Wages and salaries	2,115,460	2,691,913
Social security costs	171,196	214,275
Contribution to defined contribution pension schemes	81,064	93,298
	<u><u>2,367,720</u></u>	<u><u>2,999,486</u></u>

Included in wages and salaries above is £10,172 (2023: £32,713) in respect of termination payments.

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

	2024	2023
	No.	No.
Communications	3	3
Fundraising	22	15
Management & administration	13	10
In Patient Unit	54	61
Medical	3	3
Multi Disciplinary Team	4	5
Support staff	11	16
Bereavement	10	13
Kickstart	-	24
	<u><u>120</u></u>	<u><u>150</u></u>

THE HARTLEPOOL HOSPICE LIMITED T/A ALICE HOUSE HOSPICE
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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

11. STAFF COSTS (CONTINUED)

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

	2024	<i>2023</i>
	No.	<i>No.</i>
In the band £60,001 - £70,000	2	<i>-</i>
In the band £90,001 - £100,000	-	<i>1</i>

The total remuneration paid to key management personnel (including national insurance and pension contributions) was £419,784 (*2023: £505,380*).

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.

12. COUNCIL MEMBERS' REMUNERATION AND EXPENSES

During the year, no Council Members received any remuneration or other benefits (*2023 - £NIL*).

During the year ended 31 March 2024, no Council Member expenses have been incurred (*2023 - £NIL*).

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13. TANGIBLE FIXED ASSETS

	Freehold land & property £	Motor vehicles £	Fixtures and fittings £	Computer equipment £	Total £
Cost					
At 1 April 2023	3,731,290	49,020	474,149	233,300	4,487,759
Additions	-	-	16,710	7,440	24,150
Disposals	-	-	-	(87,844)	(87,844)
At 31 March 2024	<u>3,731,290</u>	<u>49,020</u>	<u>490,859</u>	<u>152,896</u>	<u>4,424,065</u>
Depreciation					
At 1 April 2023	854,159	20,425	313,344	171,754	1,359,682
Charge for the year	75,707	7,003	45,265	42,719	170,694
On disposals	-	-	-	(77,853)	(77,853)
At 31 March 2024	<u>929,866</u>	<u>27,428</u>	<u>358,609</u>	<u>136,620</u>	<u>1,452,523</u>
Net book value					
At 31 March 2024	<u><u>2,801,424</u></u>	<u><u>21,592</u></u>	<u><u>132,250</u></u>	<u><u>16,276</u></u>	<u><u>2,971,542</u></u>
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>

Included in freehold land & property is freehold land of £375,000 (2023: £375,000) which is not depreciated.

Included within the net book value of assets is £21,592 (2023: £28,595) relating to assets held under hire purchase agreements.

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14. FIXED ASSET INVESTMENTS

	Investments in subsidiary companies £
Cost	
At 1 April 2023	100
At 31 March 2024	<u>100</u>

PRINCIPAL SUBSIDIARIES

The following was a subsidiary undertaking of the Charity:

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

The financial results of the subsidiary for the year were:

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

15. DEBTORS

	2024 £	2023 £
Trade debtors	59,562	46,749
Other debtors	18,475	16,047
Prepayments	35,118	52,982
Accrued income	149,725	82,692
	<u>262,880</u>	<u>198,470</u>

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NOTES TO THE FINANCIAL STATEMENTS
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16. CREDITORS: AMOUNTS FALLING DUE WITHIN ONE YEAR

	2024	2023
	£	£
Bank loans	114,922	<i>110,787</i>
Pension creditor	14,167	<i>15,412</i>
Trade creditors	51,472	<i>79,918</i>
Amounts owed to group undertakings	3,998	<i>3,998</i>
Other taxation and social security	39,594	<i>39,645</i>
Obligations under finance lease and hire purchase contracts	9,804	<i>9,805</i>
Other creditors	2,218	<i>10,182</i>
Accruals and deferred income	43,385	<i>75,349</i>
	279,560	<i>345,096</i>
	279,560	<i>345,096</i>
	2024	2023
	£	£
Deferred income at 1 April 2023	27,909	<i>24,716</i>
Resources deferred during the year	29,282	<i>27,909</i>
Amounts released from previous periods	(27,909)	<i>(24,716)</i>
	29,282	<i>27,909</i>
	29,282	<i>27,909</i>

Deferred income relates to Lottery money paid in advance.

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17. CREDITORS: AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR

	2024	2023
	£	£
Bank loans	372,410	487,680
Net obligations under finance lease and hire purchase contracts	817	10,620
	373,227	498,300

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
FOR THE YEAR ENDED 31 MARCH 2024

18. STATEMENT OF FUNDS

STATEMENT OF FUNDS - CURRENT YEAR

	Balance at 1 April 2023 £	Income £	Expenditure £	Transfers in/out £	Gains/ (Losses) £	Balance at 31 March 2024 £
General funds	2,578,880	2,351,917	(2,061,656)	10,809	623	2,880,573
Restricted funds						
Restricted appeal funds	-	212,882	(196,799)	(10,809)	-	5,274
Integrated Care Board	-	945,442	(945,442)	-	-	-
Pharmacy income	-	53,745	(53,745)	-	-	-
NHS End of Life Beds	-	226,000	(226,000)	-	-	-
Help the Hospices - fixed asset fund	425,850	-	(10,200)	-	-	415,650
Bereavement counselling	-	29,399	(29,399)	-	-	-
	<u>425,850</u>	<u>1,467,468</u>	<u>(1,461,585)</u>	<u>(10,809)</u>	<u>-</u>	<u>420,924</u>
Total of funds	<u><u>3,004,730</u></u>	<u><u>3,819,385</u></u>	<u><u>(3,523,241)</u></u>	<u><u>-</u></u>	<u><u>623</u></u>	<u><u>3,301,497</u></u>

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NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2024

18. STATEMENT OF FUNDS (CONTINUED)

STATEMENT OF FUNDS - PRIOR YEAR

	<i>Balance at 1 April 2022</i>	<i>Income</i>	<i>Expenditure</i>	<i>Gains/ (Losses)</i>	<i>Balance at 31 March 2023</i>
	£	£	£	£	£
Unrestricted funds					
General funds	2,785,913	2,571,350	(2,779,047)	664	2,578,880
Restricted funds					
Restricted appeal funds	3,384	139,450	(142,834)	-	-
Integrated Care Board	-	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>
Total of funds	<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>

Restricted funds

Funding received and attributed directly to charitable activities has been shown as restricted. This includes monies from Durham Dales, Easington and Sedgfield Integrated Care Boards and the Hartlepool & Stockton Integrated Care Board which totalled £1,171,442.

Pharmacy income represents income from drugs purchased and recharged of £53,745.

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.

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NOTES TO THE FINANCIAL STATEMENTS
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19. ANALYSIS OF NET ASSETS BETWEEN FUNDS

ANALYSIS OF NET ASSETS BETWEEN FUNDS - CURRENT PERIOD

	Restricted funds 2024 £	Unrestricted funds 2024 £	Total funds 2024 £
Tangible fixed assets	415,650	2,555,892	2,971,542
Fixed asset investments	-	100	100
Current assets	5,274	977,914	983,188
Creditors due within one year	-	(279,560)	(279,560)
Creditors due in more than one year	-	(373,227)	(373,227)
Provisions for liabilities and charges	-	(546)	(546)
Total	420,924	2,880,573	3,301,497

ANALYSIS OF NET ASSETS BETWEEN FUNDS - PRIOR PERIOD

	<i>Restricted funds 2023 £</i>	<i>Unrestricted funds 2023 £</i>	<i>Total funds 2023 £</i>
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)
Total	425,850	2,578,880	3,004,730

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**NOTES TO THE FINANCIAL STATEMENTS
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20. RECONCILIATION OF NET MOVEMENT IN FUNDS TO NET CASH FLOW FROM OPERATING ACTIVITIES

	2024 £	2023 £
Net income/expenditure for the period (as per Statement of Financial Activities)	296,144	(221,281)
Adjustments for:		
Depreciation charges	170,694	197,701
Loss on the sale of fixed assets	9,291	6,641
Decrease/(increase) in debtors	(64,410)	302,067
Decrease in creditors	(69,670)	(109,442)
Gain on pension deficit	623	664
Net cash provided by operating activities	342,672	176,350

21. ANALYSIS OF CASH AND CASH EQUIVALENTS

	2024 £	2023 £
Cash in hand	720,308	522,648
Total cash and cash equivalents	720,308	522,648

22. ANALYSIS OF CHANGES IN NET DEBT

	At 1 April 2023 £	Cash flows £	Other non- cash changes £	At 31 March 2024 £
Cash at bank and in hand	522,648	197,660	-	720,308
Debt due within 1 year	(110,787)	111,135	(115,270)	(114,922)
Debt due after 1 year	(487,680)	-	115,270	(372,410)
Finance leases	(20,425)	9,804	-	(10,621)
	(96,244)	318,599	-	222,355

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23. 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.

24. PENSION COMMITMENTS

The pension cost charge represents contributions payable by the Charity and amounted to £81,064 (2023: £93,298). Contributions totalling £14,167 (2023: £15,412) 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, £546 (2023: £1,169) 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 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.

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24. PENSION COMMITMENTS (CONTINUED)

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 2024	31 March 2023	31 March 2022
546	1,169	1,833

RECONCILIATION OF OPENING AND CLOSING PROVISIONS

	Period Ending 31 March 2024	Period Ending 31 March 2023
	£	£
Provision at start of period	1,169	1,833
Unwinding of the discount factor (interest expense)	45	35
Deficit contribution paid	(668)	(668)
Remeasurements - impact of any change in assumptions	-	(31)
Remeasurements - amendments to the contribution schedule	-	-
Provision at end of period	546	1,169

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24. PENSION COMMITMENTS (CONTINUED)

INCOME AND EXPENDITURE IMPACT

	Period Ending 31 March 2024	Period Ending 31 March 2023
	£	£
Interest expense	45	35
Remeasurements – impact of any change in assumptions	-	(31)
Remeasurements – amendments to the contribution schedule	-	-
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 2024	31 March 2023	31 March 2022
	% per annum	% per annum	% per annum
Rate of discount	5.31	5.52	2.35

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.

25. OPERATING LEASE COMMITMENTS

At 31 March 2024 the Charity had commitments to make future minimum lease payments under non-cancellable operating leases as follows:

	2024	2023
	£	£
Not later than 1 year	60,540	85,192
Later than 1 year and not later than 5 years	35,898	49,292
	96,438	134,484

26. RELATED PARTY TRANSACTIONS

During the year the charity paid £14,167 (2023: £13,543) for rent and insurance to a Council Member.

During the year the charity received income of £nil (2023: £167) from a company in which a Council Member is also a director.

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27. GENERAL RESERVES

At 31 March 2024 there is a surplus on unrestricted free reserves of £324,581. Excluding the long term bank loans and the pension deficit, there is a surplus of £698,354.