At Kirkwood we believe that local people deserve to be cared for as well at the end of their lives as they were at the beginning. We strive each year to ensure that the services we provide for local people are the best available anywhere; Kirklees deserves nothing less.

But we know that there is more that we need to do to meet the needs of local people. Our charity was founded by those who believed that Kirkwood should be there for everyone in our community affected by any life limiting illness, every step of the way.

To meet this ambition, we need to double the number of people – to 3,000 - supported by Kirkwood each year; encouraging those who could benefit from Kirkwood’s care to reach out, and those who might support our work to do so, and to feel part of Kirkwood’s community.

Together with local people, we will not rest until we get there.

In the next ten years, we will:

- Double the number of people we support
- Continue to provide the best possible care for patients, carers and families
- Work with our local communities to highlight our work and improve understanding of end of life care
- Become the go-to charity for anyone affected by a life limiting illness

We are here to support anyone affected by a life limiting illness, every step of the way.
The best possible care
Spread the Word

Anyone affected by a life limiting illness should have access to the best possible care, whenever and wherever they need it, and Kirkwood are here to support local people, every step of the way. But we rely on the help of our community to reach out to anyone that might need our help. Whether you or someone you know has just been diagnosed with a life limiting illness, are looking for support to help improve your quality of life or needs expert, compassionate care at the end of life, we want to be the first place people turn to for help.

This year we started to share our ‘Spread the Word’ campaign with volunteers, employees and supporters in towns and villages across Kirklees. Our ambition is to make people feel proud about the care and support Kirkwood offers, and understand the important role their continued support plays in making it possible. We also want to show that Kirkwood’s care is delivered locally, in every town and village in Kirklees. You can find out more about our Spread the Word campaign at: www.kirkwoodhospice.co.uk

1. We are here for you when you need us
As soon as you are diagnosed with a life limiting illness, Kirkwood is here to offer you the right advice and support.

2. We focus on what matters to you
We help you to maintain and improve your quality of life so that you can focus on what is really important to you.

3. We provide the best care for you at the end of life
When supporting you at the very end of life, whether in the Hospice or at home, you will receive the best care from our team of experienced professionals.

4. We support families during illness and in bereavement
Our whole team support families and carers at any time, helping you and your family to find ways to cope with grief and move forward.

5. Helping others on their journey
We need the help of our community to make sure that everyone affected by a life limiting illness has access to the very best care and support. You can help in lots of ways.
Thanks to the generous support of the local community, we are able to provide care and support in every town and village across Kirklees.

Here's just a small snapshot of some of the ways Kirkwood supports people affected by any life limiting illness in your local area.*

*The data presented on this page relates to services provided in the 2018 calendar year.

- **1,138** calls handled from patients, families and professionals in the Colne Valley
- **408** individual or group counselling sessions attended by people from the Holme Valley
- **147** people from Dalton accessed one or more of Kirkwood’s services
- **95** people from Kirkburton accessed one or more of Kirkwood’s services
- **122** patients from Cleckheaton and the surrounding areas visited in their own homes by a Kirkwood Community Nurse
- **16** people from Newsome were admitted to our In-Patient Unit
- **17** people from Mirfield were admitted to our In-Patient Unit
- **433** home visits to patients in Batley and the surrounding areas
- **408** patients from Denby Dale visited in their own homes by a Kirkwood Community Nurse
- **95** people from Kirkburton accessed one or more of Kirkwood’s services
- **1,325** calls handled from patients, families and professionals in Dewsbury
- **40** patients from Denby Dale visited in their own homes by a Kirkwood Community Nurse
- **147** people from Dalton accessed one or more of Kirkwood’s services
In January 2019, Josie, from Waterloo spent a six week work placement at Kirkwood Hospice, working on the In-Patient Unit and in the Support & Therapy team. Shortly after, Josie’s grandma, Jane, was diagnosed with an aggressive form of cancer that couldn’t be treated.

Jane was struggling with pain and realised her daily life was being impacted, stopping her from enjoying the things she loved the most, including going out with friends and family, baking and dancing to her favourite music. That’s when Kirkwood stepped in, with Kirkwood’s Community Nurse Specialist Fiona visiting Jane at her home in Paddock.

Josie said: “It was concluded that Grandma would be treated through palliative care services to help her manage symptoms with this disease. “Although I had recently completed a placement with Kirkwood, it was initially alarming to hear that a hospice was involved with my grandma.

“Jane’s response to her medication and pain management has been so notable that she will be temporarily discharged from Kirkwood so she can continue to enjoy the things she loves. Josie added: “Fiona and Kirkwood have helped my grandma to get her life back. Me and my grandma are able to enjoy our time together again as a family.”
We focus on what matters to you

John Rogers and his wife, Margaret, live in Dalton and have been married for 62 years. John suffers from both heart and kidney conditions. Earlier this year he was referred to Kirkwood’s Braveheart programme to help manage his symptoms. Little did he realise, that he and his wife would become regulars in our Support & Therapy Centre.

By end of 2018, John hadn’t been feeling particularly well for 12 months. He was spending more and more time at home, eventually reaching the point where he only popped out on the odd occasion – when he really needed to.

In December 2018, John came down with what he thought was a bad chest infection and, after a course of antibiotics, was still feeling unwell and really struggling with his breathing.

Margaret was understandably worried. She booked an appointment for John to see his Doctor, who referred him to a Heart Specialist and Renal Nurse. They confirmed that John was suffering from both heart and kidney conditions.

John and his family have been well supported by the Heart Specialist and Renal Nurses, who have made numerous visits to their home. In fact, it was the Heart Specialist who first referred John to Kirkwood.

John said: “Initially, I wasn’t keen to attend because of the word ‘Hospice’, but after a conversation with my Kirkwood Nurse, Moyra, I felt more at ease – she told me the Hospice is for everyone. “I decided to give it a go. As a family, we all came down together; me, Margaret and our two daughters, Dawn and Beverly.”

Since their first visit, John and his wife have been back to Kirkwood every week, attending Drop-In together. The family has also been able to access other Kirkwood services.

Margaret said: “Dawn and I regularly attend the Share & Care group here. I’ve even had a massage and John has joined the Men’s Club! “It is such a lovely place to be, the staff are so friendly and they are there when you need them. I don’t know what we would do without Kirkwood now. It is comforting to know that professionals are around us to keep an eye on John. Every week it is somewhere safe for us to go.”

John added: “Kirkwood is a lifeline to me. Everyone is so friendly and chatty. They make us a cup of tea as soon as we arrive.”

John’s daughter, Dawn, said: “I used to think the word ‘Hospice’ was scary, but coming to Kirkwood is the opposite. You come here to live and have quality of life.”

“I used to think the word ‘Hospice’ was scary, but coming to Kirkwood is the opposite. You come here to live and have quality of life.”
57-year-old Teresa Pukacz from Fixby was diagnosed with Pancreatic Cancer in the Summer of 2018. Following her diagnosis, Teresa visited Kirkwood’s Support & Therapy Centre for Complimentary Therapy sessions and Creative Art classes as a way to manage her symptoms. When her health deteriorated she was admitted to Kirkwood’s In-Patient Unit, where her family were able to come together and create some very special memories.

Following Teresa’s admission to Kirkwood, the Pukacz family were overwhelmed by the support from Kirkwood and the opportunities presented to make family life as normal as possible. From ordering pizza and Chinese takeaway to eating ice cream and enjoying the beautiful Hospice gardens, Kirkwood became a “home from home” for the Pukacz family.

On her second day at Kirkwood, Teresa’s family arranged a party for her; where her daughters Kasia, Koletka and Irenka organised a special surprise for their Mum.

Kasia said “Mum knows a lot of people, so we messaged everyone she knew and asked them to send us a photo or video of their best memories together.

“We were so overwhelmed with the amount of people who sent us their memories. We all sat round as a family and had a toast with Mum’s favourite champagne, along with strawberries and nibbles, and looked through everything that had been sent to us.”

As a lover of gardening, the beautiful surroundings at Kirkwood also had a positive effect on Teresa during her stay.

Kasia said: “Mum loves gardening so much. We were so happy that she had a room with her own terrace so she could spend time outside in the fresh air while smelling the flowers around her. It’s perfect.

“People shouldn’t be daunted by the word Hospice; it really is amazingly homely here.”

Music is a big part of family life for the Pukaczs; Teresa has enjoyed listening to her daughter, Kasia, play the piano since she was a young girl. So when the Kirkwood team found a piano for them to play during their stay, the family were delighted.

After Teresa’s condition began to deteriorate, she was unable to move from her room to hear Kasia play. So the Kirkwood team arranged for the piano to be taken to Teresa’s room.

“Mum hadn’t woken up in a while, so I decided to play one of her favourite pieces; ‘The Blue Danube Waltz’. She always loved to dance so she woke up swaying her knees to the music and asked for a kiss from my Dad. Even when Mum wasn’t awake, I know she could hear.”

“People shouldn’t be daunted by the word Hospice; it really is amazingly homely here.”
We support families during illness and in bereavement

“Kirkwood has helped me and my son more than they will ever know.”

Tracy Butters was diagnosed with cancer in 2017 and was cared for by Kirkwood in 2018 before her death. Tracy’s husband Allan, who works for the University of Huddersfield, recently shared his story with us, touching on the care and compassion offered not only to his wife, but to himself and his young son. The following is told in Allan’s own words.

*Tracy and I were together 30 years and married for 20. It’s been 30 years, but the time has gone so fast. I always knew exactly how she felt, I only had to look at her. We spent all our time together, even working together. And we enjoyed it. We needed each other every day.

*Tracy was diagnosed with cancer in 2017. Shortly afterward, she was told her condition had become terminal. In November 2017, she was given 12-18 months to live. Sadly, she died in September 2018.

*Tracy spent her last days at Kirkwood and from the moment she arrived she told me she was happy. I couldn’t have asked for anything more from the Hospice, she was in the best place she possibly could be.

“I don’t have one bad memory of Tracy being at Kirkwood. Even though it was the worst time of my life, they made it as bearable as it could be. Everyone deserves the dignity of being treated like that, everyone deserves what Kirkwood did for Tracy and our family. Tracy knew it was a privilege to be at Kirkwood, she was so happy there. She died with peace and happiness and that’s all down to Kirkwood.

“The care Tracy received was incredible, even down to the way her belongings were passed back to us after she’d died. They were nicely folded and put in beautiful white bags. Even her rings were placed in a little blue drawstring bag. It was amazing, I was so touched.

“They were always there to help, no matter what. They left the window open in her room even when it was cold, because they knew she liked the fresh air on her face. It really is a magical place.

“Kirkwood has helped me and my son more than they will ever know. We’ve both accessed counselling, and the support they have given him has enabled him to talk comfortably and openly about his mum, which is exactly what she would’ve wanted.”
Helping other people on their journey

For many, supporting Kirkwood in memory of a loved one is an important way to pay tribute to their life. It takes thousands of people from across our community to ensure we can continue to care for anyone affected by life limiting illnesses, every step of the way. These are just a few...

Doing it for Dionne

In September, Carol, Mandy, Rowen, Lindsay, Bob and Trish competed in Kirkwood’s It’s A Knockout event in memory of Dionne Coburn. Mandy Lindley, Dionne’s Sister, said: “Dionne was a very active person so that’s why we wanted to take part. Dionne was also an avid fundraiser so we’re taking over in her memory.

“She was a very determined and positive person. She even organised the Zip Wire fundraising event whilst she was staying in the Hospice. She made a joke out of everything, and that’s why we’re doing this.

Walkers lace up for loved ones

The Midnight Memory Walk was special for the Woodhouse family, as they walked in memory of Linda Woodhouse. Linda’s husband, John, said: “Linda passed away at Kirkwood this year and we’re here tonight to give something back. Linda was so well cared for at Kirkwood. She felt comfortable there.”

Derek lights up Christmas

Each year, Derek Highe transforms his home in Mirfield into a spectacular Winter Wonderland. This year, with the help of the local community, Derek raised a staggering £4,880 for Kirkwood, taking his total raised to over £50,000.

Sun shines on garden party

Mirfield couple Darren and Jackie Brooke hosted a summer garden party to remember in September. With the help of Peter Morgan, whose wife Jackie was cared for by Kirkwood, the couple raised a staggering £7,060 for the Jackie Morgan Tribute Fund.

Community club together

Members of Huddersfield’s Antilites Club invited the whole community to a fundraising event for Kirkwood last Autumn, raising £1,244! The Club Committee said: “We know that the Hospice couldn’t keep going without the support of the community, so this really is a local, community cause. We are all one and we are all friends of the Hospice.”
Kirkwood’s care is delivered in every town and village across Kirklees. Whether on our In-Patient Unit, in our Support & Therapy Centre or in people’s own homes through our Community Palliative Care Team, demand for our services continue to grow year on year. Here we offer a snapshot of how Kirkwood is helping to support patients and families in Kirklees. We also highlight how the generosity of our local community is helping to provide this care.

In 2018-19, a total of 2,165 patients, carers and families living in Kirklees accessed one or more of Kirkwood’s services.

- 12,674 calls were made to our 24/7 Specialist Advice Line
- 596 patients and carers visited our Support & Therapy Department
- 185 carers accessed one of more of our services
- 1,149 patients supported in their own homes by our Community Nursing Team

In 2018-19 over 22,000 people made a contribution to make sure that everyone affected by a life limiting condition has access to the very best care and support.

The money we have spent caring for patients, carers and families has risen by 16% in the past two years

<table>
<thead>
<tr>
<th>Year</th>
<th>Amount</th>
</tr>
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<tr>
<td>2016-17</td>
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<td>2017-18</td>
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<tr>
<td>2018-19</td>
<td>£4,999,778</td>
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</tbody>
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In 2018-19 a total of 2,165 patients, carers and families living in Kirklees accessed one or more of Kirkwood’s services.

Around 1/3 of our charitable expenditure relies on the generosity individuals who remembered Kirkwood in their wills by leaving a legacy.

- £3.1 million: the net amount raised from donations, fundraising, shops and our lottery in 2018-19
- £1,326,108: in the year these legacies totalled
Charity Reference and Administrative Details

Charity registration number:
512987

Company registration number:
1645888

Trustees
Mr B F Ainsworth OBE
Mrs C Black
Mrs J Brady
Miss L A Chapman
Mrs J Davies
Mr D N Harling
Mrs K S Hinchliff
Mrs C M Quinn
Mr P R Sands
Mr P L Scovell

Life President
Mr D N Stocks

Chairman
Mr B F Ainsworth OBE

Company Secretary and Registered Office
Mrs P E Wade DChA FMAAT
21 Albany Road
Dalton
Huddersfield
HD5 9UY

Chief Executive
Mr M Crowther BA(Hons) PgDip

Director of Finance and Resources
Mrs P E Wade DChA FMAAT

Director of Clinical Services
Mrs S Shaw RN Dip Adult Nursing
BSc(Hons) MSc

Medical Director
Dr S Oxberry MBChB BSc (Hons) FRCP PhD

Director of Income Generation & Marketing
Mr D H Batty BA (Hons), MinstF

Auditor
Wheawill & Sudworth Limited
Chartered Accountants
35 Westgate
Huddersfield
HD1 1PA

Solicitors
Schofield Sweeney
30 Market Street
Huddersfield
HD1 2HG

Honorary Chartered Surveyors
Bramleys
14 St George’s Square
Huddersfield
HD1 1JF

Principal Bankers
Lloyds TSB Bank plc
1 Westgate
Huddersfield
HD1 2DN

Investment Managers
Investec Wealth & Investment Limited
Quayside House
Canal Wharf
Leeds
LS11 5PU

“It’s done me the world of good having Gerry to visit. I am gobsmacked with it all. I really am very happy.”

Colin Barton, with his wife Carol and Gerry the cat
Statement from the Chair of Trustees

It's my pleasure to present this year's Kirkwood Annual Report. 2018-19 has been my first full year as Chair of Trustees at Kirkwood, a position which I am honoured and privileged to hold.

I am enormously proud of the reputation Kirkwood has in our local towns and communities, and the Board of Trustees and myself take the responsibility of protecting that reputation. Kirkwood continues to deliver the best possible care for all those in Kirklees affected by any life limiting illness, together with continuing to look to the future to ensure we adapt to the evolving needs of that same community.

This year has seen our Charity begin to deliver on ambitious plans aimed at raising awareness regarding the role that modern hospices can play in caring for local people at all stages of their illness. That said, our work never stops and we are determined to make sure that anyone affected by a life limiting illness is aware of what Kirkwood can offer in supporting them to maintain and improve their quality of life. Looking to the future, when/if we are successful, we believe that we will be able to support more people than ever before, wherever and whenever they need it.

We aim to deliver this by developing meaningful relationships with local people and arming them with greater knowledge about the many ways in which Kirkwood can and do support people affected by a life limiting illness. This commenced this year and included holding events in various local communities within Kirklees, an important first step of our plan which will continue in the months and years ahead.

Looking in detail at 2018/19, Kirkwood has provided care and support to more people than ever this year. The quality of the care that is provided remains our number one priority and I am happy to say that the experience of people who have used our services has been extremely positive. There is clear evidence that we are making a real difference to the quality of local people’s lives.

As has been the case since well before we began providing services in 1987, this is only possible because of generous contributions and support from our many donors and volunteers. The support of many truly amazing people - people like yourselves - who give their time, energy and financial support is what defines Kirkwood. Local people remain passionate about the way people are cared for at the end of their lives and we simply could not do what we do without your unwavering help and support.

This year, more people have donated, more people have taken part in events and more people have volunteered their time. Contributions come in all shapes and sizes and they are always valued and greatly appreciated. As always, we owe a lot to those individuals who chose to leave Kirkwood a gift in their will. These donations are critical to Kirkwood, funding around one third of everything we spend on patients and their families.

I would like to thank a number of local organisations that over the year have made substantial contributions to Kirkwood. These include:

- The Mayor of Kirklees, Gwen Lowe, who raised an amazing £14,500 for Kirkwood in her mayoral year
- The Morrisons Foundation who donated over £16,000 to provide for an upgrade to the mortuary facility at the main site in Dalton
- The 12 families who chose to set up new Tribute Funds in memory of a loved one. This took the total number of these funds to over 60 (collectively these funds have raised over £400,000 for Kirkwood since they were created)
- The Asda Foundation who helped the purchase of pressure relieving mattresses by awarding a grant of nearly £12,000
- Kirkwood’s six community support groups across Kirklees who raised a total of £20,222 in 2018-19

After another very successful year, I must also give my thanks to all of our Trustees for their generous gift of time and effort. Three of Kirkwood’s trustees stepped down this year. Ken Dunning and Susan Galvin were trustees for six and nine years respectively. They were both very active within the board and have contributed a lot during a period of significant change for the charity. Ken continues as a Director of Kirkwood Hospice Enterprises Ltd. We thank them both for their efforts on the Council and their continuing support and wish them well for the future.

Last but certainly not least, my thanks go to John Denham, who has contributed a huge amount over a period of 14 years as a trustee, including three years as Chair of the Board of Trustees. On behalf of the Board of Trustees, I would like to thank John for his commitment during this time. John has contributed significantly to the governance of the charity, particularly the development of our risk management framework, while always exhibiting strong leadership and a wise ear in his many years on the board. John is a great supporter of Kirkwood and has many friends connected with the organisation. We know he is proud of his involvement with Kirkwood. He leaves the charity with the very best wishes of everyone involved.

Along with my fellow Trustees, I am excited about Kirkwood’s future and the difference we will make for local people. We look forward to working with our Chief Executive, Michael, and his whole team in ensuring Kirkwood continues to succeed in the future.

Bernard Ainsworth OBE
Chair of Trustees
Kirkwood Hospice
September 2019
Statement from the Chief Executive

I am proud to have led Kirkwood for another year as we continue to support more people affected by life limiting illness in our local communities, every step of the way.

Kirkwood is more than just a building, its employees or the people we care for; it is a community of people from every part of the local area that believe everyone deserves to be cared for as well as at the end of their lives as they were at the start. We are a ‘Movement’ which is as determined as ever to ensure that Kirkwood is here for everyone who needs our support in the future.

In the last year we have been hard at work ‘spreading the word’ about Kirkwood in our local communities so that those who could benefit from Kirkwood’s care reach out to us, and those who might support our work are inspired to do so.

Kirkwood plays a leading role in ensuring that the very best care is available to people in Kirklees and we have worked hard with our partners and in our community to become recognised as the expert in palliative and end of life care. But we cannot rest on our laurels; we owe it to everyone that has been part of this movement since the early 1980s – from David Stocks, who first appealed to local people to create a hospice in Kirklees, to the tens of thousands of people who support us each year – to carry on their legacy and continue until everyone who needs our care and support is able to get it.

In the 1980s there were over thirty groups of people from every corner of Kirklees who campaigned, created awareness and raised funds in their local areas – all so that dream of better care for local people with life limiting illnesses could be realised. All so that Hospice care could be available to anyone in Kirklees who needed it.

I don’t believe that those people had a magic number in mind. I don’t believe that they thought that ‘when care is available to a thousand people, we will have done enough’. I believe that those people, living in every town and village in Kirklees, wanted care to be available for anyone who needed it.

Each year we provide the very best care to more and more people, but our job is not done. We believe there are so many more local people that could benefit from what Kirkwood has to offer, right now.

Our challenge will grow further in the coming years, with a sustained increase in the number of deaths each year expected. With people living longer, we are already seeing patients with more complex conditions and multiple illnesses, including Dementia.

We have set ambitious targets to develop our services in the coming years. We want to double the number of people we can care for, while maintaining the high standards of care that Kirkwood is known for. We also want to be the ‘go-to’ charity in Kirklees when you or someone you care about is affected by an illness for which there is no cure. This will not be achieved without the help of local people.

We know that the key to achieving our ambitions is increasing local knowledge about what Kirkwood is and the role we can play in supporting anyone affected by any life limiting illness – whenever they reach out to us. We believe that if our communities better understand how we can help, more people will seek our help and be inspired to help us in return.

This year we began to re-engage with the communities that campaigned for a local Hospice in the 1980s, sharing our new campaign: ‘Spread the Word’. Our aim is to make local people feel proud about their continued support, which makes the Kirkwood we have today possible. We also want to show them that Kirkwood care is delivered locally, in every town and on every street in Kirklees.

The meetings have built excitement about the plans we have for Kirkwood in the future. We will hold many more events in communities across Kirklees next year as we continue to strengthen people’s understanding of what Kirkwood is and what our ambitions are.

One of the messages that have been most powerful at our ‘Spread the Word’ events is that Kirkwood is the only charity that provides Specialist Palliative Care in people’s homes in Kirklees. Many people believe that it is other charities which do this.

Another message we are eager to share is that Kirkwood is not the last place that people should go at the end of their life, but the first charity they should seek help from when the quality of their life is affected by an incurable illness.

With the help of Kirkwood’s many supporters, partners, employees and volunteers we have achieved a huge amount this year. They have also embraced the ‘Spread the Word’ campaign, resulting in a renewed energy and passion to help Kirkwood achieve its ambitious aims. I want to take this opportunity to thank each and every one of them for their care, compassion and expertise. The Kirkwood movement is healthy in 2019 because of their commitment and hard work, which ensures that more and more local people have access to the very best care and support available.

Michael Crowther
Chief Executive
Kirkwood Hospice
September 2019
Trustees’ Annual Report
Including Directors’ Report and Strategic Report (Year Ended 31 March 2019)

The Trustees present their report and the audited financial statements of the charity for the year ended 31 March 2019. The trustees have adopted the provisions of the Statement of Recommended Practice (SORP) “Accounting and Reporting by Charities” (FRS 102) in preparing the annual report and financial statements of the charity.

Kirkwood Hospice is a registered charity, number 512987 and a company limited by guarantee in England, number 1645888. The organisation was incorporated as a company limited by guarantee on 23 June 1982 and registered as a charity on 3 August 1982. The company was established under a Memorandum of Association which established the objects and powers of the charitable company and is governed under its Articles of Association. In the event of the company being wound up members are required to contribute an amount not exceeding £10.

Structure, governance and management

The governing body of Kirkwood Hospice is the Council of Management whose members are elected by the Company’s Members. As at 31 March 2019, the Council of Management comprised ten Trustee members who meet 4 times per annum. There are committees dealing with Clinical Governance, Finance and Resources, Income Generation and Marketing, Nominations, Risk & Audit, Remuneration and other specific referrals from Council of Management. The salary of the Chief Executive is determined by the Trustees with advice from the Remuneration Committee on the Chief Executive appointment and by periodic reviews conducted by the Chair of Trustees. The salaries of the other members of the Executive Management Team are determined by the Chief Executive.

The directors of the charitable company are its Trustees for the purposes of charity law. The Trustees who have served during the year were as follows:

- Mr B F Ainsworth OBE
- Mrs C Black
- Mrs J Brady
- Miss L A Chapman
- Mrs J Davies - Appointed 14 December 2018
- Mr J C Denham - Resigned 8 October 2018
- Mr K Dunning - Resigned 3 June 2018
- Mrs S Galvin - Resigned 8 June 2018
- Mr D N Harling
- Mrs K S Hinchliff
- Mrs C M Quinn - Appointed 14 December 2018
- Mr P R Sands
- Mr P L Scovell - Appointed 14 December 2018

Members retiring by rotation in accordance with the Articles of Association are Miss L A Chapman, Mrs J Brady and Mr B F Ainsworth OBE who are retiring by rotation under Article 24.2 of the Articles of Association and Mrs J Davies, Mr P L Scovell and Mrs C M Quinn who are retiring under Article 25.

The charity holds an indemnity insurance policy on behalf of its trustees, details of the cost is included in note 10 to the financial statements.

“Nothing’s too much trouble at Kirkwood!”
Pat Armitage
Trustee responsibilities

The Council Members (who are also directors of Kirkwood Hospice for the purposes of company law) are responsible for preparing the Trustees’ Annual Report, including the Strategic Report, and the financial statements in accordance with applicable law and United Kingdom Accounting Standards (United Kingdom Generally Accepted Accounting Practice).

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

- select suitable accounting policies and then apply them consistently;
- observe the methods and principles in the Charities SORP 2015 (FRS 102);
- make judgements and estimates that are reasonable and prudent;
- state whether applicable UK Accounting Standards have been followed, subject to any material departures disclosed and explained in the financial statements;
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charitable company will continue in operation.

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

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

Objects and mission statement

The objects for which Kirkwood Hospice (also referred to as Kirkwood in this report) is established are to promote the relief of sickness by such charitable means as are considered appropriate; the governing documents define those charitable means in furtherance of those aims. There have been no material changes to these objectives since the last Annual Report.

Kirkwood provides specialist care free of charge to adults in Kirklees with advanced progressive illnesses at any time from diagnosis to the end of life, respecting their individual needs and wishes. Care and support is also provided to their family members, friends and carers, both during the illness and after death. Through education, training and partnership with others, the hospice improves care for everyone affected by a life limiting illness.

Public benefit and eligibility criteria

The Charity Commission’s general guidance on public benefit has been used for reference when compiling this report and in planning future developments and activities.

Most patients use a combination of Kirkwood services as their illness progresses and draw on the specialist skills of Kirkwood’s multi-professional team who work in collaboration with colleagues in all care settings to provide continuity of care. Kirkwood also provides programmes of education to other professionals who are caring for people with life limiting illnesses, in this way we seek to improve the quality of care experienced by all people who have palliative care needs.

Our services are continuously monitored, evaluated and reviewed to meet the changing needs of patients and their families. All our services are delivered taking into account all current national guidance and quality statements and standards.

Kirkwood is regulated by the Care Quality Commission. An inspection was carried out in September 2016 and the rating awarded was ‘Good’ overall with an ‘Outstanding’ rating for Care. More information is available on the Care Quality Commission website (http://www.cqc.org.uk/location/1-115011048). This rating is an endorsement of the quality of care that Kirkwood continues to provide.

Overview of impact for beneficiaries

Kirkwood exists to support anyone affected by any life limiting illness, every step of the way. A total of 2,165 people benefited from the services we deliver in the period reported. This total has been consolidated after a period of significant growth.

Kirkwood is here to offer the right advice and support for anyone affected by a life limiting illness at any point from diagnosis. Our 24/7 Specialist Advice Line Service handled 12,674 calls in the last year and 1,531 patients accessed some form of care and support from one or more of the services described within this report. More information is available on our website (www.kirkwood.org.uk).
more of our services, including Kirkwood’s Support & Therapy Centre and the Community Specialist Palliative Care Team.

Kirkwood helps people to maintain and improve their quality of life so that they can focus on what is really important to them. We support patients, their families and those that care about them. A total of 2,066 people were supported to achieve the best possible quality of life while being affected by a life limiting illness.

Kirkwood provides the best care for people at the end of their lives. In this twelve-month period Kirkwood cared for a total of 767 local people that died. Our team of experienced professionals provide the best care for people at the very end of their lives, meeting their individual needs as far as possible and helping the vast majority (94%) to avoid dying in hospital.

Services are provided to support patients’ family members and carers through the illness and in bereavement. We help these people with their emotional and psychological needs and support them in finding ways to adjust to their bereavement and move forward in life. 535 individuals accessed this support through the Kirkwood Family & Spiritual Care Team.

For many people, supporting Kirkwood following the death of a loved one is an important way to pay tribute to their life and honour their memory. This support comes in many forms, and from all parts of our community. In this period, over 22,000 local people made a contribution to make sure that everyone affected by a life limiting condition has access to the very best care and support.

The experience of our service users

At Kirkwood we use an online questionnaire to capture feedback from service users. During the reporting period 302 surveys were completed, with 97% of people rating the quality of care received as outstanding or excellent.

Individual services providing public benefit

Kirkwood 24/7 Specialist Palliative Care Advice Line Service: Health Care professionals, patients and their carers contact Kirkwood for expert advice at any time of the day or night, seven days a week. The aim of this service is to enable more patients to be supported and, as their illness progresses, to have their needs met as soon and as fully as possible. A total of 12,674 calls were handled by the advice line in this period, including 1,123 calls outside office hours. This is an 8% increase in calls when compared to the previous year.

Kirkwood Support and Therapy services: these continue to be provided at Kirkwood and at the Rosewood Centre in Dewsbury. In the year, a total of 596 people accessed services through the Kirkwood Support and Therapy Centre at Dalton. 142 people accessed day services and there were 1,012 day care attendances – an increase of 30% on the previous year. 297 people accessed Drop-In at Kirkwood for the first time and there were 2,276 follow-up attendances – an increase of 13%. 125 people accessed services at the Rosewood Centre in Dewsbury, where 1,936 attendances were accommodated.

“You showed my wife love, compassion and dignity to the end of her life and provided her with the highest quality of care.”

Patient’s Relative
Following assessment, patients and carers access a range of services that have been designed to meet their individual needs:

- Complementary therapies are available to all patients and carers that use the Support and Therapy Centre
- The ‘Braveheart’ programme for patients with chronic heart failure
- The ‘Breathe Better’ programme for patients with chronic respiratory illnesses
- ‘Getting on and Living’ is a programme for patients affected by Neurological conditions
- ‘Share and Care’ group supports people caring for someone with a life limiting illness
- ‘Keeping Active at Kirkwood’ is a gentle exercise class which helps people to improve their quality of life and maintain independence

Kirkwood Community Palliative Care Team: A team of nine Kirkwood Clinical Nurse Specialists provide advice on all aspects of pain and symptom control and provide emotional and psychological support for patients at home and in care homes. Kirkwood Clinical Nurse Specialists also provide advice to health care professionals and deliver education on all aspects of palliative care. During the period, the team supported 1,149 patients. 3,189 home visits (an increase of 8% on the previous year) and 12,263 phone contacts (up 7%) were made to patients, families and other professionals.

Kirkwood In-Patient Care: for patients requiring care and support to address complex problems associated with life limiting illness. During the accounting period there were 368 admissions to the In-Patient Unit. Patients were discharged on 116 occasions, and 241 died at the Hospice. There were 99 admissions on an evening or a weekend, which ensured that these patients were not admitted to hospital.

Kirkwood Family & Spiritual Care Team: this team provides psychological support and counselling for patients and families during illness and in bereavement. The team’s work includes support for children affected by the death or life limiting illness of a close family member. The total number of people who accessed the services during the reporting period was 535 (up 9% on the previous year). 2,147 counselling sessions for bereaved people took place in the period. The team also carried out 953 pre-bereavement contacts within Kirkwood services.

Education and training: palliative and end of life care training is provided for other health and social care agencies and also for visiting students. Specific programmes have been developed for professionals who work for Locala Community Partnerships CIC, Calderdale and Huddersfield NHS Foundation Trust, alongside a number of GP Practices. These programmes aim to improve the delivery of palliative and end of life care in all settings. A total of 197 professionals from other organisations attended training and education provided by Kirkwood during the period.

Education is provided for all Kirkwood employees and volunteers, including Trustees.

All aspects of Kirkwood are underpinned by the various support service teams and volunteers who provide help at the main Hospice site in Dalton, in the Fundraising Department and in Kirkwood shops. 899 volunteers contributed 24,826 hours of their time at the Dalton site during the accounting year and 91,812 hours at Kirkwood’s shops.

Planning consultation and communication

The Executive Management Team comprises the Chief Executive, Director of Finance and Resources, the Director of Clinical Services, the Medical Director and the Director of Income Generation and Marketing. The Executive Team meet weekly and work within overall strategic objectives and policy guidelines determined by the Trustees. The Chair of the Trustees meets regularly with the Chief Executive and the Executive Management Team attend Council and Committee meetings.

All management initiatives involve employees and volunteers in forward planning and there are regular meetings involving the multi-disciplinary team, heads of departments and clinical teams. Employee views are sought when operational developments and changes to terms and conditions of employment are contemplated. Employees contribute to and regularly receive internal communications and other memoranda to inform them of developments and changes.

The service user forum (‘Kirkwood Future Forum’) continues to meet four times a year. Any patient or carer who has accessed any Kirkwood service is welcome to attend. The aim of the forum is to gain the views of those who have used our services and to share ideas for future development. Those attending have provided valuable comments and feedback on a variety of initiatives and quality improvement plans.

Support groups are branches who undertake their own fundraising initiatives in support of Kirkwood. They have their own committees whose accounts are incorporated into Kirkwood’s annual accounts.

The Hospice based volunteers are co-ordinated by an employee responsible to the Director of Finance and Resources, who ensures a framework of support and training similar to that for employees.

Equal opportunities

Kirkwood is committed to ensuring equality of opportunity for its employees. Kirkwood believes that selection and promotion should be based solely on ability to meet the requirements of the post. The aim is to provide equal access to jobs and training, and to ensure that all employees enjoy fully the benefits of working for the organisation. In particular, Kirkwood does not discriminate on the grounds of age, disability, gender reassignment, marriage and civil partnership, pregnancy and maternity, race, sex, religion or belief.

Special acknowledgement

The Trustees wish to record their sincere appreciation of Kirkwood’s highly committed employees and thank the large number of volunteers who generously give their time, skills and expertise.

The Trustees would also like to express their gratitude to the many Kirkwood supporters, who have supported the charity through donations, fundraising and bequests during the year.

All new employees and volunteers who have joined the team are warmly welcomed. Our sincere thanks go to those who have left in the past year for the contribution they have made to improve care for all those who rely on Kirkwood’s services. In particular, we
acknowledge the significant contribution made by Sisters Elaine Gill and Noreen Williams, who retired in 2018 after over 19 and 14 years respectively, of caring for Kirkwood patients. Both Elaine and Noreen commenced work at Kirkwood as Nurses on our In-Patient Unit, and both developed within the charity to become Sisters. Elaine went on to lead the development of Kirkwood’s Support and Therapy services. They were both strong advocates for our patients and families, perfectly embodying the Kirkwood Ethos.

Kirkwood has benefited from help received from various organisations during the last year, including Local GPs, our Local Clinical Commissioning Groups (CCGs), Kirklees Metropolitan Council, Locala Community Partnerships CIC, Calderdale and Huddersfield NHS Foundation Trust, The Mid Yorkshire Hospitals NHS Trust, Age UK Calderdale and Kirklees, Carers Count, Yorkshire Ambulance Service NH-S Trust and South West Yorkshire Partnership NHS Foundation Trust.

The Trustees are very grateful for the developing relationship with the University of Huddersfield and for their generosity and partnership, including allowing access to their facilities to accommodate some of our key events during the year. Our thanks are also due to all of the local businesses and Charitable Trusts who have generously helped to fund a whole range of facilities and services for patients and their families. The Trustees are also grateful for the generous treatment received from many of their professional advisers.

The Trustees wish to express their appreciation of the contributions made by Mr John Denham during his time as a Trustee of Kirkwood. John made a huge difference to the charity during 14 years of valuable commitment to the Kirkwood Board of Trustees. He is credited for the significant development and growth of the organisation in that time. John spent four years as chair, and even when not in the chair he was always an active Trustee who sought to help the organisation improve and make the most of its relationships in our local community.

Review of activities

The Consolidated Statement of Financial Activities for the accounting period is detailed on page 31 of the financial statements. A summary of the financial results and the work of Kirkwood is set out below.

Summary of financial performance

The Trustees continue to monitor financial performance against budget as the primary key performance indicator.

- Income for the accounting period increased from £7,015,621 for the year to 31 March 2018 to £7,183,840 for the year to 31 March 2019.
- Expenditure for the accounting period increased from £7,240,728 for the year to 31 March 2018 to £7,424,584 for the year to 31 March 2019.
- The deficit for the accounting period before taking into account gains and losses on investments amounted to £240,744 compared to last year’s deficit of £225,107.
- After taking account the movement in year of unrealised gains on investments of £229,592 the deficit is £11,152 compared to last year’s deficit of £233,158. Further details are on page 61.

The overall financial position as at the year ended 31 March 2019 was a deficit of £11,152. Despite operating within our budgeted expenditure limits, this deficit was realised despite lower than planned income. It should be noted that the charity had planned a deficit budget for the year against which the outturn position was significantly favourable.

Income generation

Total voluntary income was higher than budgeted expectations. This is due to an exceptional year of higher than expected legacy income. Donations and gifts represent a significant proportion of income, and the involvement of individual and corporate donors, charitable grant making trusts and supporters is greatly valued. Also, the generosity of those individuals who remembered Kirkwood in their wills by leaving a legacy to the charity is recognised. In the year these legacies totalled £1,326,108.

Resources expended

Expenditure on employee salaries and fees remained within budgeted limits. Resources expended in total increased by £183,856 (2.5%), the cost of the various services is shown at Note 6 to the Accounts.

Changes, developments and achievements during the year

At Kirkwood, we put our patients and those that care for them at the centre of everything we do. We know that when facing a life limiting illness, every person’s needs are personal to them. We continue to work hard to understand each patient as an individual so that the care we deliver is truly person-centred and compassionate.

This year, Kirkwood has launched an ambitious vision for the future. With renewed energy and focus we are staying true to the founding spirit of the charity and refusing to rest until we reach everyone who needs us, across Kirklees now and in the future.

This vision helped us to launch an ambitious new campaign, which we have called ‘Spread the Word’. Its aim is to highlight the impact of our services and challenge the myths of hospice care. As part of the campaign, we are using powerful stories which illustrate how Kirkwood supports people affected by life limiting illnesses, every step of the way. More than ever, we are using personal stories to connect with local people and shine a light on the difference we make. These stories show Kirkwood is a true local success story which, for over 30 years, has provided the very best care to local people that are affected by life limiting illnesses. They also show that the care we provide is only made possible because of the outstanding support and generosity of local people.

If we are successful with our ‘Spread the Word’ campaign more people who can benefit from our services will reach out to Kirkwood for the help and support they need. In addition local people will be inspired and motivated to support us, helping to ensure that Kirkwood services are here for everyone that needs them.

One myth we know we need to challenge is that Kirkwood is simply a building, and that all our work takes place in one location. This year we have taken our stories out into the community and shared the impact of Kirkwood with hundreds of people in towns and villages across Kirklees, focussing on the work we do to support local people in their community.

While the people we have talked to already knew something about Kirkwood, the full range of services and support available was still a surprise to many – even our closest supporters. We were proud to let people know that because of their support, Kirkwood is the only charity delivering specialist palliative care to people in their own homes in Kirklees. We know people often believe this is Macmillan.
We were also able to help people understand that someone’s first step into Kirkwood’s care does not need to come through a GP or specialist. Many were surprised to learn that we are here for everyone affected by any life limiting illness in our community, and that first step can be taken with a call to our 24/7 Specialist Advice Line, or simply by dropping in to our main site in Dalton.

While we set ambitious goals for the future of Kirkwood during the year, our primary goal was to ensure we continued to meet the needs of our patients and those important to them, and that the quality of care that we provide is the best it can be.

Kirkwood has prioritised a number of improvements to our services all of which have enhanced the quality of care we provide.

A project to introduce an electronic patient record has progressed over the last 12 months with all clinical departments contributing to this development. The information that is recorded about our patients is more comprehensive than ever before and is available in real time to any professional involved in their care. This means that the care we provide is effective and the recording and sharing of information takes less time, which results in our Doctors, Nurses and other professionals spending more time focussing on what matters to people.

During 2018-19 Kirkwood has developed a new Care Co-ordination service. Palliative and end of life care services are often provided by many different professionals from a variety of organisations, and these services do not always work together as well as they should for the individual and their family. Kirkwood’s new service, led by a Social Work team leader, is responsible for co-ordinating care and support to help people in achieving their preferences and choices at the end of life wherever possible. The service allows patients with a specialist palliative care need, their families and carers, to access a single point of contact in order to receive advice and support on a wide range of issues.

This year we took the step to widen access to our Community Specialist Nurses by expanding to provide services to seven days a week. The Kirkwood Community Palliative Care Team provide specialist support to around 1,200 families every year. The distress of uncontrolled pain and symptoms cannot wait for ‘opening hours’. In line with national guidance, this development to our services was necessary to further improve the way we respond to the needs of our patients and how we meet these needs effectively.

We continue to develop services that support people to maintain and improve their quality of life, helping people to focus on what matters to them. The Kirkwood Support and Therapy Service has introduced further self-management programmes that are targeted at the needs of people with specific conditions. The ‘Getting on and Living’ programme has commenced for people affected by a range of neurological conditions including Motor Neurone Disease, Multiple Sclerosis and Parkinson’s. Patients are invited to attend a series of 12 weekly sessions of focussed advice, information and support to assist them in maintaining their independence and getting the most out of life.

All Kirkwood services have continued to embed the ‘Enabling Quality of Life’ ethos; all members of our clinical team work collaboratively with the patient, their relatives and carers to support them to achieve their personal goals and priorities. In this way, Kirkwood services continue
to be patient centred and compassionate. The difference it makes to people is tangible and has created many stories that we can use to demonstrate the impact of what we do.

Kirkwood’s physical environment and the work of our support services make a huge contribution to the quality of life of patients and families accessing our services. In 2018, the garden at Kirkwood’s Dalton site was judged by the Royal Horticultural Society and received a ‘Gardens in Bloom’ Gold Award. The RHS judges were impressed with the overall impression that the garden has, the natural environment that has been created and the benefit it has for Kirkwood’s patients. Another important factor was how the garden is used year round, both for patient centred activities and in engagement of the wider community.

The Gold Award was a great achievement and is down to the hard work and dedication of our Support Services team and the team of volunteers who work tirelessly every week to nurture the Kirkwood environment.

The introduction of a high quality chef to the Kirkwood team has helped to build on our capability to meet all aspects of patient care; ranging from our capability to deliver food for our more complex patients, to providing more products to service user coffee mornings and other events, further enhancing Kirkwood’s reputation for providing high quality catering provision.

**Strategy Diagram plus high level measures**

See Figure 1. Kirkwood Strategy below.

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**Kirkwood Strategic Aims**

- **Double the number of people supported by Kirkwood at the very end of their lives**
- **The ‘go-to’ charity that supports people as they approach the end of their lives**
- **Increase giving from people and businesses in Kirklees to meet future demand**
- **Increase funding from NHS to facilitate care out of Hospital**

**Kirkwood Strategic Objectives**

- **Meet the changing palliative care needs of Kirklees**
- **Strengthen the brand of Kirkwood by telling our story**
- **Support our local communities to care for people at the end of life**
- **Create an agile organisation that is ready to meet future challenges**

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“Light up a Life is a nice way to remember Mum. I come hoping she’s looking down and can see her light on the tree.”  

Patricia Kaye
**How we are doing**

- Kirkwood supported 2,165 local people.
- This includes 1,531 patients – an increase on the previous year.
- 767 people were supported by Kirkwood at the very end of their life.
- 94% supported to die out of hospital.
- There were 302 instances of feedback from service users – 97% rated the quality of care received as outstanding or excellent.
- 12,674 calls to our 24/7 Specialist Palliative Care Advice Line service.
- 596 people attended sessions at our Support and Therapy Centre.
- 3,189 face to face appointments were made.
- 3,189 face to face appointments were made by our Community Palliative Care team.
- 368 admissions to the In-Patient Unit.
- 535 people accessed our Bereavement service.
- Cost of patient services in 2018-19: £5 million.
- Number of Volunteers that gave their time was 859.
- Net amount raised from donations, fundraising, shops and lottery was £3.1 million.

**2018-19 Achievements**

There have been many achievements delivered within the year that have contributed to our strategic priorities.

**Priority A: Meet the changing palliative care needs of Kirklees**

Key Achievements:

1. Kirkwood has developed its role as a commissioner of Palliative and End of Life services in Kirklees. As part of this role we have completed a review of Kirkwood clinical services, analysing our data against Kirklees Public Health’s Joint Strategic Needs Assessment and NHS operational plans to identify the service developments required in the future.

2. A high level data model has been drafted to determine the future palliative care needs of the local population and a future service development plan has been developed which will help to meet palliative care needs in Kirklees over the next 5 to 10 years has been developed, including proposals for future development of Multi-Disciplinary teams based on future needs.

3. Kirkwood has led the development of the Kirklees End of Life Provider Alliance, which brings together all community and primary care providers that provide care and support to people at the end of their lives. The Alliance is now well established and has resulted in more joined up work between these organisations in terms of identifying people who are in need of palliative care support, care co-ordination for people at the end of life and provision of high quality education and training for health and social care professionals across Kirklees.

4. As mentioned earlier, a Care Co-ordination service model has been developed in collaboration with local partners and service users. The service specification and business case development was approved by Kirkwood’s Clinical Governance committee. A Team Leader was appointed and operational procedures developed to enable the service to commence in 2019.

5. Following investment in the development of the Community Palliative Care Team, two Kirkwood Community Nurses qualified as Independent Nursing Prescribers, which means that our service is able to offer enhanced support to our patients in their own homes and in care homes. During the year, the Community Palliative Care service has been extended to cover 7 days a week.

6. We have ensured the Kirkwood Support and Therapy Centre continued to move forward following the retirement of Sister Elaine Gill. Mary Tyrell-Place is now established in the role of Support and Therapy Manager. The Support and Therapy Service continues to develop and provide support to more people, with a variety of services for people affected by many different illnesses including cancer. Drop-in attendances to the service increased by 13% during the year.

7. The Enabling Quality of Life project has continued to be an area of focus. The project ensures that what matters to patients and their families is comprehensively identified so that effective plans can be put in place to help them achieve goals. The approach is now embedded across all Clinical Services.

8. Our work to connect with more Charitable Trusts and Foundations has begun to bear fruit for our patients. Over £60,000 was raised from this source during the year, providing funds towards vital equipment and services including; our Care Home Specialist Nursing Service, mattresses, beds and bladeless fans for the In-Patient Unit, Kirkwood Companions and refurbishment of our Mortuary. Our thanks go to every single charitable trust who gave in this way, in particular; the Morrison Foundation, Asda Foundation and Screwfix Foundation.

**Priority B: Strengthen the brand of Kirkwood by telling our story**

Key Achievements:

1. The Kirkwood brand has been strengthened significantly within the Kirklees Health and Social Care system. This is as a consequence of developing stronger and more collaborative partnerships with local organisations; The Chief Executive is Vice-Chair of the Kirklees Integrated Provider Board; Kirkwood leads the Kirklees End of Life Provider Alliance. As a result of those efforts End of Life has been selected as a specific priority by a number of Primary Care Networks across Kirklees.

2. This strengthening of Kirkwood’s brand and reputation has resulted in a Kirklees End of Life Care Charter being created by local organisations. Each signatory organisation is committing to play its part in delivering high quality care to people at the end of their lives. The financial agreement with the NHS has been strengthened further with...
3. ‘Kirkwood Stories’ is an initiative which helps us to communicate key messages with audiences important to the success of the charity. The individual stories of patients, supporters, employees and volunteers are extremely effective in engaging people with our charity. We have successfully embedded story and narrative creation into the culture of all our teams, and have developed systems and processes to ensure stories are captured, published and shared with key audiences on a monthly basis.

4. ‘Audience plans’ have been developed for key stakeholder groups, such as community supporters and GPs. These audience plans ensure that we are engaging effectively with these groups across the charity, co-ordinating our approach and making the best use of resources. ‘Kirkwood Local’ events are an example of how audience plans are being implemented. Through these events, we are engaging directly with our supporters across Kirklees in their local communities, helping them understand the difference their support makes in their own local areas.

5. Kirkwood’s workforce is a key audience for us and we learnt through the engagement work undertaken in 2017 that Kirkwood employees and volunteers were not always clear about the full range of services that the charity provides. It is also important to keep the workforce up to date with the future plans and ambitions of the charity so that they can play a full and active part in our success. We have completed a programme of meetings and presentations to capture and engage as many of the workforce as possible in our ‘Spread the Word’ campaign. This has proved very successful, creating thoughtful and energetic discussions about Kirkwood’s future plans.

6. It is important that we confidently communicate to people supporting the charity that we are delivering the biggest possible impact for local people with the donations that we are given. It is also important that people who need our services understand the benefit they could receive. Kirkwood is now developing more evidence about the impact of the services provided. This year we have started a programme of work with the goal of developing clear evidence of the impact of each clinical service. The first reviews of services have been completed this year and we will be looking at research partnerships to strengthen the evidence in the future.

7. We are humbled to reflect that local people continued to remember Kirkwood in their will, leaving gifts so that care is available for everyone who needs it, now and in the future. Many of these gifts came from people whose loved ones had received care from Kirkwood, whilst others were left by generous local people who believe that hospice care should be there for the communities they grew up and lived in. Around £1 in every £3 that we spent on providing care for those affected by life limiting illnesses last year came from local people comes from a gift left in a will.

Priority C: Support our local communities to care for people at the end of life

1. The Kirkwood Community Palliative Care Team has been enhanced with the addition of a Clinical Nurse Specialist that is focussed on the needs of people in nursing and residential homes in North Kirklees. This development has been achieved with a funding contribution from North Kirklees Clinical Commissioning Group. The introduction of this role will help Kirkwood to define how best to support Care Homes in the future. Plans are underway to add the same resource in Huddersfield.

2. Kirkwood has led the development of an End of Life Care Workbook for Care Homes. The product has been very well received by care homes across Kirklees and beyond. The workbook helps support care home employees to care for their residents effectively when they are at the end of their life. This has been recognised by the Care Quality Commission (CQC) as an example of good practice in supporting wider partners in end of life care.

3. Kirkwood has successfully recruited 12 ambassadors for our clinical services. These are individuals who represent parts of our community who do not access Kirkwood services as much as they could; individuals who can advocate for what we do within these communities. This is part of a plan to ensure that Kirkwood services are accessed by everyone who needs our support, no matter what community they belong to.

4. In 2018-19 the first in a series of 10 ‘Kirkwood Local’ events were held, successfully helping to raise awareness and generate offers of financial support. The events are a ‘thank you’ to our many supporters in their own local area. The events share the impact that their support has on local people. Key messages at the events include; the majority of the care and support that Kirkwood provides is in people’s own homes; it is Kirkwood Nurses that provide specialist palliative care in every community across Kirklees, when many people think that it is Macmillan and people do not need a referral to access Kirkwood’s support. Events were held in Batley and Holmfirth with more planned in 2019-20. At the same time, ‘local’ information and materials have been provided to all Kirkwood shops in these areas.

5. If local people are to be confident that supporting Kirkwood makes a difference in their community, it is vital that we offer opportunities for our supporters to connect with the services that they help deliver. We have created more events and activities in 2018-19 where people can learn how the support they offer helps Kirkwood, see the facilities and the people they help to pay for, and engage and ask questions about why these matter for people. Several hundred supporters came along to events at the Dalton site and out in the community throughout the year, and discovered how their support is helping people with life limiting illness, every step of the way.

6. The year again saw more people support Kirkwood in memory of a loved one. Our Midnight Memory Walk raised over £120,000 as over 1,200 people laced up and walked through the night; over 800 people visited the Hospice in Dalton to take part in a Light up a Life event, raising over £40,000; our Sunflower Memories Appeal raised over £15,000 and local people gave over £250,000 through collections in memory of those who have been supported by Kirkwood at the end of their lives, in the hospice or by our team of Community Nurses. Those choosing to hold a Tribute Fund in memory of a loved
one grew to over 50 people, many of whom donated and fundraised throughout the year to raise funds.

**Priority D: Create an agile organisation that is ready to meet future challenges**

**Key Achievements:**

1. The Kirkwood retail network worked tirelessly to buck the national trend on the high street over the past year. By investing time and energy ensuring our shops are welcoming places, customer friendly and stocked with a fantastic range of new and donated items, the shops team made a contribution of over £600,000 to Kirkwood’s care.

2. Kirkwood’s Business Continuity arrangements have been strengthened during 2018-19. The Kirkwood Management Group has designed new arrangements for supporting service delivery and managing operational issues out of normal office hours. An on-call rota has been introduced to share the load of this responsibility across the entire management team. Continuity plans have been refreshed to ensure that all critical services and operations are able to continue in the event of issues with staffing, systems, utilities or access to buildings.

3. New volunteer roles were introduced successfully to support Kirkwood clinical services. The best example are ‘Kirkwood Companions’; the Companions offer much needed practical, social and emotional support; reduce loneliness and isolation and maximise the benefits patients gain from Kirkwood services and other sources of support. After a successful pilot work has started to help establish these roles across all clinical services.

4. IT - work was completed in 2018-19 to replace the server array in order to meet the needs of Kirkwood in the future. In addition, critical work was completed to upgrade IT security, ‘Firewall’ and Wi-Fi. As a result of this work, the board is assured that systems and information continue to be secure. The landscape relating to information technology and data security is complex and Kirkwood needs to remain vigilant in relation to possible and actual threats to data security in the future.

5. The Fundraising team has been challenged to test technological solutions to improve income generation. During this year, for the first time, Kirkwood carried out a digital auction, which was a unique way of raising funds with limited investment and risk to the charity. The trial was a success and more digital income generation activities are planned in future. One of the more popular prizes was a ‘money can’t buy’ behind the scenes Formula One experience, which was kindly donated by a Kirkwood supporter.

6. A lot has been achieved in relation to improving the facilities at Kirkwood’s Dalton site; improvements that have a direct impact on the experience of patients and families who access services in the Hospice. The introduction of a chef into the catering team has been a valuable addition, increasing our ability not just meet the needs of patients, but to delight them by delivering memorable food. The gardens at Kirkwood are really important to our patients and visitors. The hard work of our volunteers and support services has been recognised this year with a RHS Gardens in Bloom Gold Award.

7. The data we use to plan our services has improved as a result of the Integrated Commissioning Partnership we have with the local Clinical Commissioning Groups and Kirklees Council. The pooling of data with our wider health and social care partners has resulted in better intelligence, which has helped us to monitor the impact of our services and plan future service developments.

8. As part of Kirkwood’s organisational development, all Directors and Managers completed a bespoke leadership programme together. The programme delivered a number of outcomes for the charity, which will be built on in future years. Leadership capability has been strengthened and management areas such as service development and financial management are more mature as a result.

**Future developments and changes**

**2019-20 Priorities**

As illustrated in Figure 1 above, our longer term ambitions are to:

- Double the number of people supported by Kirkwood at the very end of their lives
- Become the ‘go to’ charity that supports people as they approach the end of their lives
- Increase giving from people and businesses in Kirklees to meet future demand
- Increase funding from the NHS to facilitate care out of Hospital.

Kirkwood’s three year business plan continues into 2019-20, focussed on delivering the four strategic priorities we progressed in 2018-19. Delivering the priorities of the plan will put us in the best position to achieve the charity’s future aims.

**Strategic Priority A: Meet the changing palliative care needs of Kirklees**

We will continue to refine the data we use to plan how our services meet the needs of our local population. In partnership with other health and social care providers, we will also refine our workforce plans defined by the future service models.

We will continue to improve access to our services by extending access to all Kirkwood services seven days a week. We will also continue to focus on developing the accessibility of our services for all sections of our community for example people who are Lesbian, Gay, Bisexual or Transgender.

The collaboration between clinical services and fundraising will continue to develop, ensuring that we maximise on income generation opportunities for existing services and new developments. A particular focus will be on developing sustainable income for Kirkwood Community Nurses. Many local people think that other charities, such as Macmillan, provide specialist palliative care in people’s homes. However, in Kirklees, it is Kirkwood. We are working on activities that will develop and strengthen this understanding and, as a result, lead to greater support for our Community Nurses.
We will deliver a corporate campaign to acquire payroll giving support, build our corporate network and connect employees working within Kirklees with their local Kirkwood community nurse.

- Pilot a mass-participation community event; ‘Cuppa for Kirkwood’ in competition with the Macmillan Coffee Mornings

We will complete the introduction of the Care Co-ordination service. After it is established, the new service will be evaluated at six and 12 months. We will then review the benefits of the service alongside our commissioning partners to develop a plan to sustain this service beyond the first two years.

Finally, we will continue to embed the use of technology within our services in a way that benefits patients and families. We will complete the implementation of the Electronic Patient Record (EPR) including Electronic Prescribing and we will embed mobile working and technology in the culture of all clinical services.

**Priority B: Strengthen the brand of Kirkwood by telling our story**

We know that building on Kirkwood’s strong reputation is key to us successfully gaining the support that is essential if we are to meet the needs of more local people in future. We have been developing stories about the people that benefit from Kirkwood’s services and this year we will focus on sharing these stories with our key audiences.

The ‘Spread the Word’ campaign will continue this year as we work towards as many people as possible who are already close to Kirkwood, becoming familiar with the ‘Spread the Word’ message. By the end of the year we will have delivered 10 ‘Kirkwood Local’ events. At these events, we will engage Kirkwood supporters, old and new, in their own communities, sharing with them the impact Kirkwood has in their local area.

We will start to implement plans to communicate with other key audiences, such as GPs, other healthcare professionals and potential corporate supporters.

During 2019 we will carry out a comprehensive review of the Kirkwood brand architecture. We learnt in our 30th Anniversary year that although the current branding is recognised and trusted by local stakeholders, it reinforces a fairly narrow view of what Kirkwood is. We will refresh our brand and identity to improve understanding of Kirkwood amongst key audiences, such that they take action to either:

- Support us with money, time, fundraising effort or publicity
- Refer potential beneficiaries to appropriate services
- Refer themselves to appropriate services

We have made significant progress in building the reputation of Kirkwood among our partners in the local Health and Social Care system. We will continue to build on this and, in particular, on building evidence about the impact of Kirkwood services across Kirklees. This will allow us to explore opportunities for future service developments in line with our objectives.
Priority C: Support our local communities to care for people at the end of life

A strong connection between Kirkwood and the many communities across Kirklees is critical for our future success. We will need to work hard to secure the support of local people we need for our services. We also believe strongly that Kirkwood’s role is to influence care across the whole community, helping to make sure that everyone gets the support they need as they approach the end of life.

Kirkwood’s relationships with care homes across Kirklees will be developed even further so that we can influence the care that is provided to people. A new Clinical Nurse Specialist focusing purely on care homes will identify ‘care home champions’ for future relationship development. We will work closely with care homes to develop training that meets their needs and outcomes that will demonstrate the effectiveness of our relationship with them.

We will continue to build more meaningful connections with communities that do not regularly use Kirkwood services and will grow our network of Kirkwood Ambassadors within these communities. We will also review our befriending partnership with other charities in Kirklees to ensure that our network of Kirkwood Ambassadors continues to grow and benefit people across our community.

We will use ‘Kirkwood local’ events as a springboard to build community-based giving, through which local people will feel they have a stake in providing care to their community. Alongside evaluating the potential for more in-memory activities and events, we will develop and deliver at least one new ‘community-owned’ event.

Priority D: Create an agile organisation that is ready to meet future challenges

Kirkwood has ambitious plans to meet the needs of more local people in the future. This will mean that we will need to continue to invest in the assets and infrastructure of the charity.

In the year ahead, we will develop a comprehensive workforce development plan for the whole organisation, driven by the service development blueprint for clinical services. We will also diversify, restructure and expand volunteering opportunities to ensure that we are representative of our community and demonstrate our social value.

It is likely that Kirkwood’s assets and facilities will need to change in line with service developments and future demands. We need to identify and install the right resources to progress premises development projects.

As always, financial sustainability is of paramount importance and we need to continue to manage the risk that income does not cover the costs of providing Kirkwood services; not just now, but in the future. The main expense for the charity is employee pay. By the end of 2019-20 we will have completed a review of our pay and reward structures to ensure that we are able to continue to recruit the best quality employees into Kirkwood. At the same time the pay and reward structures we introduce need to be financially sustainable into the future. This is an important step and we will be seeking external expertise to help us deliver this change effectively.

We will continue to analyse the return on investment from our income generation activities to ensure that the contribution that is delivered is optimised. For example, the Retail Transformation project will be continued to ensure that we have delivered all the benefits of changing our systems and processes.

Technology plays an important role in Kirkwood’s development. We will continue to develop and use technology in a way that supports service development and income generation opportunities.

Finally, we have made a lot of progress in the way Kirkwood uses data to drive its development, and we will continue to develop the use of data intelligently going forward. We will refine our data analysis to identify current and future profiles for our workforce, donors/funders and service users. We will also work more closely with our partners (through data sharing agreements) and continue to track improvements through our Integrated Commissioning Partnership.

Developments targeted through use of Designated Funds

Designated Funds Update

In previous years the Trustees have taken the decision to designate funds from the general reserve with the purpose of investing in projects and initiatives that serve the purpose of the charity and meet future strategic objectives.

The Trustees identified a number of principles that would guide the use of these funds:

• The designated ‘project’ fund should be spent in line with the organisations strategic objectives

• There is a balance between the delivery of clinical services and income generation to ensure sustainability

• A schedule be created and maintained from consultation to project plan implementation, in order to ensure timeliness of allocation of the fund

Allocation made during 2018/19

IT Development and Market Research

In June 2017 the decision was made by the trustees to allocate £288,590 to enable the Electronic Patient Record project. This 18 month project (split into 2 phases) commenced on 1st February 2018 and as planned is on track to be completed by July 2019. In 2017 the trustees also decided to allocate £50k to Market Research to inform the future strategy.

Care Co-ordination

The development of a Care Co-ordination model is a key part of Kirkwood’s future strategy. The development will enhance the 24/7 Specialist Palliative Care Advice Line to ensure that we have the capacity to meet demand; it will enable the Community Palliative Care Team to meet the needs of more people through proactively co-ordinating aspects of care that the team are involved with that do not require specialist resource; it will support the joint commissioning work by creating a focus through which Kirkwood works more actively with other providers who are supporting people at the very end of their lives. As part of the 2017 budget process, trustees agreed to allocate £440k from the Designated Project Fund towards a two year pilot of the Care Co-ordination model. This new service will commence in June 2019.

Future allocation of the fund

Further priorities for the fund to support our
strategic objectives have been identified as:

- **Additional car parking** – To alleviate current car parking issues, accommodate existing flow and activity on the main Kirkwood site
- **Premises and Accommodation** – To address current accommodation issues and create a more flexible space to allow for further development in the future

Work will be completed in 2019/20 to scope and define these developments so that they can be progressed in future years utilising the designated fund. £125k has been committed for strategic development for this purpose.

At present £904k of the £2.4m designated project fund has been allocated with a total of £1,177k spent as at 31st March 2019. The plan is that a further £499k will be spent during 2019/20 leaving a balance of £1.8m as of 31st March 2020. This is demonstrated in the table below (please see note 20 on page 79 for details of designated funds expenditure during 2018/19):

<table>
<thead>
<tr>
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<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Opening Balance</td>
<td>2,450,000</td>
<td>2,400,765</td>
<td>2,272,703</td>
<td>1,773,869</td>
<td>1,553,869</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Allocation</th>
<th>SystmOne Project</th>
<th>Market Research</th>
<th>Care Co-ordination</th>
<th>Strategic Development</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allocation</td>
<td>288,590</td>
<td>50,000</td>
<td>440,000</td>
<td>125,000</td>
<td>903,590</td>
</tr>
<tr>
<td>Actual</td>
<td>29,072</td>
<td>20,163</td>
<td>0</td>
<td>0</td>
<td>49,235</td>
</tr>
<tr>
<td>Bil. Remaining</td>
<td>259,518</td>
<td>29,837</td>
<td>440,000</td>
<td>125,000</td>
<td>289,355</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Projected</td>
<td>124,561</td>
<td>26,317</td>
<td>18,878</td>
<td>7,459</td>
<td>0</td>
</tr>
<tr>
<td>Bil. Remaining</td>
<td>134,956</td>
<td>18,878</td>
<td>7,459</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Projected</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>220,000</td>
<td>220,000</td>
</tr>
<tr>
<td>Bil. Remaining</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>220,000</td>
<td>7,459</td>
</tr>
</tbody>
</table>

Over 200 people dusted off their trainers and took on the 2018 Kirkwood Trail Run.
Reserves

The reserves decreased in value by £11,152 as shown on page 61 of the financial statements. The Trustees regularly review the reserves of Kirkwood Hospice. To allow Kirkwood to be prudently and efficiently managed, and to provide a buffer for uninterrupted service during periods of variation in income and expenditure, Kirkwood’s current policy is that a general reserve equal to between twelve and sixteen months’ expenditure on charitable activities should be the aim. This reserve is to be in addition to any significant planned capital expenditure.

At the year end this reserve amounted to 14 months expenditure on charitable activities and 9 months on total expenditure. The comparative for the year ended 31st March 2018 was 14 months charitable activity and 9 months total expenditure.

The Executive Management Team actively monitors the level of reserves held on a monthly basis when reviewing the monthly management accounts. This information is subsequently reported into Finance and Resources Committee on a quarterly basis. Forecasts of income and expenditure are made annually, the aim being to balance expenditure and income, and the object being to ensure our services are sustainable into the future. Contingency plans exist in the event that reserves fall below, or exceed, the estimated reserve requirements.

The Finance and Resources Committee reviews the reserves policy each year. In conducting the review they take into consideration best practice and the guidance issued by the Charity Commission. The review is reported to the Council of Management at its next meeting, and recorded in the minutes.

In May 2018, the Finance and Resources Committee agreed that a review of the reserves calculation should be undertaken. The aim being to establish a more ‘scientific’ calculation based upon a risk assessment of income and expenditure. The review would need to be carried out taking into consideration legal and statutory requirements along with the aims and objectives of Kirkwood’s Finance Strategy.

This review was conducted during quarters 2 and 3 of 2018/19. The findings of the review were presented to the Finance and Resources Committee in December 2018 and indicated that a calculation needed to be developed based upon a risk based approach and adapted to Kirkwood’s Finance Strategy. This ultimately means that in the future there will need to be shift from a minimum level of reserves defined by months of expenditure to a target figure expressed in absolute terms. The overall reserves calculation will be made up of 4 elements as follows:

- **Risk** – Covers the impact of the occurrence of risks identified in income and expenditure risk assessments. This will mean identifying, quantifying and assigning likelihoods to potential decreases in performance against short term (Budget) and long term financial plans (Long Range Forecast)
- **Contingency** – Covers the impact of unquantifiable risks and unanticipated or unlikely events (events that cannot be predicted and therefore cannot be assessed as likely, but would have a major impact if they were to occur)
- **Service Development** – Covers designated funds to support strategic development. This part of the calculation will include known future commitments and service development not yet approved but in

Fundraising Standards

Kirkwood works hard to meet the requirements of the Fundraising Regulator (of which it is a paid up member), and to follow these standards when planning or undertaking fundraising initiatives. This includes supporting donors who are planning or undertaking their own fundraising initiatives to ensure that these are conducted ethically, and within the law.

In addition donations received are processed following the charity’s comprehensive Internal Financial Control Procedures in line with Charity Commission guidance.

All income generation activities are undertaken within charity law, Charity Commission guidelines, the Fundraising Regulator’s Codes of Practice, HMRC rules, The Gambling Act, local licensing laws, Advertising Standards Authority rules and Data Protection legislation (this list is not exhaustive). Kirkwood never sells donor data to a third party, or engages in data swapping, and a statement to this effect is included in our fundraising literature.

However, Kirkwood sees compliance with legislation and codes of practice as a minimum standard, not an aspiration, and we strive to ensure our supporter care is of the same high standard as the care we offer our beneficiaries. We hope our supporters enjoy and value their interactions with the charity, look forward to receiving information from us, and know we view them as partners in the care we can offer. We work towards these goals throughout all of our income generating activity.

This is reflected in the low levels of complaints received with regards to our fundraising activities. During this accounting period of the 14 complaints received, 10 were in relation to
income generation activities. Employees and volunteers are empowered to deal positively and respectfully with any complaint. The charity has an effective, open and accessible Complaints Policy. We have systems and procedures which promote learning within the organisation and aim to maintain the excellent reputation of the charity. All complaints are audited on a quarterly basis.

The charity does not condone and never employs aggressive fundraising tactics. All contact with donors is always conducted in a caring and professional manner, in line with Kirkwood’s values.

Risk management

The Trustees and Executive Management Team have assessed and regularly review the major risks to which Kirkwood is exposed, particularly those related to finances, operation and provision of Kirkwood services. In addition the Risk and Audit Committee has oversight of the risk management framework and meets on a quarterly basis.

The Executive Management Team has compiled a risk register, which is reviewed every month. The Trustees and Executive Management Team are satisfied that the systems are in place to mitigate exposure to these risks. The following table details the risks that were reported in the last annual report and how the risk rating has changed within the accounting period 2018-19:

<table>
<thead>
<tr>
<th>Key Risk at the end of Accounting period 2017-18</th>
<th>Change in risk rating during 2018-19</th>
<th>Commentary</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 Impact of Government Changes / structure of government</td>
<td></td>
<td>The political landscape and government policy remained uncertain throughout 2018-19. While we reviewed risks that related to the impact of Brexit, the issue was not resolved by the end of the year. The government policy agenda has slowed down significantly as a result, delaying policy development in a number of areas, for instance around Social Care. Changes to NHS Pension contributions were announced at short notice and following a brief consultation, which may impact on employment costs in future years.</td>
</tr>
<tr>
<td>2 Reduction in Fundraising non-statutory income</td>
<td></td>
<td>The risk that there is a reduction in non-statutory income remains a key consideration for the charity. Kirkwood has a diverse range of income streams in place, and the risks in relation to each income stream are regularly assessed. Through analysis of our existing income streams we have invested in those that will generate the most consistent return.</td>
</tr>
<tr>
<td>3 External influences on strategic direction</td>
<td></td>
<td>Kirkwood has successfully established the charity, delivering palliative and end of life care front and centre within the local Health and Social Care System. The Chief Executive is Vice-Chair of the Kirklees Integrated Provider Board, which is a key body in determining health and social care priorities for Kirklees. At present, local plans include End of Life Care as a priority and Kirkwood is well placed to influence future direction. That said, resources are still stretched within the Health and Social Care system, which means that there are still tangible risks in relation to the resources available to support the charity and / or resources that Kirkwood is dependent on across Kirklees to deliver high quality care.</td>
</tr>
<tr>
<td>4 The risk that the management of the Hospice is ineffective</td>
<td></td>
<td>The success of Kirkwood relies on the capability of all managers, heads of service and clinical leaders within the organisation. All Directors and Managers in the charity completed a development programme focussed on developing Kirkwood’s strategic capability during 2018-19. The programme was a success and the outcomes for the organisation will be embedded in future years.</td>
</tr>
<tr>
<td>5 Unauthorised access to electronic confidential information - including Cyber Attack</td>
<td></td>
<td>As planned, work was completed in 2018-19 to replace the server array to meet the needs of the organisation in the future. As a result of this work the board is assured that systems and information continue to be secure. However the landscape relating to information technology and data security is complex and Kirkwood needs to remain vigilant in relation to possible and actual threats to data security in the future.</td>
</tr>
</tbody>
</table>
**Key Risk at the end of Accounting period 2018-19**

<table>
<thead>
<tr>
<th></th>
<th></th>
<th>Commentary</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Impact of Government Changes / structure of government</td>
<td>This risk relates to potential changes in the political landscape and to government policy that have implications for any part of the organisation's operational or strategic direction. The delay of Brexit and the related slowdown of policy implementation means that uncertainty still exists, which may impact on Kirkwood in the medium and long term.</td>
</tr>
<tr>
<td>2</td>
<td>Reduction in Fundraising non-statutory income</td>
<td>Kirkwood requires significant growth in its Income generation capability if we are to realise our future aims. The Director of Income Generation and Marketing is responsible for continually researching new ideas for income generation. Our current strategy is to connect with our local communities to share the impact that Kirkwood delivers so that people and businesses understand the full range of services that are delivered across Kirklees and understand that it is not other charities providing these services. If we are successful, this will have a positive effect on our income generation capability. We continue to look for new ideas to generate sustainable income to underpin the services we provide. The Board of Trustees are always prepared to consider investments in new initiatives in the future.</td>
</tr>
<tr>
<td>3</td>
<td>External influences on strategic direction</td>
<td>Kirkwood receives around 20% of total income from the NHS. While this is lower than the national average (around 32%) resources are stretched within the Health and Social Care system and therefore this level of funding remains at risk. To counter this, Kirkwood has developed a formal commissioning partnership with local Health and Social Care commissioners to increase security regarding funding and to influence the commissioning of other services within limited resources. In addition, Kirkwood is well placed in many of the strategic forums within Kirklees, which means that the profile of the charity is maintained among key decision makers across Health and Social Care, both in Kirklees and at a West Yorkshire level.</td>
</tr>
<tr>
<td>4</td>
<td>The risk that the management of the Hospice is ineffective</td>
<td>The IT work programme continues to address the needs of the charity in terms of data security and compliance. Information Governance training remains a priority across Kirkwood. In addition, we know Microsoft is discontinuing security updates on Windows 7 from January 2020 and work is planned to implement further upgrades to current security arrangements. Projects will be identified to improve the way Kirkwood manages its data in future.</td>
</tr>
<tr>
<td>5</td>
<td>Unauthorised access to electronic confidential information - including Cyber Attack</td>
<td>Kirkwood’s future strategy is ambitious, seeking to radically increase support from partners, local people and companies in order to double the number of people we care for and become the ‘go to’ charity for people affected by life limiting illness. Kirkwood needs to progress a number of strategic developments to ensure achievement of future aims. However management capacity is a limiting factor in terms of making the required progress. Kirkwood is contracting specific resource to progress three strategic development areas in 2019-20, while analysing the options for strategic resource required in the future.</td>
</tr>
</tbody>
</table>

**Financial Instruments**

Kirkwood’s principal financial instruments comprise bank balances, an investment portfolio, trade creditors and trade debtors. The main purpose of these instruments is to raise funds for the operations of the charity and to finance Kirkwood’s Services.

Due to the nature of the financial instruments used by the Hospice, there is no exposure to price risk other than that which relates to the investment portfolio. To manage this risk, the Finance and Resources Committee meet at six monthly intervals with the investment managers to review performance in the light of the investment management policy. Kirkwood’s approach to managing other risks applicable to the financial instruments concerned is shown below.

In respect of bank balances, the liquidity risk is managed by maintaining credit balances.

Trade debtors are managed by the regular monitoring of amounts outstanding for both time and credit limits.

Trade creditors liquidity risk is managed by ensuring sufficient funds are available to meet amounts falling due.

**Disclosure of information to the auditors**

We, the Trustees, being directors of the company, who held office at the date of approval of these financial statements as set out above each confirm, so far as we are aware, that:

- there is no relevant audit information of which the company’s auditors are unaware; and
- we have taken all the steps that we ought to have taken as directors in order to make ourselves aware of any relevant audit information and to establish that the company’s auditors are aware of that information.

In approving the Trustees’ Annual Report, we also approve the Strategic Report included therein, in our capacity as company directors.

On behalf of the board

Mr B F Ainsworth OBE
Chair of Trustees

6 September 2019
We have audited the financial statements of Kirkwood Hospice (the parent charitable company) and its subsidiary (the group) for the year ended 31 March 2019 which comprise the Consolidated Statement of Financial Activities, the Consolidated and the Parent Charitable Company Balance Sheet, the Consolidated and the Parent Charitable Company Statement of Cash Flows and notes to the financial statements, including a summary of significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards including Financial Reporting Standard applicable in the UK and the Republic of Ireland (United Kingdom Generally Accepted Accounting Practice).

In our opinion the financial statements:

- give a true and fair view of the state of the group's and parent charitable company's affairs as at 31 March 2019, and of the group's incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

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

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which the ISAs (UK) require us to report to you where:

- the trustees’ use of the going concern basis of accounting in the preparation of the financial statements is not appropriate; or
- the trustees have not disclosed in the financial statements any identified material uncertainties that may cast significant doubt about the group’s or parent charitable company’s ability to continue to adopt the going concern basis of accounting for a period of at least twelve months from the date when the financial statements are authorised for issue.

Other information

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

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

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

Matters on which we are required to report by exception

In the light of our knowledge and understanding of the group and parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the strategic report and the directors’ report.

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

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

Responsibilities of trustees

As explained more fully in the trustees’ responsibilities statement set out on pages 3 and 4, the trustees (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 trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

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

**Auditor’s responsibilities for the audit of the financial statements**

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

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

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

- Evaluate the overall presentation, structure and content of the financial statements, including the disclosures, and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.
- Obtain sufficient appropriate audit evidence regarding the financial information of the entities or business activities within the group to express an opinion on the consolidated financial statements. We are responsible for the direction, supervision and performance of the group audit. We remain solely responsible for our audit opinion.

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

**Use of our report**

This report is made solely to the charitable company’s members, as a body, in accordance with Chapter 3 of Part 16 of the Companies Act 2006. Our audit work has been undertaken so
Consolidated Statement of Financial Activities (including income and expenditure account)  
Year ended 31 March 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Income and endowments from:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Donations and legacies</td>
<td>2,424,806</td>
<td>2,458,515</td>
</tr>
<tr>
<td>Charitable activities</td>
<td>(4,635,613)</td>
<td>(4,782,213)</td>
</tr>
<tr>
<td>Other trading activities</td>
<td>(3,654,346)</td>
<td>(3,555,808)</td>
</tr>
<tr>
<td>Total income and endowments</td>
<td>(7,060,419)</td>
<td>(7,240,728)</td>
</tr>
<tr>
<td>Expenditure on:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Raising funds</td>
<td>(2,424,806)</td>
<td>(2,458,515)</td>
</tr>
<tr>
<td>Charitable activities</td>
<td>(4,635,613)</td>
<td>(4,782,213)</td>
</tr>
<tr>
<td>Other trading activities</td>
<td>(3,654,346)</td>
<td>(3,555,808)</td>
</tr>
<tr>
<td>Total expenditure</td>
<td>(7,060,419)</td>
<td>(7,240,728)</td>
</tr>
<tr>
<td>Net gains/(losses) on investments</td>
<td>229,332</td>
<td>(8,051)</td>
</tr>
<tr>
<td>Net income/(expenditure)</td>
<td>295,240</td>
<td>(233,158)</td>
</tr>
<tr>
<td>Transfers between funds</td>
<td>(97,079)</td>
<td>(233,158)</td>
</tr>
<tr>
<td>Net movement in funds</td>
<td>198,161</td>
<td>(233,158)</td>
</tr>
<tr>
<td>Reconciliation of funds:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total funds brought forward</td>
<td>5,697,912</td>
<td>12,451,573</td>
</tr>
<tr>
<td>Total funds carried forward</td>
<td>5,896,073</td>
<td>12,451,573</td>
</tr>
</tbody>
</table>

All income and expenditure derive from continuing activities. The statement of financial activities includes all gains and losses recognised during the year. The notes on pages 65 to 81 form part of these financial statements.

Consolidated Balance Sheet  
Year ended 31 March 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Fixed assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>4,253,277</td>
<td>4,331,034</td>
</tr>
<tr>
<td>Investments</td>
<td>6,038,811</td>
<td>6,059,994</td>
</tr>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks</td>
<td>67,542</td>
<td>52,739</td>
</tr>
<tr>
<td>Debtors</td>
<td>1,570,551</td>
<td>1,066,144</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>1,192,314</td>
<td>1,767,895</td>
</tr>
<tr>
<td>Creditors: amounts falling due within one year</td>
<td>(682,074)</td>
<td>(826,233)</td>
</tr>
<tr>
<td>Net current assets</td>
<td>2,148,333</td>
<td>2,060,545</td>
</tr>
<tr>
<td>Total assets less current liabilities</td>
<td>12,440,421</td>
<td>12,451,573</td>
</tr>
<tr>
<td>Charity Funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endowment funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permanent endowment</td>
<td>5,848</td>
<td>5,588</td>
</tr>
<tr>
<td>Restricted funds</td>
<td>12,519</td>
<td>32,398</td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td>12,422,054</td>
<td>12,413,587</td>
</tr>
<tr>
<td>Total charity funds</td>
<td>12,440,421</td>
<td>12,451,573</td>
</tr>
</tbody>
</table>

The financial statements were approved and authorised for issue by the Board on 6th September 2019

Signed on behalf of the board of Trustees

Mr B F Ainsworth  
Chairman

Company registration number: 1645888

The notes on pages 65 to 81 form part of these financial statements.
## Charity Balance Sheet
### Year ended 31 March 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>2018</th>
<th>2017</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Fixed assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>13</td>
<td>4,253,277</td>
</tr>
<tr>
<td>Investments</td>
<td>14</td>
<td>6,038,811</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>10,292,188</td>
<td>10,391,128</td>
</tr>
<tr>
<td>Current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks</td>
<td>15</td>
<td>16,286</td>
</tr>
<tr>
<td>Debtors</td>
<td>16</td>
<td>1,623,598</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>1</td>
<td>1,163,484</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2,803,368</td>
<td>2,878,172</td>
</tr>
<tr>
<td>Creditors: amounts falling due within one year</td>
<td>17</td>
<td>(655,135)</td>
</tr>
<tr>
<td>Net current assets</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>2,148,233</td>
<td>2,060,445</td>
</tr>
<tr>
<td>Total assets less current liabilities</td>
<td>12,440,421</td>
<td>12,451,573</td>
</tr>
<tr>
<td>Charity Funds</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Endowment funds</td>
<td>20</td>
<td>5,848</td>
</tr>
<tr>
<td>Restricted funds</td>
<td>20</td>
<td>12,519</td>
</tr>
<tr>
<td>Unrestricted funds</td>
<td>20</td>
<td>12,422,054</td>
</tr>
<tr>
<td>Total charity funds</td>
<td>12,440,421</td>
<td>12,451,573</td>
</tr>
</tbody>
</table>

The financial statements were approved and authorised for issue by the Board on 6th September 2019.

Signed on behalf of the board of Trustees

Mr B F Ainsworth
Chairman

Miss L A Chapman
Trustee

Company registration number: 1645888

The notes on pages 65 to 81 form part of these financial statements.

## Consolidated Statement of Cash Flows
### Year ended 31 March 2019

<table>
<thead>
<tr>
<th>Note</th>
<th>2019</th>
<th>2018</th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Cash flow from operating activities</td>
<td>22</td>
<td>(867,086)</td>
<td>(42,414)</td>
<td>(878,270)</td>
</tr>
<tr>
<td>Net cash flow from operating activities</td>
<td>(867,086)</td>
<td>(42,414)</td>
<td>(878,270)</td>
<td>(30,840)</td>
</tr>
<tr>
<td>Cash flow from investing activities</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Payments to acquire tangible fixed assets</td>
<td></td>
<td></td>
<td>(127,759)</td>
<td>(101,987)</td>
</tr>
<tr>
<td>Payments to acquire investments</td>
<td></td>
<td>(589,109)</td>
<td>(863,034)</td>
<td>(589,109)</td>
</tr>
<tr>
<td>Receipts from sales of investments</td>
<td></td>
<td>839,884</td>
<td>919,628</td>
<td>839,884</td>
</tr>
<tr>
<td>Interest received</td>
<td></td>
<td>334</td>
<td>2,388</td>
<td>334</td>
</tr>
<tr>
<td>Dividends received</td>
<td></td>
<td>168,155</td>
<td>170,890</td>
<td>168,155</td>
</tr>
<tr>
<td>Net cash flow from investing activities</td>
<td></td>
<td>291,505</td>
<td>127,885</td>
<td>291,505</td>
</tr>
<tr>
<td>Net (decrease)/increase in cash and cash equivalents</td>
<td>(575,581)</td>
<td>85,471</td>
<td>(586,765)</td>
<td>97,045</td>
</tr>
<tr>
<td>Cash and cash equivalents at 1 April 2018</td>
<td></td>
<td>1,767,895</td>
<td>1,682,424</td>
<td>1,750,249</td>
</tr>
<tr>
<td>Cash and cash equivalents at 31 March 2019</td>
<td></td>
<td>1,192,314</td>
<td>1,767,895</td>
<td>1,163,484</td>
</tr>
<tr>
<td>Cash and cash equivalents consists of:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td></td>
<td>1,183,414</td>
<td>1,696,336</td>
<td>1,154,584</td>
</tr>
<tr>
<td>Short term deposits</td>
<td></td>
<td>8,900</td>
<td>71,559</td>
<td>8,900</td>
</tr>
<tr>
<td>Cash and cash equivalents at 31 March 2018</td>
<td></td>
<td>1,192,314</td>
<td>1,767,895</td>
<td>1,163,484</td>
</tr>
</tbody>
</table>

The notes on pages 65 to 81 form part of these financial statements.
Notes to the Consolidated Financial Statements
Year ended 31 March 2019

1. Summary of significant accounting policies.

(a) General information and basis of preparation

Kirkwood Hospice is a registered charitable company limited by guarantee in the United Kingdom. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £10 per member of the charity. The address of the registered office is given in the charity information on page 1 of these financial statements. The nature of the charity’s operations and principal activities are detailed in the Trustees report.

The charity constitutes a public benefit entity as defined by FRS 102. The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102) issued on 16 July 2014 (as updated through Update Bulletin 1 published on 2 February 2016), the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Charities Act 2011, the Companies Act 2006 and UK Generally Accepted Practice as it applies to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the United Kingdom and Republic of Ireland (FRS 102), the Statement of Accounting Practice applicable to charities preparing their accounts in accordance with the Charities Act formats to reflect the special nature of the charity’s activities.

The significant accounting policies applied in the preparation of these financial statements are set out below. These policies have been consistently applied to all years presented unless otherwise stated.

(b) Funds

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

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

Restricted funds are funds which are to be used in accordance with specific restrictions imposed by donors or which have been raised by the charity for particular purposes. The cost 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.

Endowment funds represent those assets which must be held permanently by the charity, principally fixed asset investments. Income arising on the endowment funds can be used in accordance with the objects of the charity and is included as unrestricted income. Any capital gains or losses arising on the investments form part of the fund. Investment management charges and legal advice relating to the fund are charged against the fund.

(c) Income recognition

All incoming resources are included in the Statement of Financial Activities (SoFA) when the charity is legally entitled to the income after any performance conditions have been met, the amount can be measured reliably and it is probable that the income will be received.

For donations to be recognised the charity will have been notified of the amounts and the settlement date in writing. If there are conditions attached to the donation and this requires a level of performance before entitlement can be obtained then income is deferred until those conditions are fully met or the fulfilment of those conditions is within the control of the charity and it is probable that they will be fulfilled.

Donated facilities and donated professional services are recognised in income at their fair value when their economic benefit is probable, it can be measured reliably and the charity has control over the item. Fair value is determined on the basis of the value of the gift to the charity. For example the amount the charity would be willing to pay in the open market for such facilities and services. A corresponding amount is recognised in expenditure.

No amount is included in the financial statements for volunteer time in line with the SORP (FRS102). Further detail is given in the Trustees’ Annual Report.

Where practicable, gifts in kind donated for distribution to the beneficiaries of the charity are included in stock and donations in the financial statements upon receipt. If it is impracticable to assess the fair value at receipt or if the costs to undertake such a valuation outweigh any benefits, then the fair value is recognised as a component of donations when it is distributed and an equivalent amount recognised as charitable expenditure.

The SORP (FRS102) requires gifts in kind donated for resale to be included at fair value, being the expected proceeds from sale less the expected costs of sale. Where estimating the fair value is practicable upon receipt it is recognised in stock and ‘Income from other trading activities’. Upon sale, the value of the stock is charged against ‘Income from other trading
activities’ and the proceeds are recognised as ‘Income from other trading activities’. Where it is impracticable to fair value the items due to the volume of low value items they are not recognised in the financial statements until they are sold and the income recognised within ‘Income from other trading activities’. The Trustees believe that it is impractical to recognise the goods at fair value upon receipt and have therefore continued to include the income when the goods are sold.

Fixed asset gifts in kind are recognised when receivable and are included at fair value. They are not deferred over the life of the asset.

Legacy income is recognised when the charity is entitled to the income. Under SORP (FRS 102) it is the earlier of the charity being notified of an impending distribution or the legacy being received or if, before receipt, there is sufficient evidence that it is probable that the legacy will be received and the value of the incoming resources can be measured with sufficient reliability. When the charity has received notification of a legacy but it is not possible to measure the amount expected the legacy is treated as a contingent asset and disclosed.

Income from trading activities includes income earned from fundraising events and trading activities to raise funds for the charity. Income is received in exchange for supplying goods and services in order to raise funds and is recognised when entitlement has occurred.

The charity receives grants in respect of its charitable activities. Income from grants is recognised when entitlement has occurred. Income from grants is received in exchange for supplying goods and services in order to raise funds and is therefore considered as charitable income. Income from grants is treated as a contingent asset and disclosed.

Investment income is earned through holding assets for investment purposes such as shares and property. It includes dividends and interest when the amount can be measured reliably.

Interest income is recognised using the effective interest method and dividend income is recognised as the charity’s right to receive payment is established.

(d) Expenditure recognition

All expenditure is accounted for on an accruals basis and has been classified under headings that aggregate all costs related to the category. Expenditure is recognised where there is a legal or constructive obligation to make payments to third parties, it is probable that the settlement will be required and the amount of the obligation can be measured reliably. It is categorised under the following headings:

- Costs of raising funds includes the cost of commercial trading and their associated support costs;
- Expenditure on charitable activities includes the cost of running and maintaining the hospice along with other costs undertaken to further the purpose of the charity and their associated support costs; and
- Other expenditure represents those items not falling into the categories above.

Irrecoverable VAT is charged as an expense against the activity for which expenditure arose.

(e) Support costs allocation

Support costs are those that assist the work of the charity but do not directly represent charitable activities and include office costs, governance costs, and administrative payroll costs. They are incurred directly in support of expenditure on the objects of the charity. Where support costs cannot be directly attributed to particular headings they have been allocated to cost of raising funds and expenditure on charitable activities on a basis consistent with use of the resources. Premises overheads and other overheads have been allocated pro rata to staff cost basis.

Fund-raising costs are those incurred in seeking voluntary contributions and do not include the costs of promoting the charitable activities of the charity.

The analysis of these costs is included in note 7.

(f) Tangible fixed assets

Tangible fixed assets costing £1,000 or more are capitalised at cost (or deemed cost). Cost includes costs directly attributable to making the asset capable of operating as intended.

Depreciation is provided on all tangible fixed assets, at rates calculated to write off the cost, less estimated residual value, of each asset on a systematic basis over its expected useful life as follows:

- Freehold land
  - No depreciation provided
- Freehold buildings
  - 2% Straight line
- Shop fittings
  - The lower of the life of the lease or 5 years
- Furniture, furnishings and equipment
  - 20% Straight line
- Computer equipment
  - 33⅓% Straight line
- Motor vehicles
  - 20% Straight line
- Computer equipment
  - 33⅓% Straight line

(g) Investments

Investments are recognised initially at fair value which is normally the transaction price excluding transaction costs. Subsequently, they are measured at fair value with changes recognised in ‘net gains / (losses) on investments’ in the Statement of Financial Activities if the shares are publicly traded or their fair value can otherwise be measured reliably. Other investments are measured at cost less impairment. Investments in subsidiaries are measured at cost less impairment.

(h) Stocks

Stocks are stated at the lower of cost and net realisable value. Cost includes all costs of purchase, costs of conversion and other costs incurred in bringing stock to its present location and condition. Cost is calculated using the
first-in, first-out formula. Provision is made for damaged, obsolete and slow-moving stock where appropriate.

(i) Debtors and creditors receivable / payable within one year

Debtors and creditors with no stated interest rate and receivable or payable within one year are recorded at transaction price. Any losses arising from impairment are recognised in expenditure.

(j) Provisions

Provisions are recognised when the charity has an obligation at the balance sheet date as a result of a past event, it is probable that an outflow of economic benefits will be required in settlement and the amount can be reliably estimated.

(k) Leases

Rentals payable under operating leases are charged to the Statement of Financial Activities on a straight line basis over the period of the lease.

(l) Employee benefits

When employees have rendered service to the charity, short-term employee benefits to which the employees are entitled are recognised at the undiscounted amount expected to be paid in exchange for that service.

The charity operates a defined contribution plan for the benefit of its employees. The scheme is held separately from the charity and administered by the National Health Service Pension Scheme. The charge to the Statement of Financial Activities represents the contributions payable by the charity to the two schemes in accordance with the Charity SORP (FRS102). Further details are provided in note 23.

(m) Tax

The charity is an exempt charity within the meaning of schedule 3 of the Charities Act 2011 and is considered to pass the tests set out in Paragraph 1 Schedule 6 Finance Act 2010 and therefore it meets the definition of a charitable company for UK corporation tax purposes.

(n) Going concern

The financial statements have been prepared on a going concern basis as the Trustees believe that no material uncertainties exist. The charity's business activities together with the factors likely to effect its future performance and development are detailed in the Strategic Report. It is the view of the Trustees that the charity is well placed to manage its business risks successfully. This is evidenced in the financial statements, cash flow and liquidity position as stated in this annual report. In addition the charity has robust policies and procedures for managing its reserves and its financial risk management objectives. The Trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Therefore they continue to adopt the going concern basis of accounting in preparing the annual financial statements.

### 2. Income from donations and legacies

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Donations</td>
<td>529,270</td>
<td>467,647</td>
</tr>
<tr>
<td>Legacies</td>
<td>1,326,108</td>
<td>1,343,418</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,855,378</strong></td>
<td><strong>1,811,065</strong></td>
</tr>
</tbody>
</table>

Income from donations and legacies was £1,855,378 (2018: £1,811,065) of which £1,828,453 (2018: £1,781,970) was attributable to unrestricted funds and £26,925 (2018: £29,095) to restricted funds. During the year the charity has received a significant amount in legacies, the charity is extremely grateful for these.

The charity benefits greatly from the involvement and enthusiastic support of its many volunteers, details of these are in the annual report. In accordance with FRS 102 and the charity SORP (FRS 102) the economic contribution of general volunteers is not recognised in the accounts.

### 3. Income from charitable activities

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contractual payments</td>
<td>1,450,585</td>
<td>1,444,882</td>
</tr>
<tr>
<td>Performance related grants</td>
<td>55,042</td>
<td>30,588</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>1,505,627</strong></td>
<td><strong>1,475,470</strong></td>
</tr>
</tbody>
</table>

Income from charitable activities was £1,505,627 (2018: £1,475,470) of which £1,475,039 (2018: £1,444,882) was attributable to unrestricted funds and £30,588 (2018: £30,588) was attributable to restricted funds.

### 4. Income from other trading activities

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fundraising events</td>
<td>750,444</td>
<td>720,117</td>
</tr>
<tr>
<td>Lottery</td>
<td>681,332</td>
<td>684,266</td>
</tr>
<tr>
<td>Shop income</td>
<td>2,222,570</td>
<td>2,151,425</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>3,654,346</strong></td>
<td><strong>3,555,808</strong></td>
</tr>
</tbody>
</table>

Income from other trading activities was £3,654,346 (2018: £3,555,808) all of which was attributable to unrestricted funds.
5. Income from investments

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td></td>
</tr>
<tr>
<td>Investment income</td>
<td>168,155</td>
<td>170,890</td>
</tr>
<tr>
<td>Interest</td>
<td>334</td>
<td>2,388</td>
</tr>
<tr>
<td></td>
<td>168,489</td>
<td>173,278</td>
</tr>
</tbody>
</table>

Income from investments was £168,489 (2018: £173,278) all of which was attributable to unrestricted funds.

6. Analysis of expenditure

- **Staff Costs**: £1,363,060
- **Other costs**: £24,502
- **Depreciation**: £149,521
- **Support costs**: £2,424,806

### Charitable activities

- **In-patient care**: £2,346,827
- **Support & Therapy Centre**: £310,990
- **Community Palliative Care Team**: £204,514
- **Family Care Team**: £204,514
- **Information and Education**: £102,377

### Support costs

- **Personnel & volunteers**: £187,882
- **Finance & information**: £141,798
- **Administration**: £396,612

### Total Support Costs

- £726,292

### Total Resources Expended

- £5,519,844

7. Allocation of support costs

<table>
<thead>
<tr>
<th>Personnel &amp; Volunteers</th>
<th>Finance &amp; Information</th>
<th>Projects &amp; Administration</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Raising Funds</td>
<td>19,749</td>
<td>14,999</td>
<td>105,303</td>
</tr>
<tr>
<td>In-Patient Care</td>
<td>147,233</td>
<td>111,817</td>
<td>785,044</td>
</tr>
<tr>
<td>Support &amp; Therapy Centre</td>
<td>19,511</td>
<td>14,817</td>
<td>194,030</td>
</tr>
<tr>
<td>Community Palliative Care Team</td>
<td>29,222</td>
<td>22,193</td>
<td>155,811</td>
</tr>
<tr>
<td>Family Care Team</td>
<td>12,831</td>
<td>9,744</td>
<td>68,412</td>
</tr>
<tr>
<td>Information and Education</td>
<td>6,422</td>
<td>4,878</td>
<td>34,246</td>
</tr>
<tr>
<td></td>
<td>234,968</td>
<td>178,448</td>
<td>1,252,846</td>
</tr>
</tbody>
</table>

8. Investment management costs

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td></td>
</tr>
<tr>
<td>Investment manager fees</td>
<td>22,971</td>
<td>22,774</td>
</tr>
</tbody>
</table>

All of the above costs are attributable to unrestricted funds and included within raising funds costs.

9. Audit fees

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>£</td>
<td>£</td>
<td></td>
</tr>
<tr>
<td>Fees payable to the charity’s auditor for audit</td>
<td>12,500</td>
<td>12,905</td>
</tr>
<tr>
<td>Fees payable to the charity’s auditor for other services</td>
<td>1,000</td>
<td>1,000</td>
</tr>
</tbody>
</table>

All of the above costs are attributable to unrestricted funds and included within support costs. Included within the audit fee is £2,000 (2018: £2,155) for the audit of the subsidiary.
10. Net (expenditure)/income for the year

Net (expenditure)/income is stated after charging / (crediting):

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Depreciation of tangible fixed assets</td>
<td>205,516</td>
<td>222,401</td>
</tr>
<tr>
<td>Operating lease rentals</td>
<td>247,805</td>
<td>279,143</td>
</tr>
<tr>
<td>Trustees indemnity insurance</td>
<td>891</td>
<td>891</td>
</tr>
<tr>
<td>Net (gains)/losses on fair value movement of investments</td>
<td>(229,592)</td>
<td>8,051</td>
</tr>
</tbody>
</table>

12. Staff costs and employee benefits (continued)

The number of employees who received total employee benefits (excluding employer pension costs) of more than £60,000 is as follows:

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>£60,001 - £70,000</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>£70,001 - £80,000</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td>£80,001 - £90,000</td>
<td>1</td>
<td>-</td>
</tr>
</tbody>
</table>

11. Trustees' and key management personnel remuneration and expenses

The Trustees neither received nor waived any remuneration during the year (2018: £Nil).

The Trustees did not have any expenses reimbursed during the year (2018: £Nil).

The total amount of employee benefits received by key management personnel is £450,615 (2018: £405,435). The Trust considers its key management personnel comprises the Chief Executive, the Director of Finance and Resources, the Director of Clinical Services, the Consultant in Palliative Medicine and the Director of Income Generation & Marketing.

13. Tangible fixed assets – Group and Charity

Freehold land and buildings | Furniture, furnishings, vehicles and equipment | Total
---|---|---
Cost:  
At 1 April 2018 | 5,412,449 | 1,879,034 | 7,291,483
Additions | - | 127,759 | 127,759
Disposals | - | (4,112) | (4,112)
| At 31 March 2019 | 5,412,449 | 2,002,681 | 7,415,130
Depreciation:  
At 1 April 2018 | 1,227,323 | 1,733,126 | 2,960,449
Charge for the year | 107,832 | 97,684 | 205,516
Eliminated on disposals | - | (4,112) | (4,112)
| At 31 March 2019 | 1,335,155 | 1,826,698 | 3,161,853
Net book value:  
At 31 March 2019 | 4,077,294 | 175,983 | 4,253,277
At 31 March 2018 | 4,185,126 | 145,908 | 4,331,034

Included within freehold land & buildings is non-depreciable freehold land amounting to £21,000 (2018: £21,000). The Trustees believe that it is not practical to quantify any difference between the cost of freehold land and buildings and the fair value.
### 14. Fixed asset investments

#### Group

<table>
<thead>
<tr>
<th>Listed investments</th>
<th>Unrestricted funds</th>
<th>Endowment funds</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valuation:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At 1 April 2018</td>
<td>6,054,406</td>
<td>5,588</td>
<td>6,059,994</td>
</tr>
<tr>
<td>Additions</td>
<td>589,109</td>
<td>-</td>
<td>589,109</td>
</tr>
<tr>
<td>Disposals</td>
<td>(646,372)</td>
<td>-</td>
<td>(646,372)</td>
</tr>
<tr>
<td>Revaluation</td>
<td>35,820</td>
<td>260</td>
<td>36,080</td>
</tr>
<tr>
<td>At 31 March 2019</td>
<td>6,032,963</td>
<td>5,848</td>
<td>6,038,811</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Cost:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At 31 March 2019</td>
<td>4,724,906</td>
<td>3,361</td>
<td>4,728,267</td>
</tr>
<tr>
<td>At 31 March 2018</td>
<td>4,782,168</td>
<td>3,361</td>
<td>4,785,529</td>
</tr>
</tbody>
</table>

Investments at fair value comprise:

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equities</td>
<td>4,034,734</td>
<td>3,980,244</td>
</tr>
<tr>
<td>Securities</td>
<td>2,004,077</td>
<td>2,079,750</td>
</tr>
</tbody>
</table>

#### Charity

<table>
<thead>
<tr>
<th>Listed investments</th>
<th>Unrestricted funds</th>
<th>Endowment funds</th>
<th>Equity investment in subsidiary undertaking</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Valuation:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At 1 April 2018</td>
<td>6,054,406</td>
<td>5,588</td>
<td>100</td>
<td>6,060,994</td>
</tr>
<tr>
<td>Additions</td>
<td>589,109</td>
<td>-</td>
<td></td>
<td>589,109</td>
</tr>
<tr>
<td>Disposals</td>
<td>(646,372)</td>
<td>-</td>
<td></td>
<td>(646,372)</td>
</tr>
<tr>
<td>Revaluation</td>
<td>35,820</td>
<td>260</td>
<td></td>
<td>36,080</td>
</tr>
<tr>
<td>At 31 March 2019</td>
<td>6,032,963</td>
<td>5,848</td>
<td>100</td>
<td>6,038,811</td>
</tr>
<tr>
<td>Cost:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>At 31 March 2019</td>
<td>4,724,906</td>
<td>3,361</td>
<td>100</td>
<td>4,728,267</td>
</tr>
<tr>
<td>At 31 March 2018</td>
<td>4,782,168</td>
<td>3,361</td>
<td>100</td>
<td>4,785,529</td>
</tr>
</tbody>
</table>

The fair value of listed investments is determined by reference to the quoted price for identical assets in an active market at the balance sheet date. Investments in group undertakings are measured at cost less impairment on the basis that they represent shares in entities that are not publicly traded and the fair value cannot otherwise be measured reliably.

The charity’s equity investment in subsidiary undertaking is a 100% holding in the ordinary share capital of Kirkwood Hospice Enterprises Limited, a company incorporated in England & Wales (company number 7368034). The charity holds 100 shares of £1 each, these are the only shares allotted, called up and fully paid.

It pays all of its profits to the charity under the gift aid scheme. Kirkwood Hospice Enterprises Limited operates all commercial trading activity as fundraising in support of the charity. A summary of the trading results is shown below:

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turnover</td>
<td>194,459</td>
<td>164,708</td>
</tr>
<tr>
<td>Cost of sales and administration costs</td>
<td>(162,108)</td>
<td>(137,544)</td>
</tr>
<tr>
<td>Net profit</td>
<td>32,351</td>
<td>27,164</td>
</tr>
<tr>
<td>Amount gift aided to the charity</td>
<td>(32,351)</td>
<td>(27,164)</td>
</tr>
<tr>
<td>Retained in the subsidiary</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

The assets and liabilities of the subsidiary were:

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Current assets</td>
<td>86,527</td>
<td>59,804</td>
</tr>
<tr>
<td>Current liabilities</td>
<td>(86,427)</td>
<td>(59,704)</td>
</tr>
<tr>
<td>Total net assets</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td>Aggregate share capital and reserves</td>
<td>100</td>
<td>100</td>
</tr>
</tbody>
</table>
15. Stocks

<table>
<thead>
<tr>
<th></th>
<th>Group 2019</th>
<th>Group 2018</th>
<th>Charity 2019</th>
<th>Charity 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Catering &amp; housekeeping</td>
<td>£3,985</td>
<td>£4,744</td>
<td>£3,985</td>
<td>£4,744</td>
</tr>
<tr>
<td>Medical supplies</td>
<td>£12,301</td>
<td>£9,398</td>
<td>£12,301</td>
<td>£9,398</td>
</tr>
<tr>
<td>Shop and fundraising goods</td>
<td>£51,256</td>
<td>£38,597</td>
<td></td>
<td>£466</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>£16,286</td>
<td>£14,608</td>
</tr>
</tbody>
</table>

Stock held is for use to further the charity’s activities or for sale in the charity and gift shops.

16. Debtors

<table>
<thead>
<tr>
<th></th>
<th>Group 2019</th>
<th>Group 2018</th>
<th>Charity 2019</th>
<th>Charity 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade debtors</td>
<td>£49,046</td>
<td>£157,964</td>
<td>£44,356</td>
<td>£155,587</td>
</tr>
<tr>
<td>Amounts owed by group undertakings</td>
<td>-</td>
<td>-</td>
<td>£59,487</td>
<td>£51,298</td>
</tr>
<tr>
<td>Prepayments and accrued income</td>
<td>£263,390</td>
<td>£164,590</td>
<td>£261,640</td>
<td>£162,840</td>
</tr>
<tr>
<td>Legacies notified in advance</td>
<td>£1,258,115</td>
<td>£743,590</td>
<td>£1,258,115</td>
<td>£743,590</td>
</tr>
<tr>
<td></td>
<td>£1,570,551</td>
<td>£1,066,144</td>
<td>£1,623,598</td>
<td>£1,113,315</td>
</tr>
</tbody>
</table>

17. Creditors: amounts falling due within one year

<table>
<thead>
<tr>
<th></th>
<th>Group 2019</th>
<th>Group 2018</th>
<th>Charity 2019</th>
<th>Charity 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Trade creditors</td>
<td>£247,782</td>
<td>£403,917</td>
<td>£222,642</td>
<td>£397,276</td>
</tr>
<tr>
<td>Other tax and social security</td>
<td>£93,688</td>
<td>£91,182</td>
<td>£93,688</td>
<td>£91,182</td>
</tr>
<tr>
<td>Accruals</td>
<td>£271,150</td>
<td>£267,982</td>
<td>£269,351</td>
<td>£266,117</td>
</tr>
<tr>
<td>Deferred income (note 19)</td>
<td>£69,454</td>
<td>£63,152</td>
<td>£69,454</td>
<td>£63,152</td>
</tr>
<tr>
<td></td>
<td>£682,074</td>
<td>£826,233</td>
<td>£655,135</td>
<td>£817,727</td>
</tr>
</tbody>
</table>

18. Leases

Total future minimum lease payments under non-cancellable operating leases are as follows:

<table>
<thead>
<tr>
<th></th>
<th>Group 2018</th>
<th>Group 2017</th>
<th>Charity 2018</th>
<th>Charity 2017</th>
</tr>
</thead>
<tbody>
<tr>
<td>Not later than one year</td>
<td>£186,257</td>
<td>£226,115</td>
<td>£179,257</td>
<td>£219,115</td>
</tr>
<tr>
<td>Later than one and not later than five years</td>
<td>£589,477</td>
<td>£567,895</td>
<td>£561,477</td>
<td>£539,895</td>
</tr>
<tr>
<td>Later than five years</td>
<td>£201,167</td>
<td>£298,667</td>
<td>£188,917</td>
<td>£279,417</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>£976,901</td>
<td>£1,092,677</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>£929,651</td>
<td>£1,038,427</td>
</tr>
</tbody>
</table>

19. Deferred income – Group and Charity

Income has been deferred which has been received in advance for future lottery draws.
### 20. Fund reconciliation

#### Unrestricted funds

<table>
<thead>
<tr>
<th></th>
<th>Balance at 1 April 2018</th>
<th>Income</th>
<th>Expenditure</th>
<th>Transfers</th>
<th>Investment losses</th>
<th>Balance at 31 March 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Unrestricted</td>
<td>5,697,912</td>
<td>7,126,327</td>
<td>(7,060,419)</td>
<td>(97,079)</td>
<td>229,332</td>
<td>5,896,073</td>
</tr>
<tr>
<td>Designated Fixed Asset fund</td>
<td>4,314,910</td>
<td>-</td>
<td>(196,854)</td>
<td>135,221</td>
<td>-</td>
<td>4,253,277</td>
</tr>
<tr>
<td>Designated project fund</td>
<td>2,400,765</td>
<td>-</td>
<td>(128,061)</td>
<td>-</td>
<td>-</td>
<td>2,272,704</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>12,413,587</td>
<td>7,126,327</td>
<td>(7,385,334)</td>
<td>38,142</td>
<td>229,332</td>
<td>12,440,421</td>
</tr>
</tbody>
</table>

#### Restricted funds

<table>
<thead>
<tr>
<th></th>
<th>Balance at 1 April 2018</th>
<th>Income</th>
<th>Expenditure</th>
<th>Transfers</th>
<th>Investment losses</th>
<th>Balance at 31 March 2019</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
<td>£</td>
</tr>
<tr>
<td>Restricted fixed asset fund</td>
<td>32,398</td>
<td>21,925</td>
<td>(8,662)</td>
<td>(38,142)</td>
<td>-</td>
<td>7,159</td>
</tr>
<tr>
<td>Share and Care fund</td>
<td>-</td>
<td>15,500</td>
<td>(15,500)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Breathe Better fund</td>
<td>-</td>
<td>15,088</td>
<td>(15,088)</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>CNS Care Home</td>
<td>-</td>
<td>5,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>5,000</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>32,398</td>
<td>57,513</td>
<td>(39,250)</td>
<td>(38,142)</td>
<td>-</td>
<td>12,519</td>
</tr>
<tr>
<td>Endowment</td>
<td>5,886</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>260</td>
<td>5,848</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>37,286</td>
<td>57,513</td>
<td>(39,250)</td>
<td>(38,142)</td>
<td>260</td>
<td>18,367</td>
</tr>
</tbody>
</table>

#### Fund descriptions

- **a) Unrestricted funds**: The general funds are available for the use at the discretion of the charity in furtherance of the general objectives as detailed in the Trustees report.
- **b) Designated funds**: Kirkwood Hospice has clear policy and procedures to guide its management of reserves. The policy clarifies in more detail that the charity will hold designated funds to provide for specific future projects that are unlikely to be met by future income alone.
- **c) Restricted funds**: The restricted fixed asset fund includes restricted income which has been received for equipment for the charity.
- **d) Endowment funds**: The endowment fund is made up of investments transferred to the charity on condition that the capital should be retained and the income generated either retained or used to support the charities general activities, income generated by the endowment fund is considered to be unrestricted income.

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

#### Unrestricted funds

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fixed assets</td>
<td>6,032,963</td>
<td>4,253,277</td>
</tr>
<tr>
<td>Cash &amp; current investments</td>
<td>-</td>
<td>1,179,795</td>
</tr>
<tr>
<td>Other current assets</td>
<td>545,184</td>
<td>1,092,909</td>
</tr>
<tr>
<td>Current liabilities</td>
<td>(682,074)</td>
<td>-</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>5,896,073</td>
<td>5,848</td>
</tr>
</tbody>
</table>

#### Designated funds

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Invested in tangible fixed assets</td>
<td>(4,253,277)</td>
<td>(4,314,910)</td>
</tr>
<tr>
<td>Designated project fund</td>
<td>(2,272,704)</td>
<td>(2,400,765)</td>
</tr>
<tr>
<td><strong>General reserve</strong></td>
<td>5,896,073</td>
<td>5,697,912</td>
</tr>
</tbody>
</table>

### 22. Reconciliation of net income to net cash flow from operating activities

#### Group

<table>
<thead>
<tr>
<th></th>
<th>2019</th>
<th>2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Net (expenditure) / income for year</td>
<td>(11,152)</td>
<td>(333,158)</td>
</tr>
<tr>
<td>Interest receivable</td>
<td>(334)</td>
<td>(2,388)</td>
</tr>
<tr>
<td>Dividends receivable</td>
<td>(168,155)</td>
<td>(170,890)</td>
</tr>
<tr>
<td>Depreciation of tangible fixed assets</td>
<td>205,516</td>
<td>222,401</td>
</tr>
<tr>
<td>(Gains) / losses on investments</td>
<td>(36,080)</td>
<td>(36,080)</td>
</tr>
<tr>
<td>(Profit) on disposal of fixed asset investments</td>
<td>(193,512)</td>
<td>(215,366)</td>
</tr>
<tr>
<td>(Increase) in stock</td>
<td>(14,803)</td>
<td>(7,426)</td>
</tr>
<tr>
<td>(Increase) / decrease in debtors</td>
<td>(504,407)</td>
<td>(105,351)</td>
</tr>
<tr>
<td>(Decrease) / increase in creditors</td>
<td>(144,159)</td>
<td>(510,283)</td>
</tr>
<tr>
<td><strong>Net cash flow from operating activities</strong></td>
<td>(867,086)</td>
<td>(42,414)</td>
</tr>
</tbody>
</table>
23. Pensions and other post-retirement benefits

Employees of the charity are entitled to join either the NHS Pensions Scheme (eligible employees only), or the Kirkwood Hospice Stakeholder Pension Plan.

**NHS Pension Scheme**

Eligible employees are able to remain in the NHS Pensions Scheme as if they were still in the employment of an employing authority. The NHS Pension Scheme is an unfunded occupational pension scheme backed by the Exchequer, which is open to all NHS employees and employees of approved organisations. The scheme provides pensions, in varying circumstances for employees of participating employers. The scheme receives contributions from employers and employees to defray the costs of pensions and other benefits. The scheme is subject to a full actuarial valuation every four years and an accounting valuation every year. Details of benefits payable, and the basis for valuations under these provisions can be found on the NHS Pensions website at www.nhbsa.nhs/pensions. The scheme is accounted for as a multi-employer scheme under the Charity SORP (FRS102) and, as no surplus or deficit is able to be identified and allocated to the separate employer, the contributions have been accounted for as a defined contribution scheme and no share of the surplus or deficit included in these financial statements.

In the year ended 31 March 2019, the charity made contributions to the NHS Pension Scheme totalling £239,825 (2018: £230,331). Employer contributions were 14.38% and employee contributions were in the range of 5% to 13.5% of pensionable pay.

**Other Pension Schemes**

Other employees are entitled to join the AEGON - Kirkwood Hospice Stakeholder Pension Plan, which is a defined contribution scheme. The contribution rates for this scheme are 7.5% of pensionable pay for the employer and 6% of pensionable pay for the employee. New employees are Auto-enrolled if eligible into this scheme, the contribution rates being 2% for the employer and 3% for the employee. The employee then has the option to increase their contributions to 6% if they so wish. In the year ending 31 March 2019, the charity paid contributions to the schemes totalling £95,916 (2018: £79,712).

The contributions are allocated to unrestricted funds.

24. Contingent asset

At the year end the charity had 1 legacy confirmed which the Trustees believe is unable to be measured reliably as the solicitors at present are unable to quantify the value of the proposed estate.

25. Financial commitments

Contractual commitments for the acquisition of tangible fixed assets contracted for but not provided in the financial statements amounted to £10,869 (2018 - £Nil).

26. Related party transactions

During the year donations totalling £3,442 (2018 - £5,371), excluding the value of donated goods, were received from Trustees, none of these had conditions attached. There were no other related party transactions.

The charity is controlled by the Trustees. No one Trustee has ultimate control.
Getting in touch

24/7 Specialist Advice Line: 01484 557910
Kirkwood Main Reception: 01484 557900
Fundraising: 01484 557911
Web: www.kirkwoodhospice.co.uk
Email: info@kirkwoodhospice.co.uk