

RENNIE GROVE HOSPICE CARE
TRUSTEES' ANNUAL REPORT AND FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

Registered Company Number 07479930
Registered Charity Number: 1140386

**RENNIE GROVE HOSPICE CARE
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**RENNIE GROVE HOSPICE CARE
REFERENCE AND ADMINISTRATIVE DETAILS
FOR THE YEAR ENDED 31 MARCH 2022**

Charity Name	Rennie Grove Hospice Care	
Charity Number	1140386	
Company Number	07479930	
Registered Office	Grove House Waverley Road St Albans Hertfordshire, AL3 5QX	
Trustees	Prof S Spiro (Chairman) Mr C Inman OBE (Vice Chairman) Mr J Wroe (Treasurer) Mr S Hamill Mr M Ferguson Dr A Wainwright Mrs J Macleod Dr L Baillie Mrs P Nightingale MBE Mr E Pillinger Mr G Upward	
Company Secretary	Mrs J MacLeod	
Chief Executive Senior Management	Mr DS Marks Ms R Ahmad Mrs D Gould Mrs T Hancock Mrs S Howard Mrs K Pezet Mrs P Pickersgill Mrs P Scott	
Auditors	Haysmacintyre LLP 10 Queen Street Place London, EC4R 1AG	
Bankers	Barclays Bank plc 22-24 Upper Marlborough Road, St Albans, Herts AL1 3AL	
Solicitors	Sherrards Solicitors 45 Grosvenor Road St Albans Herts, AL1 3AW	Matthew Waite & Co Ariel House Frogmore Street Tring, Herts, HP23 5AU

Our Year in Review

In some ways the last year has been a quieter year. Last year's report was dominated by the COVID pandemic, how all our staff reacted so positively to it and we were able to continue the vital clinical work and support we always aim to provide. We have progressed out of COVID during 2021-22 and, now, having got over the latest wave of infection, are looking to the future once again. Our staff are still performing regular lateral flow tests and being careful.

The immediate effects of the pandemic have been that many staff have endured stressful times and nationally work patterns have changed with more flexible work patterns and at home working. These may be two of the reasons why, for the first time, it is harder to recruit staff, especially clinical staff. The cost of living crisis doesn't help and we are doing what we can to make RG an attractive place to work and also be competitive with our pay scales. However, this, together with the general nursing shortages, is a national issue.

Nevertheless, our mission has remained solid and we have once again looked after as many families this year than before.

We have re-opened Grove House and had an official opening with Baroness Illora Findlay of Llandaff and the Lord Lieutenant of Hertfordshire. Distancing restrictions have been eased a little and we are beginning to see more patients on any one day. The bereavement services based at Grove House are growing and as a result there is a waiting list which we are constantly trying to reduce. An innovation at Grove House is a monthly play therapy session on a Saturday morning for children connected across all our services - pre and post bereavement from the death of a relative (sibling or parent) - which gives them and their families the opportunity to meet with other people in similar circumstances.

Our income, despite the worries about longer term effects of COVID, has been buoyant once again. Our supporters have stepped up yet again with fundraising overachieving on its forecast in every area. It is worth emphasising the potential importance of legacies in safeguarding our future. We now have almost 200 pledgers, and this year have received the biggest legacy in our history. The result is a very healthy reserve position and, in turn, an opportunity to allocate some designated funds for future essential projects as we continue to expand our work.

Our retail directorate has faced big challenges after the lockdowns and has turned in a contribution of £500,000 following a big deficit last year as shops were closed for long periods. Our Director of Retail & Trading has developed new ideas to forecast a better income this year and is always on the lookout for new opportunities. Our online sales, for example, have shown a dramatic increase, and she is developing boutique shops in some areas.

The Rapid Personalised Care Service in Herts has continued to be hugely valued and successful. We have now bid successfully to pilot a similar service in Bucks, together with Florence Nightingale Hospice, which we are confident will grow rapidly as it allows patients to get out of hospital fast by providing essential help with daily living, and without delay, as well as keeping patients at home.

It is notable that with people living longer, and illnesses becoming more complex with better maintenance of quality of health, that about half of our patients do not have cancer as a primary diagnosis. This is important as, to many, a hospice service means "cancer". Not so, we are there for all illnesses, including chronic illness such as respiratory and cardiac conditions. This is reflected in our Outpatient services, provided from Grove House.

**RENNIE GROVE HOSPICE CARE
CHAIRMAN'S REPORT
FOR THE YEAR ENDED 31 MARCH 2022**

A significant development was the appointment of a Consultant Physician in Palliative Care, Dr Lisa Nolan, jointly with Peace Hospice Care (PHC). Lisa works 3 days a week for Rennie Grove but has rapidly become so busy and needed, she has had to confine her services to Herts, whilst support from the Palliative Care Physicians at Florence Nightingale continues as before for our staff and patients in Bucks.

This is just one of several collaborations bearing fruit. We are also working jointly with PHC to combine our day centre activities and also education and training for all our staff. We are still hoping to work jointly in Wycombe with South Bucks Hospice whose day centre is situated in one of our busiest areas.

Our volunteers remain an invaluable asset. COVID caused many to stop working with us, especially those who gave time to the shops. Fortunately, the numbers helping us have bounced back. We need expertise in all areas of the organisation; whether it's the shops, finance, facilities, IT, HR, digital knowledge, we do need and welcome those who have expertise and some time to give. It's so helpful to us and rewarding to the volunteer. Just one example is our Supporting Hands scheme, where, after training, volunteers provide respite and can help with some tasks to families in need of a break in providing care.

I also want to thank the work ethic and dedication of all our staff, and in particular the Senior Management Team who, under Stewart Marks's stewardship have enabled Rennie Grove to have another successful year with the future looking reasonably secure. The Board of Trustees has once again given much support and time, not only by attending the Board meetings, but most sit or chair the subcommittees and we could not function without them

We were very sad to learn that Jenny Provin, Chief Executive between 2013 and 2018, died earlier this year after a long illness with cancer. Many from Rennie Grove attended her funeral and met her husband and two children. Jenny made a very significant improvement to the management of Rennie Grove, was always available, great to work with, knew every member of staff and is much missed.

Rennie Grove has always believed that greater collaboration across the hospice sector can only benefit our stakeholders. Our successful collaborations with Peace Hospice Care led us to the inevitable conclusion that we should consider a merger between our two strong and established charities. A huge amount of work has been carried out by the Trustees and Senior Management to determine whether a merger can be successful. I am delighted that the Trustees of Rennie Grove and Peace Hospice Care all concluded in favour of a merger. I am also delighted that our valued members support the merger. As I write we are awaiting Charity Commission blessing, and then we shall be ready to create the new Charity. This all makes me very confident and excited about the future.

Professor Stephen Spiro

Chairman

The Board of Trustees presents its report and accounts for the year ended 31 March 2022 which comply with the requirements of *the Companies Act 2006*, the Charities Statement of Recommended Practice (SORP) and *the Charities Act 2011*.

The Trustees' Report incorporates the requirements of the Strategic Report, as required by *the Companies Act 2006* (Strategic Report and Directors' Report) Regulations 2013.

OBJECTIVES AND ACTIVITIES

Charitable Objects and Purpose

Rennie Grove Hospice Care provides care and support for adults, children and their families affected by cancer and other life-limiting illnesses from diagnosis, whether on a known curative pathway or not. Our offer is focused on interventions of care from self-management through to specialist palliative and end of life care. This can be accessed through day services at Grove House and our 24-hour Hospice at Home Service.

In line with the UK's independent hospice movement, Rennie Grove's services are provided at no cost to patients or their families. Nurses and clinicians provide specialist care as well as practical, hands-on nursing care for patients of all ages, both adults and children, with a range of terminal and life-threatening illnesses.

Rennie Grove's charitable purposes are set out in the objects contained in the company's Memorandum of Association. In Section 4, the objects are defined as 'the relief of sickness' and this is further defined in relation to the charitable purposes through a series of more detailed objects. The objects all support the Charity's purpose which is the provision of a specialist palliative nursing care service to patients with life-limiting illness.

Public Benefit

Rennie Grove Hospice Care is a Public Benefit Entity. The Trustees confirm that they have complied with their duty under section 17 of the Charities Act 2011. They have considered the public benefit guidance published by the Charity Commission and believe that they have followed it. This report provides details of the areas of charitable activity undertaken by Rennie Grove Hospice Care.

The focus of our work is to ensure that patients living in north west Hertfordshire and the mid and south areas of Buckinghamshire with a palliative diagnosis have the choice about how and where they want to be cared for towards the end of life.

The community service at Rennie Grove provides services in line with the aim of the *End of Life Care Strategy (2008)* to provide services people need to enable them to be cared for at home and to die there if that is their choice. This is reflected in our Vision. It also accords with the Department of Health Publication, '*Our commitment to you for end of life care: the Government Response to the Review of Choice in End of Life Care (2016)*'.

Hospice at Home Adult Nursing Service

The Rennie Grove Hospice at Home adult nursing service provides a 24-hour responsive nurse led service to patients living in the mid and south areas of Buckinghamshire and north west Hertfordshire. The day teams are locality based with two teams in Hertfordshire and three in Buckinghamshire and an overnight team provides cover across the entire area. The teams are led by Clinical Nurse Specialists who manage caseloads of patients referred from groups of GP practices. They manage symptoms for patients and support for families and carers with teams of trained and experienced community nurses and health care assistants enabling patients to remain at home by providing practical, personal and supportive care. Rennie Grove nurses and clinicians work collaboratively with GPs, District Nurses and a range of other hospice and NHS providers and receive medical support from Palliative Care Consultants in Buckinghamshire and Hertfordshire.

Evaluation of responses to patient and carer satisfaction surveys demonstrates that patients and their families place a high value on 24-hour responsive on-call services and evidence from clinical audit suggests that this also enables more patients to remain at home and avoid unnecessary admission to hospital.

Over 91% of patients who express a wish to die at home achieve this within the care of Rennie Grove. The national average is 27%.

We have seen a slight decrease in patient numbers however this is due to patients having more complex needs and there has been a requirement to focus the care delivered to those patients and families in most need.

External referrals to the service in the year were 2,145. 45% of our patients in 2021-22 did not have cancer as a primary diagnosis.

Hospice at Home Children's Service

The Rennie Grove children's hospice at home nursing team provides palliative and end of life care and respite for children and young people up to the age of 19 with life-limiting and life-threatening illnesses. Many of these young patients have complex conditions other than cancer which require nurses to have excellent and wide-ranging clinical skills and expertise. The children's nursing team continues to care for increasing numbers of children at the end of their lives and this remains an important part of our work.

The respite element of the service provides parents, siblings and carers with essential breaks from unrelenting caring and the 24-hour element ensures the availability of nurses for home visits during crises if necessary. All elements and the associated advice and support are valued highly by families.

Improving the integration of services for children in our area and the transition of young people into adult services remain challenging, in part due to the different nature of services available. There are ongoing strategic plans to develop and provide services for young people in transition to meet some of the known challenges faced during this phase.

The Pepper Foundation continues to provide funding for the Children's Service team and the service is also funded by NHS England. The Pepper Foundation has supported the development of this service over many years and has committed to raise funds to support the service into the future. Rennie Grove is deeply grateful for this long term and committed engagement.

Throughout 2021-22 we cared for 68 children with life-limiting conditions.

Living Well Services

Rennie Grove Hospice Care at Grove House provides care and support for patients and families affected by cancer and other life-limiting illnesses from diagnosis. Focused interventions of care to support self-management and wellbeing through to specialist palliative and end of life care are offered and can be accessed through day services at Grove House and the 24-hour Hospice at Home Service.

Patients attending Grove House can access specialist palliative care nurses, occupational therapists, complementary therapists and a physiotherapist. The team offers symptom control and coping strategies, enabling patients with advancing illness to live independently at home for longer.

Other services available at Grove House include specialist advice and support clinics, classes such as acupuncture, t'ai chi and yoga or our drop-in session for patients, carers and professionals. An 'Inspire' group has also been developed to help patients with long-term breathing difficulties.

Living Well services as group sessions were able to gradually recommence in 2021-22 allowing patients to continue to benefit from a holistic approach to improve their health and wellbeing.

Rapid Personalised Care Service

Rapid Personalised Care Service (RPCS) is a fully funded statutory service commissioned by Herts Valleys CCG. Between 1 April 2021 and 31 March 2022 the service provided personal care for 545 patients making 25,711 visits enabling them to spend their last weeks at home. Care packages for 100% of the patients referred to the service began within 48 hours.

The Buckinghamshire RPCS service was introduced in January 2022 and is a pilot service which we hope will become a substantive service for our Buckinghamshire patients in 2023. Between January 2022 and March 2022 965 visits were made.

Family and Bereavement Support

The Family Support Team provides a range of services for patients, families and carers. These include one-to-one work by qualified counsellors and Rennie Grove trained listeners, group work for carers and for the bereaved, and telephone support (from counsellors or listeners).

The Supporting Hands service offers practical support to families during illness, for example sitting with patients, light housework, befriending and support services. This Team works alongside all the nursing and clinical teams, offering support for families facing the loss of a loved one and enabling care to be extended into the post-bereavement period.

The team made 2,295 visits and 4,696 phone calls to patients, carers and bereaved people during 2021-22 to ensure they received help and support where and when it was needed.

Professional Development

Excellent training and support are vital to the professionalism of the nursing and clinical teams so that they can develop competencies as health care professionals. New nurses and clinicians joining the service receive a comprehensive induction, mentorship and training as well as regular professional updates throughout their career with Rennie Grove. Nurses are offered support through the revalidation process which is required to demonstrate continuous learning and development and to maintain registration.

The team works in partnership in both Buckinghamshire and Hertfordshire to deliver training to generalist practitioners to support the development of palliative care expertise.

Governance and Audit

Rennie Grove Hospice Care is registered with the Care Quality Commission (CQC) and our Clinical Governance Team works through a clinical audit programme. This team works with other hospices to develop joint standards and audits with a view to standardising practice and developing ways to monitor our performance. The CQC audit practice and their last assessment, in 2016, is published as required on the Charity's website. Non-clinical areas including Health and Safety are audited by external consultants or volunteers.

Safeguarding of Adults and Children

All necessary staff and volunteers complete the required safeguarding training and ensure safeguarding of patients and their families in accordance with the Rennie Grove Safeguarding of Vulnerable Adults and the Safeguarding of Children Policies and Procedures.

OUR STRATEGY - MEETING THE NEED 2019-22

Our Purpose

We believe that everyone with a life-limiting illness should be able to live well for as long as possible and have the choice to die at home.

We will put you and your family at the heart of the specialist care we provide, visiting day and night, supporting you to live the best quality life you can and to make every moment matter.

Our Values

We are caring and compassionate.

We engage and empower.

We strive for excellence.

We develop and innovate.

We respect and value.

National Challenges

Rennie Grove like other hospices across the UK faces increasing challenges, including:

1. More people, living longer into older age.
2. Increasing number of inappropriate hospital admissions for patients at or nearing the end of life, adding to NHS pressures.
3. Lack of co-ordination of support for those caring for people at the end of life.
4. More people are living in care homes as they near the end of life who often have an unsatisfactory end-of-life experience.

Key Strategic Aims

To enable Rennie Grove to meet these challenges the 2019-22 Strategy concentrates on the following four key aims:

1. To support GP's and other Healthcare Professionals to identify patients who would benefit from Rennie Grove services.
2. To provide services to a wider number of people at an earlier stage to plan better for the end of life and reduce inappropriate hospital admissions.
3. To ensure our services are personalised and flexible to fit both patients and those caring for them.
4. To develop expertise within and in support of care homes to improve end-of-life experiences.

To ensure we have the objectives of this Strategy in mind we work with the following approach through three key channels of Engagement, Efficiency and Improvement.



OPERATIONAL REVIEW YEAR THREE 2021-22

For the third year of our 2019-22 Strategy, we continued to coordinate key projects across Rennie Grove.

Responding to the Coronavirus (COVID-19) pandemic and the challenges it continues to bring has continued to impact on our achievements in 2021-2022. The Senior Management Team and wider organisation, both staff and volunteers, managed themselves and their responsibilities throughout the year with considerable energy and focus on ensuring that our service provision, to patients and their families, was our top priority.

Whilst the year was challenging, we have ensured patients and families continued to receive excellent care and support. We protected the vulnerable patients and our workforce. We complied with the numerous legal requirements and guidelines. Communication was crucial and we continued to develop digital communications all whilst sustaining our income. We worked collegiately and cohesively in every aspect of ensuring business continuity and responsiveness to the crisis.

Some of our key strategic achievements are noted in the following paragraphs.

Nursing & Patient Services

During the year we delivered rigorous and effective safe management of COVID-19 from a clinical perspective. 2021-22 continued to be dominated with the management of the COVID-19 situation and constant changes to PPE guideline.

Clinical guidance was also given towards the whole organisation's management of the pandemic and the arrangement and organisation of the COVID-19 vaccination and weekly testing programmes.

The need to report clinical capacity and activity daily for NHS England to support additional HM Government funding continued for 2021-22.

RPCS continues to be a highly regarded service with excellent feedback received from families, commissioners, and GPs. The development of this service has included important input from our HR and Finance teams in the recruitment of the staff and in the monitoring of the income and expenditure to ensure robust financial management and the model is now being piloted in Buckinghamshire.

Following our review of the adult Hospice at Home workforce that helped us to define capacity and workforce requirements, our change management plan is on track to be delivered by Summer 2022. During the last year:

- We have made significant progress on our ambition to have a suite of policies, processes and guidelines that are evidence based and give a clear clinical governance framework.
- Two Clinical Nurse Specialists who had yet to undertake the Independent Prescribers programme are now nearing completion of their courses. For one, this has invigorated

their enthusiasm for practice and stimulated their learning and development more than they initially thought.

- Our approach to annual appraisals has been re-launched with a more structured approach to who supports the individual nurse through their appraisal.
- We have revised and relaunched the clinical supervision & coaching processes so that individuals have better access to this type of support.
- Our Operational Managers now have good oversight of day-to-day delivery of the Hospice at Home service, and we are beginning to make progress on our data collection analysis to help progress operational effectiveness.
- Our framework for continuous improvement, problem solving, and reflection has been strengthened by the introduction of Root Cause Analysis, Shared Learning in Practice and Corrective and Preventative Actions process which we now report via our Internal Clinical Governance Group meetings.

As Rennie Grove has not had an employed medical resource for several years, we worked with Peace Hospice Care to jointly fund a consultant post. Dr Lisa Nolan joined Rennie Grove in October 2021 and works three days a week across our Hertfordshire services. Dr Nolan has established good working relationships with neighbouring Consultants in Palliative Medicine. Our relationship with the Consultants at Buckinghamshire Healthcare NHS Trust remains strong and their support of our nurses and patients is invaluable.

Finance & Facilities

COVID-19 continued to create additional work including the requirement to provide monthly reporting to Hospice UK to continue to meet requirements to secure HM Government funding as well as claiming Furlough monies and ensuring claims were compliant with HMRC requirements. Risk assessments and Health and Safety compliance were regularly updated to reflect the constant changes.

Information and Communications Technology

Moving on from the strict government guidance to work from home wherever possible, we have now adopted a more flexible approach, gave staff and volunteers the opportunity to combine office based with home working where appropriate.

As a result of the rapid adoption of MS Teams for virtual meetings during COVID, it has now become a standard tool for meetings, reducing expenses and time spent travelling. During the year we completed the migration to cloud hosted MS SharePoint and are now looking to develop our knowledge of other products within the 365 suite. We are actively pursuing a policy of "cloud first" when replacing business applications to facilitate secure access from anywhere and reduce the burden of maintaining our premises infrastructure.

Cyber Plus and penetration tests were conducted by an external auditor during the year. The deployment of improved virus detection software and email filtering tools have both provided evidence of the need to continue to keep our security measures under frequent review and to stay vigilant.

Fundraising

2021-22 saw us being able to slowly return to face-to-face fundraising and event delivery whilst continuing to offer several virtual activities as we began to see restrictions reducing.

The Team Forge cyclists completed their postponed Isle of Wight cycle challenge in September raising £180,000. The Chilterns 3 Peaks Challenge, also in September, saw a record number of participants, with over 1,000 people taking part. We also successfully launched a new Open Water Swim event which was very well received. All other income streams outperformed and we closed the year considerably ahead of our target.

A Database Manager was successfully recruited, bringing management of our Raisers Edge database in-house, allowing us to continue to develop and refine the data we record to help inform future strategy.

A review of the individual giving programme was undertaken, and an action plan created to focus on this area of giving in the coming year. The charity also received the largest legacy gift in its history.

Retail & Trading

Our shops have gradually been recovering from the effects of COVID-19 lockdowns, with footfall gradually increasing and trading patterns moving back toward pre COVID patterns as the financial year progressed. Lower than required staff and volunteer levels hindered sales recovery, a result of both recruitment and sickness issues, and resulted in shop closures and missed opportunities within shops.

In line with worldwide retail trends, our Online activity has been excellent, with very strong growth in eBay and the successful introduction of selling through fashion apps, such as Depop and Vinted. We have also seen strong growth in new goods.

Coming out of COVID it was important to focus on our people, and we have successfully introduced "The Retail Academy," which was very well received by the team. This is an in-house training programme, giving people and financial management skills alongside visual merchandising training. The Academy will run each year going forward, with additional training modules for all the team.

Communications

With the pandemic reinforcing the need for an even bigger focus on digital marketing activity, we appointed a digital agency to work with us on the development of a new website to deliver a first-class user experience and act as a hub to drive further digital marketing developments. The new website launch is currently planned for August 2022. A roadmap for future website developments has already been created to ensure that the website continues to evolve and improve as a digital tool which is a central part of our digital marketing strategy.

We appointed a Clinical Content Manager to support clinical communications. A key focus for this role is on building stronger relationships with our referrers to raise the profile of the services we provide, help ensure that referrals are appropriate and to support our strategic

aim to ensure that our services are accessed by as many people who need them as possible. There will also be a focus on strengthening relationships with patients and families to highlight the many ways in which we can support them throughout their journey and encourage them to access the care and support they need.

We put in place tailored programmes of communication for different groups of people first making contact with Rennie Grove to deepen engagement and encourage higher levels of support. We also completely updated our hospice at home photo library following the adoption of uniforms for our nurses.

Staff and Volunteers

Health and Wellbeing

We supported the health and wellbeing of our staff by supplementing our Employee Assistance Programme (EAP) with mental health foundation booklets and the promotion of the Hospice UK service, Frontline. A health and wellbeing working group has been set up to develop other initiatives.

Pay and Remuneration

A salary benchmarking of clinical and non-clinical roles was carried out against market to address those with the largest salary gap based on charity specific data and the NHS. We will need to review recruitment and retention strategies to remain competitive in this challenging recruitment market. The HR & Volunteering Advisory Group advises the Senior Management Team in developing pay and benefits. Two Trustees represent the Board on this group.

Environmental

Rennie Grove has formed a working group to look at its environmental impact and, after some initial conversations, it is clear that we do a significant amount, particularly in the Retail area, but we need to look at how we publish what we are doing and what we intend to do. Courses attended have highlighted that Sustainability needs to be embedded across the organisation and will form part of the new strategy as this is developed. In 2022-23 Rennie Grove will purchase software to measure the carbon footprint of all the shops and offices.

Volunteers

Volunteers continue to support us to deliver our services to more and more people, and act as ambassadors in our community, spreading the word about the vital work that we do and the many different ways in which people can support us.

After the initial drop off of numbers due to the pandemic, volunteer involvement has grown, and we now have 1292 active volunteers across 64 unique roles. Just over 50% of those volunteers work tirelessly within our retail shops to help bring in vital funds, making our shops engaging and inviting places for members of our local communities to visit and shop. We have worked closely with the retail team to improve the recruitment process for volunteers to make it quicker, smoother and more professional.

We have continued to support the services that our Family Support team deliver, recruiting 24 new volunteers.

We have been working with the Children's team to engage volunteers to help our Play therapist at Grove House, and visits from our Pets as Therapy (PAT) dogs. We hope to be able to expand this important support.

Volunteers have continued to adapt to the ever-changing COVID rules and have settled into the new ways of working well. Engagement has been a vital part of that, and we have continued with regular Zoom updates for volunteers from the Chief Executive and Director of Retail and Trading. We have worked closely with our Fundraising and Communications teams to ensure that the email communications that we send to our volunteers are engaging and continue to encourage their support.

Having supported our volunteers and line managers through the most difficult times of the pandemic, we have regained stability, and so will be looking to the challenges of the next year and beyond. We have bought a new volunteer management database that will ensure our recruitment and induction process is appropriate for the 21st century volunteer and will also allow us to engage more directly with volunteers in a targeted way. We have also updated and refreshed our mandatory training programme for volunteers and will be rolling that out during 2022. This is an important investment in our volunteer workforce and will run alongside our staff education programme to make sure that volunteers are fully equipped to carry out their roles safely and we are making the most of the time and commitment they give us.

As people begin to feel the pressure of rising prices, and the job market continues to be buoyant, we may find that people's priorities change, and they have less time to volunteer. We will need to be able to respond to this changing situation with engaging, flexible, and interesting roles and targeted recruitment practices.

FINANCIAL REVIEW

The budget for 2021-22 was agreed in March 2021 taking into consideration the continued impact COVID-19 might have on the financial position of the organisation. The budget had a substantial anticipated deficit. The budget was set assuming that there would be no further Government support in 2021-22 to deal with the pandemic. Throughout the year there has been close monitoring of the financial position and regular forecasting.

Income for the year was £13.1m (2021: £11.9m) which was up 10% on the previous year. Expenditure was £9.4m (2021: £8.8m) up 7% on the previous year.

The Charity is delighted to be reporting a surplus of £3.9m (2021: £3.5m). Whilst this represents an outstanding performance in the year, the results have benefited from non-recurring credits, government grants and an exceptional legacy. Comments on key features of the results are given below:

Government Support

Hospice UK represented the Hospice Sector in liaising with Government to secure funding for hospices throughout the pandemic.

NHS England awarded funding to help deal with the impact of the Omicron variant from December 2021 to March 2022 to provide support to people with complex needs in the context of the COVID-19 situation. To secure this funding the organisation was required to complete a daily patient activity tracker and monthly financial returns. All additional income from NHS England has been restricted in 2021-22 and has been used to fund charitable activities. A total of £817k (2021: £2,730K) was received from Hospice UK.

Government Retail, Hospitality and Leisure Grants were awarded to Rennie Grove to the value of £71k (2021:£338k) to compensate for the restrictions placed on our shops.

Rennie Grove took up the Coronavirus Job Retention Scheme and furloughed Retail Staff enabling the organisation to claim £8k (2021:£417k) during the year.

Fundraising

It has been an incredibly successful year for Fundraising. Rennie Grove has also received the largest ever legacy gift in the history of the charity, valued at £2.2m.

General fundraising (excluding legacies) exceeded net contribution budget by £471k, an increase on budget of 26%. This was achieved by record breaking donations including an In Memoriam donation of £100k alongside our highest ever achieving supporter-led event, the Isle of Wight Cycle Challenge, raising over £180,000.

Retail and Trading

The shops have had a hugely challenging time coping with all the restrictions and social distancing rules that have kept constantly changing whilst also juggling the COVID impact on staff and volunteers. Footfall has increased and at the end of March 2022 trading levels were back up at 90% of the 2019-20 levels.

As the retail market moves into the world of online shopping the Retail team have expanded their eBay, online and New Goods offering for customers.

Government support from Grants and Furlough helped to bridge the gap that the reduction in Retail income has created. This government support income is not classified as Retail income in our financial statements, and despite the income reduction, the retail team team has successfully been able to generate a net contribution of £500k this year (2021: Deficit of £978K).

Clinical Commissioning Group Income

The CCGs continued with grant funding (rather than any form of tariff-based approach), in both the Chilterns area of Buckinghamshire and in northwest Hertfordshire, to support the care that Rennie Grove provides to patients.

In 2021-22 Herts Valley CCG contract value was increased to £576k (£569k in 20/21)

In 2021-22 Bucks CCG contract was £457k (£429k 20/21)

In addition, Herts CCG fully fund the Rapid Personalised Care Service statutory service in 21/22 £891k.

A pilot of Rapid Personalised Care Service in Bucks started in January 2022 and this was funded in full from the final quarter, £31k

Our annual Department of Health Children's Grant was reviewed for 2021-22 at a value of £99k. (£96k in 20/21)

Other Significant Funding

The Hospice Lottery Partnership once again had a highly successful year despite the lack of being able to canvass ticket sales face to face due to ongoing COVID-19 restrictions with an overall contribution to Rennie Grove of £402k.

The Pepper Foundation continues to support the delivery of children's services and contributed £250k for 2021-22 as their core grant.

Reserves Policy

The Trustees have set aside reserves which provide a balance between spending on the immediate needs of the Charity and protecting Rennie Grove's ability to continue to meet the needs of the community into the future.

In determining the appropriate level of reserves, the Trustees appreciate the need to be able to react to unexpected changes, especially reductions in our core fundraising and retail income. The Trustees consider that the current and expected medium term economic environment represents increased risks to the income and costs of Rennie Grove. A 10 percent reduction in income would reduce Rennie Grove's total income in the region of £1m. In addition, pressures on our cost base are increasing. In the face of these risks, the Trustees believe that the level of reserves should at least be maintained.

The Trustees have determined that unrestricted general reserves (after deducting amounts designated by the Board) should, over the medium term, lie within the range of six to nine months of budgeted expenditure. Unrestricted undesignated general reserves at 31 March 2022 totalled £11,813k, 13 months of budgeted 2022-23 expenditure.

The level of unrestricted undesignated general reserves at 31 March 2022 exceeded our medium term target of six to nine months of budgeted expenditure. This is a position the Trustees consider necessary in view of the risks described above.

The Trustees have designated unrestricted reserves to current and expected projects, to be expended in the near to medium term, necessary to maintain the operating and service capability of the Charity. Details of these projects are given below.

Designated Funds

Building Refurbishments £300K

- Replacement GH Boilers £100k
- Replacement Kitchens and Sanitary Wear at office location £50k
- Air Conditioning fitted at office locations £50k
- New Windows at GH £50k
- Retail Shops £50k

Digital Transformation £500k

- Replacement Clinical Database £150k
- Replacement Finance System £100k
- Replacement Cascade HR System £100k
- Cloud Based Security Products £120k
- Risk Management System £15k
- Rota Management System £15k

In addition, we have a designated fund of £90k representing the net book value of fixed assets other than property.

Restricted Funds

Our restricted funds include:

Property Fund of £2,458k being the net book value of the Gillian King House and the Grove House buildings.

Nursing Cottage Fund of £273k to fund the care of patients in Great Missenden and Prestwood.

Other Restricted Funds of £63k are those given for specific projects or expenditure. Full details of other restricted funds are given in note 18.

Financial Sustainability and Going Concern

The Trustees regularly review the financial position of the Charity in the light of future plans and the Charity's operating environment.

Whilst the coronavirus pandemic has caused disruption to Rennie Grove's operations, the Charity demonstrated flexibility and adaptability in ensuring it remained financially strong whilst maintaining the level of services to the community. A number of measures were taken to ensure financial sustainability.

The level of unrestricted reserves provides an indication of an entity's ability to protect itself against unexpected financial or operational challenges. Rennie Grove has robust and adequate unrestricted reserves, which totalled £12,703k at 31 March 2022.

Following reviews of the financial position and future plans of the Charity, the Trustees have identified no material uncertainties that would cast doubt on Rennie Grove's ability to continue its activities for at least the period to 31 March 2024. Accordingly, it is appropriate to employ the going concern concept in the accompanying financial statements.

Investment Policy

Under the Memorandum and Articles of Association, Rennie Grove Hospice Care has the power to make any investment which the Board of Trustees sees fit. Each year members of the Finance, Risk and Operations Committee review the investments strategy and meet with Barclays Wealth, the portfolio management company. The Board of Trustees have approved a medium risk strategy and ensure social, environmental, and ethical considerations are considered with a strict view on no investment in tobacco related companies. The key risk considerations are liquidity risk, reputational risk, and credit risk.

FUTURE PLANS AND STRATEGY

With Rennie Grove's Meeting the Need strategy expecting to close at the end of March 2022 we spent the latter part of 2021 considering the development of our future strategic period. During this we recognised that the COVID pandemic, and our focus on that, had a negative impact on our operational ambitions. With this in mind the Trustees have agreed to extend our 2019-22 strategy for one additional year. We will, therefore, continue to focus our activities based on Efficiency, Engagement and Improvement until March 2023.

Efficiency

Our main efficiency focus for 2022-23 will be finalising our adoption of a cloud based infrastructure and the full utilisation of Microsoft 365 including Microsoft Teams, SharePoint and OneDrive.

We have already taken big strides in adopting collaborative digital technology, pushed mainly by the need to work remotely during the last two years. The momentum needs to continue as we embrace SharePoint and access the wider transformational potential of Microsoft 365.

Engagement

The projects to upgrade our website and email marketing tools are well underway but will not complete until the latter half of 2022. By successfully delivering these items we will be able to build on solid foundations for all digital marketing activities in future years.

We will continue to focus on the delivery of smoother and more dynamic supporter journeys across the organisation, growing engagement and driving income generation.

Engagement will be helped by the collection of data and insights which will be used to inform our development of the 2023 onwards strategy and ensure we continually improve our supporter journeys and the effectiveness of our campaigns.

Improvement

Over the last 12 months the Senior Clinical Team worked through the creation of the foundations in several areas of the organisation in relation to quality improvement and clinical practice. The initial plan, expecting to be delivered by summer 2022, will ensure we are fit for purpose for the future.

A main challenge for 2022-23 will be in the recruitment and retention of our nursing and clinical workforce. We will be developing plans to attract nurses from the hospital and community generalist sector who have an interest and/or experience in palliative and end of life care.

This will require a remodelling of our terms and conditions to remain competitive with the healthcare sector. Our workforce comes mainly from the NHS or from neighbouring hospices and we need to ensure we do not fall behind those other employers.

Our review in 2020-21 of the quality improvement process highlighted the need for a full review of the clinical audit policy and programme, with the aim to ensure continual quality

improvement and to improve the outcomes of patient care. We have started the clinical audit programme including the modernisation of our clinical audit tools and this will continue into 2022-23.

A review of our children's hospice at home service has recently had the addition of a play team and a respite team. During 2022-23 we will continue to embed these two offerings into the services provided to the children and families in our care.

Principles of Sustainability

In 2021-22 working collaboratively with other hospices was a particular focus and we will improve on that effort during 2022-23. The Hospice UK Future Vision Programme started the conversation around a more sustainable future for palliative and end of life care. It encouraged hospices to make better use of technology, transform ways of working, suggested ways to collaborate and recommended a new approach to statutory funding models.

This Future Vision Programme, and its Principles of Sustainability, will enable Rennie Grove to develop its strategy for the years to come as it helps to set the outline ambitions and steer the formulation of the activities in the hospice sector.

Of the Programme's nine principles, there are three that will drive Rennie Grove in the next few years. These are negotiating a new deal with commissioners, becoming an integrated partner within the Integrated Care Systems in which we work and collaborating closely with other hospices to reduce duplication of effort and deliver the best outcomes for patients.

NHS England's Palliative and End of Life Care Strategic Clinical Network

Integrating Rennie Grove across Hertfordshire and Buckinghamshire will also be supported by NHS England's Strategic Clinical Networks. Across our geography we engage actively with two Networks - East of England and South East England.

Rennie Grove has played an active role in both of these Networks with our Chief Executive supporting the development of the South East England Network in his role as a Hospice UK Advisory Council Representative.

Rennie Grove is benefiting from its role in these Networks which are guiding providers in how to influence the formation of Integrated Care Systems and how hospices fit and are represented within their governance arrangements.

Collaboration

Taking the lead from the Future Vision Programme, Rennie Grove will continue to develop collaboration projects with hospices and other partners across Hertfordshire and Buckinghamshire over the next few years. During 2021-22 we started this work with two partners.

South Bucks Hospice

Recognising the importance of outpatient services we provide from Grove House, we have been working with South Bucks Hospice, since 2019, in developing a joint clinical pathway to enable patients in Buckinghamshire to access services which are or could be provided from Butterfly House in High Wycombe.

The development of this collaboration project was paused during 2020 due to COVID-19 but was re-established in 2021. Both charities recognise that by working together we can provide a wider range of services to people than trying to do so singularly.

While experiencing another delay in the establishment of a single-entry point for referrals, a triage function and a nurse led assessment clinic, we will work hard with South Bucks Hospice to establish the collaboration during the summer of 2022. It will ensure that, post assessment, patients will be offered a range of services provided by either charity or jointly from Butterfly House or in the patient's home depending on need.

Proposed Merger with Peace Hospice Care

On 22 June 2022, Rennie Grove announced its intention, subject to agreement from its Members and the Charity Commission, to merge with Peace Hospice Care (a charity based in Hertfordshire). The merger would be affected by a new charity, Rennie Grove Peace Hospice Care, assuming full ownership of Rennie Grove Hospice Care and Peace Hospice Care. The target date for the merger is 1 October 2022.

At the General Meeting of Rennie Grove Members, held on 15 July 2022, Members agreed to provisionally change the Rennie Grove Articles of Association which would facilitate the merger. Those amended Articles would come into effect, if approved by the Charity Commission, on the date of the merger.

Collaborative working with Peace Hospice Care in recent years has been strong and the background to the proposed merger is our strong initial projects involving learning & development, outpatient services and medical support, put in place during 2020 and 2021.

We believe the proposed merger will enable us to:

Serve - provide a wider range of services to support people in West Herts and Bucks to live as well as possible when diagnosed with a life-limiting illness

Reach - develop new and enhanced services to reach all sections of the local community and meet their changing needs

Strengthen - use our strengthened combined voice to secure the resources needed to ensure every local person receives the care they need, when they need it

Our proposal to merge supports the national drive for healthcare providers in all sectors to combine resources and work together to provide the best possible care for people in our local communities, as well as the passion shared by both charities to deliver the highest quality care.

STRUCTURE, GOVERNANCE AND MANAGEMENT

Rennie Grove Hospice Care is a company limited by guarantee under the Companies Act 2006, number 7479930, and a registered charity, number 1140386. The charitable company is governed by its Memorandum and Articles of Association.

Group Structure

Rennie Grove Hospice Care has three subsidiary companies:

- Iain Rennie Hospice at Home,
- Iain Rennie Hospice Services Limited, and
- St Albans and Dacorum Day Hospice

These are held open to ensure any residual income or legacies can be received by Rennie Grove Hospice Care and Iain Rennie Hospice at Home holds the asset of our Gillian King House building. The financial results of all three subsidiaries are consolidated into the financial statements of Rennie Grove Hospice Care.

Rennie Grove has a 33% shareholding in The Hospice Lottery Partnership Limited, a company which operates a lottery to raise funds for this and the other partners.

Members Appointment and Members' Liability

The members of the charitable company, including the members of the Rennie Grove Board of Trustees, are liable for up to £1 each on the winding up of the company whilst they are members or within one year of someone ceasing to be a member. At 31st March 2022 there were 103 members including the Rennie Grove Board of Trustees.

Rennie Grove Hospice Care is registered with the Care Quality Commission, which monitors and inspects the charity as an independent health care provider. The Registered Manager is Mr Stewart Marks, Chief Executive.

Corporate Governance

Rennie Grove Hospice Care is governed by a Board of Trustees which collectively sets its strategic direction, upholds its values, ensures delivery of its strategic objectives and is responsible for ensuring financial sustainability of the charity. The Board of Trustees is collectively responsible and accountable for ensuring and monitoring that the organisation is performing well, is solvent, and complies with all relevant obligations.

To support the Board in fulfilling its objectives to deliver the Purpose and Vision of Rennie Grove, the Board of Trustees has established three committees each responsible to the Board.

Governance Committee

The Governance Committee:

- Oversees the governance arrangements of the Charity and makes recommendations to the Board.
- Reviews the size and composition of the Board and its committees and makes recommendations as to the appointment of individuals to the Board.
- Supports the Chairman in the annual Board Effectiveness Review.

- Recommends to the Board the appointment of the Chief Executive of the charity.
- Oversees the remuneration paid to the Chief Executive and the senior management team members and the remuneration framework for the charity's employees.

The members of the committee in the year were the Chairman, Vice Chairman and the Company Secretary. The committee met twice in the year.

Clinical Governance Committee

The role of the Committee is to advise the Board in relation to clinical operations and clinical risk. In particular, the Committee:

- monitors clinical effectiveness, safety and quality of care to gain assurance that the organisation is providing safe clinical care
- identifies the key clinical risks arising from the Charity's operations
- defines the accepted risk levels associated with increased clinical activity and innovation

The members of the committee in the year were the Chairman and three trustees with clinical backgrounds. The Chief Executive and the Director of Nursing & Patient Services (or the person holding the equivalent position from time to time) are expected to attend all meetings.

Finance, Risk and Operations Committee

The role of the Committee is to advise the Board in relation to:

- financial and operational performance and risk
- the overall integrity of the Charity's financial and operational reporting
- the Charity's internal controls and risk management systems
- the Charity's relationship with its external auditors

The Committee comprises five Trustees including the Chairman, Vice-Chair, Treasurer and Company Secretary. The Chief Executive, the Director of Finance & Facilities and the Director of Nursing & Patient Services are expected to attend all meetings.

The Board of Trustees agrees the terms of reference for the three committees which have clear, delegated authorities. The Board monitors performance of the committees through reports received at Board Meetings and an annual report.

Certain matters are reserved for the Board and senior members of the management team are invited to attend Board and Board Committee meetings as appropriate.

Charity Governance Code

The Charity Governance Code (the Code) is a set of principles and recommended good practice against which Charities may compare themselves and identify areas of strength and for potential improvement.

The Code includes seven principles which the Board of Trustees has considered in its aim to ensure continued strong governance at Rennie Grove.

Organisational Purpose

The Board of Trustees maintains the vision and mission of Rennie Grove. They approve the strategy, operational plans and budget. The Trustees operate as a team and receive reports from management to ensure the proper functioning of the Charity.

Key governance highlights in the year included reviews of the terms of reference of board committees, the Chair carried out reviews of the performance of trustees, trustees and senior management team held a day long face to face meeting to discuss strategic matters, and procedures were reviewed to ensure virtual meetings are effective.

Leadership

The Board maintains responsibility for ensuring the strategy of Rennie Grove is established and followed. The Board has a wide range of clinical and non-clinical abilities and experience from a variety of backgrounds. By meeting regularly with management and clinical staff, the Board ensures that leadership and management are integrated for the good of Rennie Grove.

Integrity

The culture of the Board supports independent and challenging thought accompanied by a supportive ethos. Procedures are in place to prevent conflicts of interest and to ensure the Board is independent in its decision making.

Decision Making, Risk and Control

The Board has developed an effective structure of board committees and working groups. This allows Board members and management to effectively implement the strategic priorities of Rennie Grove whilst allowing the Board time to focus on strategic developments. Operational matters are delegated to the senior management team who report on key strategic developments to the Board. Importance is placed on effective risk management and considerable progress has been made in the year in developing risk management.

Board Effectiveness

The Chairman has initiated governance reviews during the year to ensure the process for the recruitment, appointment and retirement of the Board members is effective. An induction process for new Trustees is in place.

Equality, Diversity & Inclusion

The Board recognises that a variety of perspectives, backgrounds and skills is essential for good governance. These matters are considered as part of the process for nominating new Trustees.

Openness and Accountability

The Board places great importance in ensuring that Rennie Grove's services and activities and impact are reported to all stakeholders in a transparent manner. Key information is made available to staff and volunteers by the Chairman and Chief Executive. We actively seek feedback on all clinical activities.

Relationships with Wider Interests and Related Parties

Rennie Grove is a member of Hospice UK, the National Association for Hospice at Home and Together for Short Lives. Individual members of the Senior Management Team and other members of staff are members of various professional representative bodies.

Board Evaluation

The board has a process whereby it reviews its performance annually and initiates periodic external reviews.

Overall, the trustees believe that the board and the committees are performing well, although recognising the need for continuous improvement.

Management

The board delegates operational responsibility to the Chief Executive and through him to the senior management team. The Chief Executive has line management responsibility for the senior team comprising the Directors of Nursing & Patient Services (Currently being managed by the Chief Executive), Fundraising, Finance & Facilities, Retail & Trading, Human Resources & Volunteering, the Information, Communications and Technology Lead and the Head of Communications (Currently being managed by the Fundraising Director). Members of the senior management team represent the organisation on significant local, regional and national organisations, committees and bodies.

The Board of Trustees agrees the strategy for the Charity and the Senior Management Team are accountable for delivering this. Trustees take decisions on unbudgeted expenditure over £25,000 or when significant investment opportunities or challenges are indicated.

Fundraising Regulator

Rennie Grove Hospice Care is registered with the Fundraising Regulator and is committed to the Fundraising Promise and adherence to the Code of Fundraising Practice. Donors can be assured that we comply with these regulatory standards.

In 2021-22 we received 4 fundraising complaints (2021 6). These were followed up and recorded in accordance with the complaints procedure and were resolved with the complainant. We are also signed up to the Fundraising Preference Service, enabling supporters to opt out from receiving fundraising communications.

**RENNIE GROVE HOSPICE CARE
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 MARCH 2022**

Risk Management

The Board of Trustees has responsibility for overseeing risk management within Rennie Grove. They have a fundamental role in ensuring that a culture of risk management is embedded throughout the charity by setting the tone and influencing the appetite for risk. The Board ensures that all risks are assessed against the ability to achieve its mission.

The Finance, Risk and Operations and Clinical Governance Committees review key risks and mitigating actions and support and advise the Board on risk matters. The Senior Management Team implements risk management policies.

The Board of Trustees and Committees designate owners, who are responsible for managing the risks allocated to them under their guidance. Risks are identified and controls and mitigating actions closely monitored on a regular basis.

The following table describes the key risks, identified by the Board of Trustees, to Rennie Grove's ability to meet its strategic objectives.

The Trustees consider that the principal risks facing the Charity are:

Risk Area	Potential Impact	Mitigations
Difficulty in the recruitment of sufficient Clinical Staff	Reduction in the ability to deliver Clinical Services	Recognising the difficulty there is across the health sector in the recruitment of clinical staff we have reviewed our clinical vacancies and are currently running a rolling recruitment campaign, with new recruitment channels identified. We review the skill mix of nurses' experience based on availability of applicants. While waiting for a full establishment of staff to be achieved we will prioritise our case load to ensure most urgent patients are seen and the nursing resources required is utilised in the most effective way.

**RENNIE GROVE HOSPICE CARE
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 MARCH 2022**

Risk Area	Potential Impact	Mitigations
Cyber security	As we hold significant quantities of personal information about patients and supporters, in particular, and given the need to safely and securely share patient data with other clinical service providers, any data breach would have an adverse impact on our ability to provide services to patients and would result in significant reputational damage.	<p>We have appropriate data security policies in place and compliance with these is audited. We have obtained Cyber Plus certifications which are renewed annually.</p> <p>We have a secure network in place for data transmission between sites. Remote and mobile access is controlled by verification and two factor authentication is in place to strengthen controls around access.</p> <p>We are migrating to Microsoft Office 365 which will support more agile forms of collaboration and enhance our digital security.</p> <p>We have ongoing programmes to educate and remind staff and volunteers using our systems about safe digital practices.</p>

**RENNIE GROVE HOSPICE CARE
TRUSTEES' REPORT
FOR THE YEAR ENDED 31 MARCH 2022**

STATEMENT OF TRUSTEES' RESPONSIBILITIES

The Trustees (who are also directors of Rennie Grove Hospice Care for the purposes of company law) are responsible for preparing the Trustees' 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 Board of Trustees to prepare financial statements for each financial year, which give a true and fair view of the state of affairs of the company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing the financial statements, the Board of Trustees is required to:-

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charities SORP
- Make judgements and estimates that are reasonable and prudent
- State whether 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 company will continue in business.

The Board of Trustees is responsible for keeping proper accounting records, which disclose, with reasonable accuracy at any time, the financial position of the charitable company and enable it to ensure that the financial statements comply with the Companies Act 2006. It is also responsible for safeguarding the assets of the charitable company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

In so far as the Board of Trustees is aware:

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

AUDITORS

Haysmacintyre LLP have been appointed by the Trustees as auditors. and have signified their willingness to continue in office. A resolution proposing their reappointment will be put to the forthcoming Annual General Meeting.

In approving this Trustees' Report, the Trustees are also approving the Strategic Report of the Charity in their capacity as company directors. This report was approved by the Trustees on 28 July 2022 and signed on behalf of the board by:

Stephen A Spiro

Stephen Spiro

Chairman

**INDEPENDENT AUDITORS REPORT TO THE TRUSTEES AND MEMBERS
OF RENNIE GROVE HOSPICE CARE
FOR THE YEAR ENDED 31 MARCH 2022**

Opinion

We have audited the financial statements of Rennie Grove Hospice Care for the year ended 31 March 2022 which comprise Consolidated Statement of Financial Activities, the Group and Parent Charitable Company Balance Sheets, the Consolidated 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 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the group's and of the parent charitable company's affairs as at 31 March 2022 and of the group's and parent charitable company's net movement in funds, including the 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 in accordance with the ethical requirements that are relevant to our audit of the financial statements in the UK, including the FRC's Ethical Standard, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

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

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

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

**INDEPENDENT AUDITORS REPORT TO THE TRUSTEES AND MEMBERS
OF RENNIE GROVE HOSPICE CARE
FOR THE YEAR ENDED 31 MARCH 2022**

Other information

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

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

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the group and the parent charitable company and its environment obtained in the course of the audit, we have not identified material misstatements in the Trustees' Annual Report (which incorporates 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
- the parent charitable company financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made;
- or we have not received all the information and explanations we require for our audit.

**INDEPENDENT AUDITORS REPORT TO THE TRUSTEES AND MEMBERS
OF RENNIE GROVE HOSPICE CARE
FOR THE YEAR ENDED 31 MARCH 2022**

Responsibilities of trustees for the financial statements

As explained more fully in the company for the purposes of company law) are responsible for the preparation of the trustees' responsibilities statement set out on page 28, the trustees (who are also the directors of the charitable 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 the parent charitable company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the trustees either intend to liquidate the group or the parent charitable company or to cease operations, or have no realistic alternative but to do so.

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.

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

Based on our understanding of the group and the environment in which it operates, we identified that the principal risks of non-compliance with laws and regulations related to the Charities Act 2011, Companies Act 2006, the Fundraising Regulator and Care Quality Commission (CQC), and we considered the extent to which non-compliance might have a material effect on the financial statements. We also considered those laws and regulations that have a direct impact on the preparation of the financial statements such as the Companies Act 2006, Charities Act 2011, FRS102, Charities Statement of Recommended Practice (SORP) and payroll tax.

**INDEPENDENT AUDITORS REPORT TO THE TRUSTEES AND MEMBERS
OF RENNIE GROVE HOSPICE CARE
FOR THE YEAR ENDED 31 MARCH 2022**

We evaluated management's incentives and opportunities for fraudulent manipulation of the financial statements (including the risk of override of controls), and determined that the principal risks were related to posting of inappropriate journal entries and management bias in certain accounting estimates. Audit procedures performed by the engagement team included:

- Inspecting correspondence with regulators and tax authorities;
- Discussions with management including consideration of known or suspected instances of non-compliance with laws and regulation and fraud;
- Evaluating management's controls designed to prevent and detect irregularities;
- Identifying and testing journals, in particular journal entries posted with unusual account combinations, postings by unusual users or with unusual descriptions; and
- Challenging assumptions and judgements made by management in their critical accounting estimates

Because of the inherent limitations of an audit, there is a risk that we will not detect all irregularities, including those leading to a material misstatement in the financial statements or non-compliance with regulation. This risk increases the more that compliance with a law or regulation is removed from the events and transactions reflected in the financial statements, as we will be less likely to become aware of instances of non-compliance. The risk is also greater regarding irregularities occurring due to fraud rather than error, as fraud involves intentional concealment, forgery, collusion, omission or misrepresentation.

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

Use of our report

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



Kathryn Burton (Senior Statutory Auditor)
For and on behalf of Haysmacintyre LLP, Statutory Auditor

Date: 10th August 2022

10 Queen Street Place
London
EC4R 1AG

RENNIE GROVE HOSPICE CARE
CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES
(incorporating the Income and Expenditure Account)
FOR THE YEAR ENDED 31 MARCH 2022

	Notes	Unrestricted Funds £	Restricted Funds £	Total 2022 £	Total 2021 £
INCOME FROM:					
Donations and legacies	2	5,674,489	126,953	5,801,442	3,765,932
Charitable activities					
NHS funding	3	1,013,329	-	1,013,329	998,707
Rapid Personalised Care		879,973	-	879,973	1,153,620
Other income from charitable activities		-	1,371,445	1,371,445	3,055,245
Other trading activities					
Events & community	2	553,813	11,296	565,109	491,110
Retail income		2,806,532	-	2,806,532	830,008
Investments		959	9,308	10,267	10,176
Other	4				
Hospice Lottery Partnership		402,000	-	402,000	435,704
Other income		208,325	5,340	213,665	1,120,982
Total income		11,539,419	1,524,342	13,063,760	11,861,484
EXPENDITURE ON:					
Raising funds	5				
Donations and legacies		993,947	-	993,947	841,506
Fundraising activities		2,843,016	-	2,843,016	2,296,927
Charitable activities	5				
Patient care		3,058,567	1,651,263	4,709,830	4,463,057
Rapid Personalised Care		809,156	-	809,156	1,175,905
Total expenditure	5	7,704,686	1,651,263	9,355,949	8,777,395
Net gains/(losses) on investments		178,989	(21,900)	157,089	442,146
Net income/(expenditure)	7	4,013,722	(148,821)	3,864,900	3,526,235
Transfers between funds		-	-	-	-
Other recognised gains/(losses)		-	-	-	-
Net movement in funds		4,013,722	(148,821)	3,864,900	3,526,235
Funds brought forward		8,689,272	2,942,515	11,631,788	8,105,553
Funds at 31 March 2022		12,702,994	2,793,694	15,496,688	11,631,788
		=====	=====	=====	=====

The notes on pages 36 – 57 form part of these financial statements
The statement of financial activities includes all gains and losses recognised in the year.
All amounts derive from continuing activities.
Full comparative figures for the year ended 31 March 2021 are shown in note 25.

RENNIE GROVE HOSPICE CARE
CONSOLIDATED AND CHARITY BALANCE SHEETS
AS AT 31 MARCH 2022

Company number 7479930

		Group		Charity	
	Notes	2022 £	2021 £	2022 £	2021 £
FIXED ASSETS					
Intangible fixed assets	11	-	100,000	-	100,000
Tangible fixed assets	12	2,547,892	2,642,165	2,013,771	2,101,454
Investments	13	3,942,169	2,796,198	3,942,171	2,796,200
		<u>6,490,061</u>	<u>5,538,363</u>	<u>5,955,942</u>	<u>4,997,654</u>
CURRENT ASSETS					
Stock	14	77,842	51,000	-	-
Debtors	15	4,941,858	2,951,974	5,025,942	2,999,427
Cash at bank and in hand		5,097,571	4,903,656	5,026,462	4,840,829
		<u>10,117,271</u>	<u>7,906,630</u>	<u>10,052,404</u>	<u>7,840,256</u>
CURRENT LIABILITIES					
CREDITORS: amounts falling due within one year	16a	(1,110,644)	(1,063,205)	(1,108,385)	(1,059,245)
NET CURRENT ASSETS		<u>9,006,627</u>	<u>6,843,425</u>	<u>8,944,019</u>	<u>6,781,011</u>
Total assets less current liabilities		<u>15,496,688</u>	<u>12,381,788</u>	<u>14,899,961</u>	<u>11,778,665</u>
CREDITORS: amounts falling due after more than one year	16b	-	(750,000)	-	(750,000)
Net Assets		<u>15,496,688</u>	<u>11,631,788</u>	<u>14,899,961</u>	<u>11,028,665</u>
FUNDS					
UNRESTRICTED FUNDS					
General fund		11,813,251	8,539,172	11,750,645	8,476,761
Designated Funds					
- Equipment		89,743	150,101	89,743	150,101
- Building Refurbishment		300,000	-	300,000	-
- Digital Transformation		500,000	-	500,000	-
	18	<u>12,702,994</u>	<u>8,689,273</u>	<u>12,640,388</u>	<u>8,626,862</u>
RESTRICTED FUNDS	18	<u>2,793,694</u>	<u>2,942,515</u>	<u>2,259,573</u>	<u>2,401,803</u>
TOTAL FUNDS	18	<u>15,496,688</u>	<u>11,631,788</u>	<u>14,899,961</u>	<u>11,028,665</u>

The net income for the group for the year was £3,864,900 (2021: £3,526,235).

The financial statements were approved and authorised for issue by the Board of Trustees on and were signed on its behalf by:

Stephen A Spiro
.....
S Spiro (Chairman)
Date: 28 July 2022

John Wroe
.....
J Wroe (Treasurer)
Date: 28 July 2022

The notes on pages 36 to 57 form part of these financial statements.

RENNIE GROVE HOSPICE CARE
CONSOLIDATED CASH FLOW STATEMENT
FOR THE YEAR ENDED 31 MARCH 2022

	Notes	2022 £	2021 £
Cash flows from operating activities	24	1,922,530	2,559,918
Cash flows from investing activities			
Interest received		920	4379
Dividends received		9,347	9,737
Purchase of tangible fixed assets		-	(196,640)
Purchase of investments		(997,095)	-
Proceeds from sale of investments		8,214	5,873
Cash (used in) / provided by investing activities		(978,615)	(180,593)
Cash flows from financing activities			
(Repayment)/Proceeds from loan		(750,000)	750,000
Increase in cash and cash equivalents in the year		193,915	3,129,326
Cash and cash equivalents at the beginning of the year		4,903,656	1,774,330
TOTAL CASH AND CASH EQUIVALENTS AT THE END OF THE YEAR		5,097,571	4,903,656

Analysis of movements in net cash

	2021 £	Cash flows £	Repayment of loan £	2022 £
Cash at bank	4,903,656	193,915	-	5,097,571
Loan	(750,000)	-	750,000	-
	4,153,656	193,915	750,000	5,097,571

**RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

1. ACCOUNTING POLICIES

The principal accounting policies adopted, judgements and key sources of estimation uncertainty in the preparation of the financial statements are as follows:

Statement of Compliance

The financial statements have been prepared in accordance with Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2015) - (Charities SORP (FRS 102)), the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) and the Companies Act 2006. Rennie Grove Hospice Care meets the definition of a public benefit entity under FRS 102. Assets and liabilities are initially recognised at historical cost or transaction value unless otherwise stated in the relevant accounting policy note(s).

General information

The charity is a private company limited by guarantee without share capital, incorporated in England and Wales (company number: 7479930) and a charity registered in England and Wales (charity number: 1140386). The charity's registered address is Grove House, Waverley Road, St Albans, Hertfordshire AL3 5QX.

Preparation of accounts on a going concern basis

The trustees consider there are no material uncertainties about the Charity's ability to continue as a going concern. The review of our financial position, reserves levels and future plans for the next two years gives Trustees confidence the charity remains a going concern for the foreseeable future.

Group financial statements

The consolidated financial statements incorporate those of Rennie Grove Hospice Care and its subsidiary undertakings St Albans and Dacorum Day Hospice, Iain Rennie Hospice at Home and Iain Rennie Hospice Services Limited for the year ended 31 March 2022. Details of the individual subsidiary results are given in note 20. As permitted by section 408 of the Companies Act 2006, the SOFA of the parent company is not presented as part of these financial statements. The surplus of the parent company was £3,777,198 (2021: £3,536,580).

Income recognition

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

Donations and legacies

Donations and gifts are included in full in the Statement of Financial Activities when there is entitlement, probability of receipt and the amount of income receivable can be measured reliably.

Donations are accounted for on a received basis. Legacies are recognised on a receivable basis, when the conditions of entitlement, probability and measurement are met. Where the probability and/or measurement criteria for legacies and donations are not satisfied as at the balance sheet date but subsequent events resolve the uncertainty such that the criteria are met, an adjustment is made to recognise the income.

Gifts in kind

Gifts in kind represent assets donated for distribution or use by the charity. Assets given for distribution are recognised as income only when distributed. Assets given for use by the charity are recognised when receivable. Gifts in kind are valued at the amount actually realised from the disposal of the assets or at the price the charity would otherwise have paid for the assets.

**RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

1. ACCOUNTING POLICIES (continued)

Grants

Grants including Government Grants are recognised in full in the statement of financial activities in the year in which the charity has entitlement to the income, the amount of income receivable can be measured reliably and there is probability of receipt.

Income from charitable activities

Income from charitable activities is recognised as earned as the related services are provided. Income from other trading activities is recognised as earned as the related goods are provided. Activities for generating funds are goods donated for sale through the Charity's shops. Goods donated for sale are included in the financial statements as income when they are sold.

Investment income

Investment income is recognised on a receivable basis once the amounts can be measured reliably.

Expenditure

Expenditure is recognised once there is a legal or constructive obligation to make a payment to a third party, it is probable that settlement will be required and the amount of the obligation can be measured reliably. Expenditure is classified under the following activity headings:

- Costs of raising funds comprises of the costs associated with attracting voluntary income and the costs of events and the administration of the Charity shops, as well as the management costs for the investment portfolio.
- Expenditure on charitable activities comprises those costs incurred by the Charity in the delivery of its activities and services to its beneficiaries.

Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Expenditure allocated to the particular activity where the cost relates directly to that activity. However, the cost of overall direction and administration of each activity, comprising the salary and overhead costs of the central function, is apportioned based on staff time attributable to each activity.

Allocation of costs

Staff costs are allocated between direct charitable expenditure and support costs based on the time spent on these activities. Other costs are allocated based on headcount.

Operating leases

Rental charges are charged on a straight line basis over the life of the lease.

Goodwill

Goodwill is calculated as the difference between the acquisition cost of an entity and the aggregate fair value of that entity's assets and liabilities. Goodwill is amortised on a straight line basis over its useful life.

Investments

Investments are a form of basic financial instrument and are initially shown in the financial statements at market value. Movements in the market values of investments are shown as unrealised gains and losses in the Statement of Financial Activities.

Profits and losses on the realisation of investments are shown as realised gains and losses in the Statement of Financial Activities. Realised gains and losses on investments are calculated as the difference between sales proceeds and their opening carrying values or their purchase value if acquired subsequent to the first day of the financial year. Unrealised gains and losses are calculated as the difference between

**RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

1. ACCOUNTING POLICIES (continued)

the fair value at year end and their carrying value. Realised and unrealised investment gains and losses are combined in the Statement of Financial Activities.

Fixed assets

Fixed assets are stated at cost or deemed cost (donated valuation at estimated fair value) less accumulated depreciation and impairment losses. Assets costing more than £5,000 are capitalised.

Depreciation is calculated to write off the costs of the fixed asset by equal instalments as follows, all straight line:

Freehold land	0%
Freehold buildings	over 50 years from the date of first use
Leasehold property	over the term of the lease
Leasehold improvements	over the term of the lease
Motor vehicles	25% - 33% straight line
Fixtures and fittings	20% straight line
Tools and equipment	25% - 33% straight line
Car park	over 10 years from the date of first use

Financial instruments

The charity only has financial assets and financial liabilities of a kind that qualify as basic financial instruments. Basic financial instruments are initially recognised at transaction value and subsequently measured at their settlement value with the exception of bank loans which are subsequently measured at amortised cost using the effective interest rate method.

Creditors and provisions

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

Stock

Stocks are valued at the lower of cost and net realisable value. Net realisable value is based upon estimated selling price less further costs expected to be incurred to completion and disposal. Provision is made for obsolete and slow-moving items.

The trustees have concluded and agreed that the valuing of shops donated goods for resale on receipt is impractical due to the high volume of low value items, lack of stock system for recording these items and the administrative cost involved. Instead the income is recognised in the accounts when these goods are sold.

Debtors

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

Cash at bank and in hand

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

**RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

1. ACCOUNTING POLICIES (continued)

Funds

The general fund comprises the accumulated surpluses of unrestricted incoming resources over resources expended, which are available for use in furtherance of the general objective of the Charity at the discretion of the Trustees. To the extent that general funds are expended on capital items, a transfer is made to the fixed asset fund.

Designated funds are unrestricted funds earmarked by the Trustees for spending on new hospice projects.

Restricted funds are funds subject to specific conditions imposed by donors. The purpose and use of the restricted funds are set out in the notes to the accounts. Amounts unspent at the year-end are carried forward in the balance sheet.

To the extent that restricted funds are expended on capital items a transfer is made between unrestricted and restricted reserves.

Employee benefits

- **Short term benefits**

Short term benefits including holiday pay are recognised as an expense in the period in which the service is received.

- **Employee termination benefits**

Termination benefits are accounted for on an accrual basis and in line with FRS 102.

- **Pension scheme**

The charitable company operates a defined contribution pension scheme. The charitable company also contributes to the NHS pension scheme. Charges are made to the Statement of Financial Activities as contributions fall due. More details are given in note 17.

Estimates and judgements

Estimates and judgements are continually evaluated and are based on historical experience and other factors, including expectations of future events that are believed to be reasonable under the circumstances. Although these estimates are based on management's best knowledge of the amount, events or actions, actual results ultimately differ from those estimates. The Trustees consider the evaluation of useful economic lives of fixed assets to be the most significant area of judgement and potential effect on the financial statements. Further details on these judgements are provided in the relevant section above.

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

2. ANALYSIS OF INCOME (2022)	Unrestricted funds £	Restricted funds £	Total 2022 £
Legacies	3,369,215	10,000	3,379,215
Donations	2,305,274	116,953	2,422,227
Total legacies and donations	5,674,489	126,953	5,801,442
Events	553,813	11,296	565,109
Trading	2,806,532	-	2,806,532
Total trading and fundraising	3,360,345	11,296	3,371,641
Investment income receivable	39	-	39
Interest receivable	920	-	920
Restricted interest	-	9,308	9,308
Total investment income	959	9,308	10,267
Income from donations, legacies, trading, fundraising & investments	9,035,792	147,557	9,183,350
ANALYSIS OF INCOME (2021)	Unrestricted funds £	Restricted funds £	Total 2021 £
Legacies	1,213,234	50,000	1,263,234
Donations	2,091,978	410,720	2,502,698
Total legacies and donations	3,305,212	460,720	3,765,932
Events	486,440	4,670	491,110
Trading	830,008	-	830,008
Total trading and fundraising	1,316,448	4,670	1,321,118
Investment income receivable	429	-	429
Interest receivable	439	9,308	9,747
Total investment income	868	9,308	10,176
Income from donations, legacies, trading, fundraising & investments	4,622,527	474,699	5,097,226

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

3. INCOME FROM CHARITABLE ACTIVITIES (2022)

	Unrestricted funds £	Restricted funds £	Total 2022 £
NHS funding from CCGs	1,013,329	-	1,013,329
Rapid Personalised Care	879,973	-	879,973
Pepper Foundation/ NHS England	-	385,929	385,929
COVID grant funding through Hospice UK	-	816,916	816,916
Other grant funding through Hospice UK	-	168,600	168,600
	<u>1,893,302</u>	<u>1,371,445</u>	<u>3,264,747</u>

INCOME FROM CHARITABLE ACTIVITIES (2021)

	Unrestricted funds £	Restricted funds £	Total 2021 £
NHS funding from CCGs	998,707	-	998,707
Rapid Personalised Care	1,153,620	-	1,153,620
Pepper Foundation/ NHS England	-	325,730	325,730
COVID grant funding through Hospice UK	-	2,729,515	2,729,515
	<u>2,152,327</u>	<u>3,055,245</u>	<u>5,207,572</u>

4. OTHER INCOME (2022)

	Unrestricted funds £	Restricted funds £	Total 2022 £
Hospice Lottery Partnership	402,000	-	402,000
Council Grant Covid 19	70,670	-	70,670
Grant funding through NHS England	116,550	-	116,550
Furlough Covid 19	7,957	-	7,957
Other Income	13,148	5,340	18,488
	<u>610,325</u>	<u>5,340</u>	<u>615,665</u>

OTHER INCOME (2021)

	Unrestricted funds £	Restricted funds £	Total 2021 £
Hospice Lottery Partnership	435,704	-	435,704
Business Continuity Insurance Claim	353,654	-	353,654
Council Grant Covid 19	338,429	-	338,429
Furlough Covid 19	417,427	-	417,427
Other Income	11,472	-	11,472
	<u>1,556,686</u>	<u>-</u>	<u>1,556,686</u>

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

5. EXPENDITURE (2022)

	Direct staff costs	Direct other costs	Allocated support costs	Total 2022
	£	£	£	£
Costs of raising donations and Legacies	657,307	191,505	145,135	993,947
Costs of trading and fundraising	1,150,833	1,372,885	319,298	2,843,016
Charitable activities				
Patient care	4,305,462	574,928	638,596	5,518,986
	<u>6,113,602</u>	<u>2,139,318</u>	<u>1,103,029</u>	<u>9,355,949</u>
	=====	=====	=====	=====

Included in the allocated support costs above are staff costs of £746,335 (2021: £809,156). Included in the 2022 Direct Staff costs; Patient care costs £193,893 (2021: £865,181) are agency staff costs related to the Rapid Personalised Care initiative.

EXPENDITURE (2021)

	Direct staff costs	Direct other costs	Allocated support costs	Total 2021
	£	£	£	£
Costs of raising donations and legacies	591,917	130,812	118,777	841,506
Costs of trading and fundraising	994,564	1,035,115	267,248	2,296,927
Charitable activities				
Patient care	4,707,634	420,587	510,741	5,638,962
	<u>6,294,115</u>	<u>1,586,514</u>	<u>896,766</u>	<u>8,777,395</u>
	=====	=====	=====	=====

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

6. ANALYSIS OF SUPPORT COSTS (2022)

	Management £	Finance £	Resources £	Governance £	2022 Total £
Costs of raising donations and legacies	22,508	30,979	79,619	14,882	147,988
Costs of trading and fundraising	48,420	66,642	171,280	32,014	318,356
Charitable activities					
Patient care	96,839	133,285	342,559	64,028	636,711
	<u>167,767</u>	<u>230,906</u>	<u>593,458</u>	<u>110,924</u>	<u>1,103,055</u>
	=====	=====	=====	=====	=====

Resources include costs of IT and premises.

ANALYSIS OF SUPPORT COSTS (2021)

	Management £	Finance £	Resources £	Governance £	2021 Total £
Costs of raising donations and legacies	18,459	27,474	69,692	5,250	120,875
Costs of trading and fundraising	40,442	60,196	152,696	11,503	264,837
Charitable activities					
Patient care	78,042	116,160	294,656	22,196	511,054
	<u>136,943</u>	<u>203,830</u>	<u>517,044</u>	<u>38,949</u>	<u>896,766</u>
	=====	=====	=====	=====	=====

GOVERNANCE COSTS INCLUDE

	2022 £	2021 £
Insurance	9,300	9,898
Legal fees	1,600	-
Professional fees	73,001	6,901
Other expenses	4,523	-
Auditor's remuneration:		
Audit work	20,375	18,950
Other services	2,125	3,200
	<u>110,924</u>	<u>38,949</u>
	=====	=====

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

7. NET INCOME

	2022	2021
	£	£
Net income is stated after:		
Auditors' remuneration		
- Audit services	20,375	18,950
- Other services	2,125	3,200
Operating lease rentals		
- Land and buildings	672,050	586,991
Depreciation	94,272	121,937
Amortisation	100,000	100,000
	=====	=====

8. STAFF COSTS

	2022	2021
	Number	Number
The average monthly number of employees for the charity and the group during the year was:		
Direct charitable work	88	86
Fundraising – donations and legacies	20	20
Fundraising – trading (shop staff)	44	44
Fundraising - events	1	1
Management and administration	16	16
	=====	=====
	169	167
	=====	=====
Employment costs in respect of the staff above were:	2022	2021
	£	£
Wages and salaries	5,565,241	5,134,462
National insurance	488,721	421,590
Pensions	323,659	275,265
Other costs	288,332	223,809
	=====	=====
	6,665,953	6,055,126
	=====	=====

Redundancy Costs: one role was made redundant and £12,600 was paid in redundancy pay during the year (2021: £17,326).

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

The number of employees whose emoluments, excluding pension contributions and employers' national insurance contributions, were over £60,000 during the year was:

	2022	2021
	Number	Number
£60,001- £70,000	3	1
£70,001 to £80,000	0	0
£80,001 to £90,000	0	1
£90,001 to £100,000	0	0
£100,001 to £110,000	1	0
	=====	=====

During the year pension contributions for the five employees noted above amounted to £25,196 (2021: £10,445).

The total employee benefits of the key management personnel of the Group and Charity were £584,839 (2021: £507,467).

9. TRUSTEE REMUNERATION

The Trustees did not receive any remuneration during the year (2021: nil). The Trustees were not reimbursed any travel costs during the year (2021: £nil).

10. TAXATION

The charity is exempt from corporation tax as all its income is charitable and is applied for charitable purpose.

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

11. INTANGIBLE FIXED ASSETS (GROUP AND CHARITY)	Goodwill £ 2022
Cost	
At 1 April 2021	500,000
Additions	-
	<hr/>
At 31 March 2022	500,000
	<hr/>
Amortisation	
At 1 April 2021	400,000
Charge for the year	100,000
	<hr/>
At 31 March 2022	500,000
	<hr/>
Net book value	
At 31 March 2022	-
	<hr/>
At 31 March 2021	100,000
	<hr/> <hr/> <hr/>

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

12. TANGIBLE FIXED ASSETS

	Land and buildings £	Leasehold improve- ments £	Fixtures and fittings £	Tools and equipment £	Motor vehicles £	Total £
Group:						
Cost						
At 1 April 2021	2,966,462	301,129	231,677	362,569	52,436	3,914,273
Additions	-	-	-	-	-	-
Disposals	-	-	-	-	-	-
Transfer	-	-	-	-	-	-
At 31 March 2022	2,966,462	301,129	231,677	362,569	52,436	3,914,273
Depreciation						
At 1 April 2021	474,400	246,725	189,459	322,957	38,568	1,272,109
Charge for the year	33,915	8,188	22,575	21,756	7,838	94,272
Disposals	-	-	-	-	-	-
At 31 March 2022	508,315	254,913	212,034	344,713	46,406	1,366,381
Net book value						
At 31 March 2022	2,458,147	46,216	19,643	17,855	6,031	2,547,892
At 31 March 2021	2,492,062	54,404	42,218	39,612	13,869	2,642,165
Charity:						
Cost						
At 1 April 2021	2,297,861	301,129	231,677	362,569	52,436	3,245,672
Additions	-	-	-	-	-	-
Disposals	-	-	-	-	-	-
Transfer	-	-	-	-	-	-
At 31 March 2022	2,297,861	301,129	231,677	362,569	52,436	3,245,672
Depreciation						
At 1 April 2021	346,509	246,725	189,459	322,957	38,568	1,144,218
Charge for the year	27,324	8,189	22,575	21,756	7,838	87,682
Retire Assets	-	-	-	-	-	-
At 31 March 2022	373,833	254,914	212,034	344,713	46,406	1,231,901
Net book value						
At 31 March 2022	1,924,028	46,214	19,642	17,855	6,032	2,013,771
At 31 March 2021	1,951,352	54,404	42,218	39,612	13,869	2,101,454

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

13. INVESTMENTS	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Listed investments	3,683,362	2,537,391	3,683,362	2,537,391
Unlisted investments	258,807	258,807	258,809	258,809
	<u>3,942,169</u>	<u>2,796,198</u>	<u>3,942,171</u>	<u>2,796,200</u>
	=====	=====	=====	=====

Listed investments (Group only):	Group 2022 £	Group 2021 £
Market valuation		
At 1 April 2021	2,537,391	2,101,117
Additions	997,095	-
Disposals	(6,960)	(5,696)
Gains/(losses) on investments	155,836	441,968
	<u>3,683,362</u>	<u>2,537,391</u>
	=====	=====
At 31 March 2022		
Historical cost of listed investments	3,280,207	2,228,594
	=====	=====

Listed investments (Group only):

Rennie Grove Hospice Care carried out a review of Investments in 2017-18 which resulted in all existing Investments being sold and the funds invested in the Barclays Charity Investment Fund. Also in 2017-18 Nurses Cottage Trust closed their charity and donated the proceeds to Rennie Grove in the form of 219,015 £1 units in UK Government bonds and a small amount of cash.

Unlisted investments (Group only):

At 31 March 2018 Iain Rennie Hospice at Home and St Albans and Dacorum Day Hospice each owned 14 shares of £1 nominal value each in The Hospice Lottery Partnership Limited, a company registered in England and Wales carrying out fundraising activity for 6 hospices. The investments are included in the financial statements at cost.

On 16th October 2018, HLP and all shareholders signed a new Shareholder agreement. Iain Rennie Hospice at Home and St Albans and Dacorum Day Hospice shares were transferred to Rennie Grove Hospice Care on this date at cost.

Each participating hospice has a representative on The Hospice Lottery Partnership board. During the year to 31 March 2022 The Hospice Lottery Partnership Limited made donations to group companies totalling £402,000 (2021: £435,704). As at 31 March 2022, £nil was due to the group from The Hospice Lottery Partnership (2021: £60,000).

RENNIE GROVE HOSPICE CARE
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14. STOCK	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Bought in goods for resale	77,842 =====	51,000 =====	- =====	- =====
15. DEBTORS	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Trade debtors		-		-
Income tax recoverable	29,460	19,563	29,460	19,563
Prepayments and accrued legacy income	4,912,106	2,932,119	4,912,106	2,932,119
Other debtors	292	292	290	290
Intercompany debtors	-	-	84,086	47,455
	4,941,858 =====	2,951,974 =====	5,025,942 =====	2,999,427 =====
16a. CREDITORS: amounts falling due within one year	Group 2022 £	Group 2021 £	Charity 2022 £	Charity 2021 £
Trade creditors	188,182	181,637	188,373	179,327
Taxation and social security	26,690	26,961	25,890	26,811
Pensions	55,767	51,218	55,767	51,218
Accruals and deferred income	840,005	803,240	838,355	801,740
Other creditors	-	149	-	149
	1,110,644 =====	1,063,205 =====	1,108,384 =====	1,059,245 =====

Accruals and deferred income includes deferred income as follows:

	Group & Charity 2022 £	Group & Charity 2021 £
At 1 April 2021	434,285	101,539
Amounts deferred in the year	475,282	434,285
Amounts released in the year	(434,285)	(101,539)
At 31 March 2022	475,282 =====	434,285 =====

RENNIE GROVE HOSPICE CARE
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FOR THE YEAR ENDED 31 MARCH 2022

16b. CREDITORS: amounts falling due more than one year	Group 2022	Group 2021	Charity 2022	Charity 2021
	£	£	£	£
Barclays Loan	-	750,000	-	750,000
	<u>-</u>	<u>750,000</u>	<u>-</u>	<u>750,000</u>
	=====	=====	=====	=====

Rennie Grove Hospice Care repaid this loan on 30 September 2021. No interest or fees was payable by Rennie Grove Hospice Care. During the previous financial year ending 31 March 2021, Rennie Grove Hospice Care was successful in its loan application to Barclays for a £750k loan to cover working capital requirements from the Coronavirus Business Interruption Loan Scheme (CBILS). This scheme was backed by the British Government and no interest was payable in the first 12 months of the loan. The loan was drawdown on the 30 September 2020.

17. PENSION COMMITMENTS

The Charity contributed to three pension schemes during the year on behalf of its employees.

- The NHS Pension Scheme
- The Pensions Trust Growth Plan
- The Standard Life defined contribution scheme

Contributions to each scheme are charged to the Statement of Financial Activities as they arise.

The NHS Pension Scheme is an unfunded, defined benefit scheme that covers NHS employers, general practices and other bodies allowed under the direction of the Secretary of State in England and Wales. As a consequence, it is not possible for the Charity to identify its share of the assets and liabilities of the underlying scheme.

NHS Resource Accounts are published on the NHS Pensions website annually and include the report from the scheme actuary. £15,433 in contributions were outstanding at 31 March 2022 (2021: £13,370).

The Pensions Trust Growth Plan is a money purchase scheme with guaranteed benefits which is closed to new members. This is a multi-employer scheme and as it is not possible to identify the Charity's share of underlying assets and liabilities, the scheme is accounted for as a defined contribution scheme and contributions are accounted for as they fall due. A ten year deficit reduction plan has been agreed, into which the Charity pays a sum of £44 per annum. The most recent estimate as at 30 September 2021 shows that a liability of £29,039 (2020: £43,128) would arise if the Charity withdrew from the scheme. There is no plan to leave the scheme therefore this liability has not been provided for in the financial statements. £1,406 in pension contributions were outstanding at 31 March 2022 (2021: £1,123).

The Standard Life scheme covers both the defined contribution and auto enrolment obligations.

The Standard Life defined contribution scheme had £Nil in pension contributions outstanding at 31 March 2022 (2021: £Nil). The Standard Life auto-enrolment scheme had £38,927 in pension contributions outstanding at 31 March 2022 (2021: £36,725).

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

18. RESERVES 2022

	At 1 April 2021 £	Income £	Expenditure £	Gains, Losses and Transfers £	At 31 March 2022 £
Group:					
Unrestricted funds					
General fund	8,481,531	11,340,134	(7,445,238)	(621,011)	11,755,416
Designated fixed asset fund	150,101	-	(60,358)	-	89,743
Building Refurbishment	-	-	-	300,000	300,000
Digital Transformation	-	-	-	500,000	500,000
Iain Rennie Hospice Services	57,640	199,285	(199,090)	-	57,835
	<u>8,689,272</u>	<u>11,539,419</u>	<u>(7,704,686)</u>	<u>178,989</u>	<u>12,702,994</u>
Restricted funds					
Property fund	2,492,062	-	(33,915)	-	2,458,147
Pepper Foundation	-	385,929	(385,929)	-	-
COVID grant funding through Hospice UK	-	985,516	(985,516)	-	-
Nurses Cottage Trust	294,798	9,308	(9,308)	(21,900)	272,898
Other restricted funds	155,655	143,589	(236,595)	-	62,649
	<u>2,942,515</u>	<u>1,524,342</u>	<u>(1,621,263)</u>	<u>(21,900)</u>	<u>2,793,694</u>
Total funds	<u>11,631,786</u>	<u>13,063,760</u>	<u>(9,355,949)</u>	<u>157,089</u>	<u>15,496,688</u>
	=====	=====	=====	=====	=====
Charity:					
Unrestricted funds					
General fund	8,476,762	11,427,835	(7,532,941)	(621,011)	11,750,645
Designated fixed asset fund	150,101	-	(60,358)	-	89,743
Building Refurbishment	-	-	-	300,000	300,000
Digital Transformation	-	-	-	500,000	500,000
	<u>8,626,862</u>	<u>11,427,835</u>	<u>(7,593,299)</u>	<u>178,989</u>	<u>12,640,388</u>
Restricted funds					
Pepper Foundation	-	385,929	(385,929)	-	-
COVID grant funding through Hospice UK	-	985,516	(985,516)	-	-
Property fund	1,951,351	-	(27,324)	-	1,924,028
Nurses Cottage Fund	294,799	9,308	(9,308)	(21,900)	272,898
Other restricted funds	155,653	143,589	(236,596)	-	62,646
	<u>2,401,804</u>	<u>1,524,342</u>	<u>(1,644,672)</u>	<u>(21,900)</u>	<u>2,259,573</u>
Total funds	<u>11,028,666</u>	<u>12,952,177</u>	<u>(9,237,971)</u>	<u>157,089</u>	<u>14,899,961</u>
	=====	=====	=====	=====	=====

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

RESERVES 2021 – PRIOR YEAR COMPARATIVE

18. RESERVES 2021

	At 1 April 2020 £	Income £	Expenditure £	Gains, Losses and Transfers £	At 31 March 2021 £
Group:					
Unrestricted funds					
General fund	5,782,209	8,242,206	(5,090,754)	(452,131)	8,481,530
Designated fixed asset fund	243,659	-	(1,009,078)	915,520	150,101
Designated equipment fund	-	-	-	-	-
Iain Rennie Hospice Services	13,203	89,335	(44,896)	-	57,642
	<u>6,039,071</u>	<u>8,331,541</u>	<u>(6,144,728)</u>	<u>463,389</u>	<u>8,689,273</u>
Restricted funds					
Property fund	1,604,922	-	887,140	-	2,492,062
Other Restricted Funds – fixed assets	-	-	-	-	-
Pepper Foundation	-	325,730	(325,730)	-	-
COVID grant funding through Hospice UK	-	2,729,515	(2,729,515)	-	-
Nurses Cottage Trust	316,041	9,308	(9,308)	(21,243)	294,798
Other restricted funds	145,519	465,390	(455,254)	-	155,655
	<u>2,066,482</u>	<u>3,529,943</u>	<u>(2,632,667)</u>	<u>(21,243)</u>	<u>2,942,515</u>
Total funds	<u>8,105,553</u>	<u>11,861,484</u>	<u>(8,777,395)</u>	<u>442,146</u>	<u>11,631,788</u>
	=====	=====	=====	=====	=====
Unrestricted funds					
General fund	5,777,438	8,231,861	(5,080,407)	(452,131)	8,476,761
Designated fixed asset fund	243,659	-	(1,009,078)	915,520	150,101
Designated equipment fund	-	-	-	-	-
	<u>6,021,097</u>	<u>8,231,861</u>	<u>(6,089,485)</u>	<u>463,389</u>	<u>8,626,862</u>
Restricted funds					
Pepper Foundation	-	325,730	(325,730)	-	-
COVID grant funding through Hospice UK	-	2,729,515	(2,729,515)	-	-
Property fund	1,057,621	-	893,731	-	1,951,352
Nurses Cottage Fund	316,041	9,308	(9,308)	(21,243)	294,798
Other restricted funds	145,517	465,390	(455,254)	-	155,653
	<u>1,519,179</u>	<u>3,529,943</u>	<u>(2,626,076)</u>	<u>(21,243)</u>	<u>2,401,803</u>
Total funds	<u>7,540,276</u>	<u>11,761,804</u>	<u>(8,715,561)</u>	<u>442,146</u>	<u>11,028,665</u>
	=====	=====	=====	=====	=====

**RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022**

18. RESERVES (continued)

Restricted Funds

Property Fund

The property fund represents the net book value of Gillian King House, a freehold property purchased through a gift from a trust in November 2002 to accommodate the nursing and support teams operating in the South Bucks area, and the Grove House premises, which is a leasehold property, subject to a lease from the Department of Health for 99 years from 1991. The construction and subsequent extensions of the premises have been financed mainly from grants and donations made for these specific purposes.

The Pepper Foundation

The Pepper Foundation and Department of Health funds are received towards the salaries and expenses of the paediatric Hospice at Home team and the family support services.

Nurses Cottage Fund

In May 2018, Rennie Grove Hospice Care received a donation from The Nurses Cottage Fund consisting of Treasury Stock and Cash totalling £241,614. The trustees have approved the expenditure of cash and earned interest on clinical care in the Great Missenden and Prestwood areas.

Other Restricted Funds

Other restricted funds consist of smaller grants and donations given for specific purposes or projects.

Designated funds

The Fixed Asset Fund represents the net book value of fixed assets other than property.

The Trustees have approved two new Designated funds to a total value of £800,000 split between a Building Refurbishment fund of £300,000 and a Digital Transformation fund of £500,000.

Building Refurbishments £300,000

Replacement Grove House Boilers £100,000

Replacement Kitchens and Sanitary Wear at office location £50,000

Air Conditioning fitted at office locations £50,000

New Windows at Grove House £50,000

Retail Shops £50,000

Digital Transformation £500,000

Replacement Clinical Database £150,000

Replacement Finance System £100,000

Replacement Cascade HR System £100,000

Cloud Based Security Products £120,000

Risk Management System £15,000

Rota Management System £15,000

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

Transfers

During the year £nil (2021: £915,520) was transferred from general reserves to designated fixed asset fund to reallocate capital expenditure. During the year £800k (2021: £Nil) was transferred from general reserves to two new designated funds. In 2022, £Nil (2021: £Nil) of expenditure on fixed assets was transferred from restricted to unrestricted.

19. ANALYSIS OF NET ASSETS BY FUND (2022)

	Unrestricted funds £	Restricted funds £	Total £
Group:			
Tangible fixed assets	89,743	2,458,149	2,547,892
Investments	3,669,271	272,898	3,942,169
Other net assets	8,943,980	62,647	9,006,627
Total net assets	<u>12,702,994</u>	<u>2,793,694</u>	<u>15,496,688</u>
Charity:			
Intangible fixed assets			
Tangible fixed assets	89,743	1,924,028	2,013,771
Investments	3,669,273	272,898	3,942,171
Other net assets	8,881,372	62,647	8,944,019
Total net assets	<u>12,640,388</u>	<u>2,259,573</u>	<u>14,899,961</u>

ANALYSIS OF NET ASSETS BY FUND (2021)

	Unrestricted funds £	Restricted funds £	Total £
Group:			
Intangible fixed assets	100,000	-	100,000
Tangible fixed assets	150,101	2,492,064	2,642,165
Investments	2,501,402	294,796	2,796,198
Other net assets	5,937,770	155,655	6,093,425
Total net assets	<u>8,689,273</u>	<u>2,942,515</u>	<u>11,631,788</u>
Charity:			
Intangible fixed assets	100,000	-	100,000
Tangible fixed assets	150,101	1,951,353	2,101,454
Investments	2,501,404	294,796	2,796,200
Other net assets	5,875,356	155,655	6,031,011
Total net assets	<u>8,626,862</u>	<u>2,401,803</u>	<u>11,028,665</u>

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

20. SUBSIDIARY COMPANIES

The charitable company owns 100% of the share capital of three subsidiaries, which are all incorporated in England and Wales. The results for the year to 31 March 2022 and the assets and liabilities at this date are included within the consolidated financial statements.

		Income £	Expenditure £	Net funds £
St Albans and Dacorum Day Hospice Company number: 2609260 Charity number: 1003462	(100% owned)	-	-	4,772
Iain Rennie Hospice at Home Company number: 2199373 Charity number: 297847	(100% owned)	-	6,591	534,120
Iain Rennie Hospice Services Company number: 03068254	(100% owned)	199,285	111,388	57,837
		=====	=====	=====

21. RELATED PARTY TRANSACTIONS

The charitable company has three subsidiaries, detailed in note 20 above. During the year Iain Rennie Hospice Services made donations to the charitable company of £87,702 (2021: £10,345).

At 31 March 2022 St Albans and Dacorum Day Hospice was due £Nil from the charitable company (2021: £Nil), Iain Rennie Hospice at Home was due £Nil from the charitable company (2021: Nil) and Iain Rennie Hospice Services is due £87,702 to the charitable company (2021: £10,345).

22. FINANCIAL COMMITMENTS

As at 31 March 2022 the Charity and group was committed to making the following payments under non-cancellable operating leases:

	Land and buildings	
	2022 £	2021 £
Expiry date:		
Within one year	670,332	665,906
Between one and two years	520,244	574,446
Between two and five years	1,070,235	1,005,616
In over five years	792,110	670,286
	=====	=====
	3,052,921	2,916,254

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

23. FINANCIAL INSTRUMENTS

GROUP:	2022 £	2021 £
Financial assets at amortised cost	5,097,862	4,966,774
Financial liabilities at amortised cost	243,949	235,315
Financial assets at fair value	3,683,362	2,537,391
Equity instrument at cost less impairment	258,806	258,806
CHARITY:		
Financial assets at amortised cost	5,026,752	4,903,948
Financial liabilities at amortised cost	156,438	199,150
Financial asset at fair value	3,683,362	2,537,391
Equity instrument at cost less impairment	258,808	258,808

24. NOTES TO THE CASHFLOW STATEMENT

	2022 £	2021 £
Reconciliation of changes in resources to net cash inflow/(outflow) from operating activities		
Net income for reporting period	3,834,900	3,526,235
Depreciation of tangible fixed assets	94,272	121,936
Amortisation of intangible fixed assets	100,000	100,000
(Gains)/Losses on investments	(155,835)	(441,968)
Interest received	(920)	(439)
Dividends received	(9,347)	(9,737)
Realised (Gains)/Loss	(1,255)	(176)
(Increase)/Decrease in stock	(26,842)	(819)
Decrease/(Increase) in debtors	(1,959,883)	(340,278)
Increase/(Decrease) in creditors	47,440	(394,836)
Net cash generated by operating activities	1,922,530	2,559,918
	=====	=====

RENNIE GROVE HOSPICE CARE
NOTES TO THE FINANCIAL STATEMENTS
FOR THE YEAR ENDED 31 MARCH 2022

25. COMPARATIVE CONSOLIDATED STATEMENT OF FINANCIAL ACTIVITIES (2021):

	Notes	Unrestricted Funds £	Restricted Funds £	Total 2021 £
INCOME FROM:				
Donations and legacies	2	3,305,212	460,720	3,765,932
Charitable activities	3			
NHS funding		998,707	-	998,707
Rapid Personalised Care		1,153,620	-	1,153,620
Other income from charitable activities		-	3,055,245	3,055,245
Other trading activities	2			
Events & community		486,440	4,670	491,110
Retail income		830,008	-	830,008
Investments		868	9,308	10,176
Other	4			
Hospice Lottery Partnership		435,704	-	435,704
Other income		1,120,982	-	1,120,982
Total income		8,331,541	3,529,943	11,861,484
EXPENDITURE ON:				
Raising funds	5			
Donations and legacies		841,506	-	841,506
Fundraising activities		2,296,927	-	2,296,927
Charitable activities	5			
Patient care		1,830,390	2,632,667	4,463,057
Rapid Personalised Care		1,175,905		1,175,905
Total expenditure	5	6,144,728	2,632,667	8,777,395
Net gains/(losses) on investments		463,389	(21,243)	442,146
Net income/(expenditure)	7	2,650,201	876,033	3,526,235
Other recognised gains/(losses)		-	-	-
Net movement in funds		2,650,201	876,033	3,526,235
Funds brought forward		6,039,071	2,066,482	8,105,553
Funds at 31 March 2021		8,689,272	2,942,515	11,631,788