

# Summary Information Return 2013 (Online)



## Summary Information Return 2013

This return is intended to comprise a summary of key information contained in the Trustees' Annual Report and accounts and in other documents.

All this information will be made public - P

## ST MICHAEL'S HOSPICE HASTINGS AND ROTHER

**Charity number: 288462**

**Financial period end: 31 March 2013**

**Submitted on 23 December 2013**

This online version of the form shows the information you have entered through Annual Return 2011 Online and has been designed to make it easier for charities to print.

**This Summary Information Return was submitted online by MS VINYO AIDAM on 23 December 2013. You do not need to send us a signed copy.**

### Question 1 - The charity's aims

What are your charity's aims?

Our aim is to provide the highest standards of palliative care for people in Hastings and Rother, and effective support for their families and carers. We seek to offer a flexible response to the needs of each individual through a combination of specialist and continuing palliative in-patient care beds (30), day therapy (72 places a week) as well as specialist palliative care in an individual's home, 24 hours a day 365 days a year, including a night sitting service.

We also have a Hospice Neighbours scheme, offer a bereavement service, work collaboratively with other services, and educate others in End Of Life Care.

### Question 2 - Who benefits?

Who benefits from your charity's work?

We offer services to the people of Hastings and Rother, covering a population of around 175,000. The area includes some of the most deprived wards in the UK.

How do you respond to their needs and how do they influence the charity's development?

Central to our philosophy of care is meeting the individual needs of everyone referred to us, including providing care in the place of the patient's choice. Following referral, all patients are assessed, their care plan discussed and agreed with them; with care provided by a multi-professional team.

We have increased patient involvement; outcomes of patient surveys are taken into account in developing services. We regularly consult on a range of issues, including the hospice environment.

We are also firmly committed to working in partnership with local statutory organisations to plan and deliver services, and seek the views of our referrers about making improvements. We work in collaboration with a wide range of local voluntary groups.

### **Question 3 - The charity's strategy**

What are the key elements of your charity's medium to long term strategy?

Our strategy is:

1. To provide and develop responsive services that support choice and independence
2. To ensure that access to our services is available fairly and without discrimination
3. To maintain and develop continuity of care through collaborative working
4. To promote the highest standards of palliative care
5. To encourage the continuing professional development of our staff
6. To recognise, encourage and develop the essential contribution that volunteers make to St Michael's
7. To be transparent and accountable, as an independent charity, to our communities on whose generosity we depend
8. To work with financial integrity and secure our long-term future
9. To maintain and enhance our reputation as a charity respected and valued by the community.

How does your charity measure the success of the strategy?

- Through:
1. Patients' and families' views on our quality of care.
  2. External accreditation validating the quality of our services.
  3. Improved accessibility and improved patient environment.
  4. Effective supervision systems and access to training in place for staff.
  5. Increased diversity of volunteers, with a wide range of roles.
  6. An increase in income and a strong image displayed in our publications.
  7. A stable financial position and a healthy balance sheet.

#### **Question 4 - The charity's objectives and achievements**

What were your charity's main annual objectives and were they achieved?

<b>Objective</b>	<b>Achievement</b>
Continue to provide the highest standards of palliative care.	A CQC inspection showed we met standards reviewed, and care plans had to reflect the care provided. 100% In-patient services survey respondents considered services excellent/very good. An MoU was agreed with ESHT to improve co-ordination of services.
Increase our income and maintain a healthy balance sheet to ensure the future continuity of funds.	We continue to apply expenditure controls, seek value for money and work harder at raising income. As a result, we have maintained our reserves, despite ending the financial year 2012-13 with a deficit of £153k.
Maintain and improve the fabric of our buildings.	An active programme to improve the patient environment is in place. We applied for, and were awarded, a Department of Health Grant for major improvements in patient areas (for completion in 2013-14).
Increase and develop access to our services.	In-patient admissions in 2012-13 were about the same as 2011-12 but our community presence continued to grow. A Hospice Neighbours project continues to expand successfully.

#### **Question 5 - The charity's income and spending**

What were your charity's most significant activities during the year and how much did it spend on them?

<b>Charitable activities</b>	<b>£ 000s</b>
We spent 72% on patient care.	3,737
We spent 20% on fundraising	1,058
We spent 8% on administration.	374
Explanatory comments	
We spent 72% on patient care, 20% on fundraising and 8% on administration. We continue to exercise good controls over expenditure but not at the expense of patient care and comfort.	

What were your charity's three main fundraising activities in the year and how much did each generate and cost?

<b>Fundraising activity</b>	<b>Income generated £ 000s</b>	<b>Cost of activity £ 000s</b>
Fundraising, Donations and Legacies.	1,887	357
Retail company	683	436
Lottery company	632	265

#### **Question 6 - The charity's financial health**

How would you describe your charity's financial health at the end of the period?

Our fundraising performance was very strong during the year in which we celebrated our Silver Jubilee, and we continued to maintain good financial controls. While legacy notifications in the year were comparable to previous years, a combination of under-achievement on some of the legacy values (notified in previous years) and an amendment to the way we report on them (taking into account certainty of receipt) meant that we had a shortfall in legacy receipts. This resulted in a deficit of £153k for the year.

Our reserves remain in excess of the £2m contingency fund representing 12 months net running costs, as stated in our reserves policy.

#### **Question 7 - The next year**

How will the overall performance last year affect your charity's medium to long term strategy?

Service development is being focused on our core specialist palliative care services. We continue to invest in clinical staff training and to monitor closely the quality of our services so that we can make sustainable improvements.

Work on improving access to our services has continued.

We monitor carefully the effect the economic climate has on our supporters. Our reserves are sufficient to maintain our service provision but careful planning and support for our fund raising activities are needed to ensure this position is maintained for the longer term. We are actively seeking the reduction of our electricity usage through our solar panels, a voltage regulator, and other measures.

What are your charity's main objectives for next year?

Developing our community services

Strengthening our relationship with the NHS.

Ensuring our financial sustainability, and continuing to develop our staff and volunteers.

Increasing our local support and developing our fund raising activities.

### **Question 8 - The charity's governance**

How does your charity ensure that its governance arrangements are appropriate and effective?

The Board recruits Trustees with experience and knowledge. Governance arrangements include:  
Induction of new Trustees; Meetings with senior staff on critical issues; Trustees on committees appropriate to their strengths; Regular Trustee workplace inspections; Monitoring strategic, business and clinical governance plans;  
Robust risk management; Review of Board and financial performance and clinical stats; Audit Committee scrutiny of Accounts and audit procedures; Separate Boards oversee Retail and Lottery activities.  
Clinical Governance, Health & Safety, Information Governance, Diversity & Equality Groups form an integral part of our governance, as do effective recruitment, support and supervision processes for all staff and volunteers.

### **Question 9 - Further details**

Further details on all the answers given in this Summary Information Return can be obtained from:

Vinyo Aidam (Head of Finance and IT)  
Celia Pyke-Lees (Chief Executive)  
[www.stmichaelshospice.com](http://www.stmichaelshospice.com)  
Annual Report and Accounts

## Declaration

This Summary Information Return was submitted online by MS VINYO AIDAM on 23 December 2013, telephone number 01424 456370.

MS VINYO AIDAM certified online that:

- the information provided was correct
- it had been or would be brought to the attention of all the trustees

Those who give answers that they know are untrue or misleading may be committing an offence.