

ANNUAL REPORT & FINANCIAL REVIEW

Year Ended 31 March 2025





**You are at the heart of
everything we do!**





Dr. Kershaw
Kershaw
Hospice

In the heart of everyt

Contents.

Mission Statement	7
Our Values	8
About Dr Kershaw's	11
Management & Financial Details	12
Structure, Governance & Management	13
Clinical Services	16
The Medical Team	25
Safeguarding	26
Information Governance	27
Quality, Innovation & Improvement	28
Staff Wellbeing	36
Volunteering	40
Corporate Services	42
Income Development	48
Strategic Report & Financial Review	60
Statement of Board of Trustees' Responsibilities for the Financial Statements	63



Mission Statement.

**Our Mission is
'to add quality
to the lives of
people with
life-limiting
illnesses.'**

Our Values.

Our Core Value:

You are at the heart of everything we do!

Inclusiveness

We recognise, respect and embrace the diversity of our communities and will ensure and promote equality in all that we do.

Openness & Transparency

We promote and encourage an open culture across all our services and departments and encourage you to share your opinions and ideas with us.

Dignity & Respect

We will treat you with respect and uphold your privacy and dignity at all times.

Responsiveness

We will be responsive to your individual and changing needs and preferences and will be proactive in how we manage these within the wider health and social care system.

Compassion

We will treat you with compassion and be sensitive to your personal needs and wishes.

High Quality Care

We are dedicated to providing the highest quality, holistic care that delivers the very best outcomes for you.





About Dr Kershaw's Hospice.

Dr Kershaw's Hospice is an adult hospice serving the Oldham community and its surrounding areas, providing specialist end-of-life and palliative care for those with life-limiting illnesses as well as support for those who are important to them - loved ones, families, friends and even pets.

Dr Kershaw's Hospice opened its doors in 1989 and has been providing high quality care and support for the people of Oldham and the local boroughs, both during a person's illness, at death, and into bereavement - for as long as they need us.

The Hospice has a devoted and highly skilled Clinical Team of doctors, nurses and healthcare assistants who support patients in the Hospice's Inpatient Unit and Wellbeing Centre along with supporting patients in the community through the Hospice at Home service and Caring Hands, the Hospice's domiciliary care service.

The Hospice reaches out into family homes, hospitals and care homes. We pride ourselves on our ability to offer and provide emotional, spiritual and practical support to our colleagues.

The Trustees (who are also Directors of the charity for purposes of company law) present their financial statements and annual report for the year ended 31 March 2025. The other general information given in this report has been collated from Steering Groups, which have taken place throughout the financial year.



Acknowledgements.

Dr Kershaw's Hospice's Board of Trustees would like to express their thanks and appreciation to all the funders and supporters, from over the past year, for their invaluable financial contributions. Your donations have enabled Dr Kershaw's to continue its vital work and support patients, and their families, within the community of Oldham.

It has been a pleasure working in partnership with the Greater Manchester Integrated Care System (ICS) and we thank them for their support.

Thanks, must also be given to our Corporate Partners for their generous support, which included, but was not limited to; BS Entwistle Electrical Contractors, Molnlycke, Monarch Metals Limited, Olympic Construction Limited, Diodes Zetex Semiconductors, Life For A Life Memorial Forests, Roma Publications Ltd, Grains Bar Hotel, Wiggett Construction Ltd, Ribble

Packaging, Oldham Business Awards, Pilgrim International Ltd, Landlord Furniture Co, Garratts Solicitors, HSBC, Best Food Logistics, Urban Green Space, N Brown, Howards Domestic, Willmow Reclamation and Salvage, Furniture By Lauren and Spindle's Shopping Centre.

We are also extremely grateful to all the Trusts and Foundations who have given generously to the Hospice throughout the year, including The Albert Hunt Trust, The Crane Fund for Widows and Children, The February Foundation, Hospital Saturday Fund, The Treeside Trust, Action Together and The Roger Tanner Trust.

The Hospice relies on our local community for their continued support, and we express our sincere thanks to all the individual donors and event participants, without whom our work would not be possible, and to the generous people who left a gift to Dr Kershaw's in their Will, or have pledged to do so in the future. Thank you to you all for your unfaltering support and kindness.

Management & Financial Details.



Trustees.

Dr Paul Cook (Chair)	Appointed January 2020
Jacqueline Wood (Vice Chair)	Appointed January 2021-resigned 11th June 2024
Jonathan Lipton (Vice Chair)	Appointed January 2015
Rachel Damianou	Appointed October 2019
Kim Wrigley	Appointed January 2021- resigned 1st April 2024
Stephen Schofield	Appointed January 2021
Eileen Jones	Appointed November 2022
Richard Buchanan	Appointed November 2022
Mark Hadfield	Appointed November 2022
David Macdonald	Appointed November 2022
Ian Chapman	Appointed November 2022-resigned 26th June 2024
Daryl Kitchener	Appointed November 2024
Kathryn Taylor	Appointed November 2024
Nicola Nicholls	Appointed November 2024
Matthew Flemming	Appointed November 2024
Julie Hesselgrove-Ward	Appointed November 2024

Trading Company.

Dr Kershaw's Hospice Ltd	Company Secretary – Rachel Damianou
Company Number – 05221414	Charity Number – 1105924

Senior Management Team.

Adele Doherty	Chief Executive Officer
Dr Matthias Hohmann	Medical Director
Lindsey Harper	Director of Clinical Services
Rebecca Bentham	Director of Income Development & Marketing
Sabrina Dawson	Director of Finance
Lyndsey Donbavand	Corporate Services Manager
Kelly Foster	Inpatient Unit Manager
Sarah Longmore	End-of-Life Nurse Educator
Kathryn Harding	Wellbeing Centre Manager
Nicola Heppenstall	Community Services Manager
Mandi Halton	HR Manager

Banking Services.

Barclays Bank PLC	Market Street, Manchester, M1 1PD
RBC Brewin Dolphin	1 The Avenue, Spinningfields Square, Manchester, M3 3AP
Royal Bank of Canada	1 The Avenue, Spinningfields Square, Manchester, M3 3AP

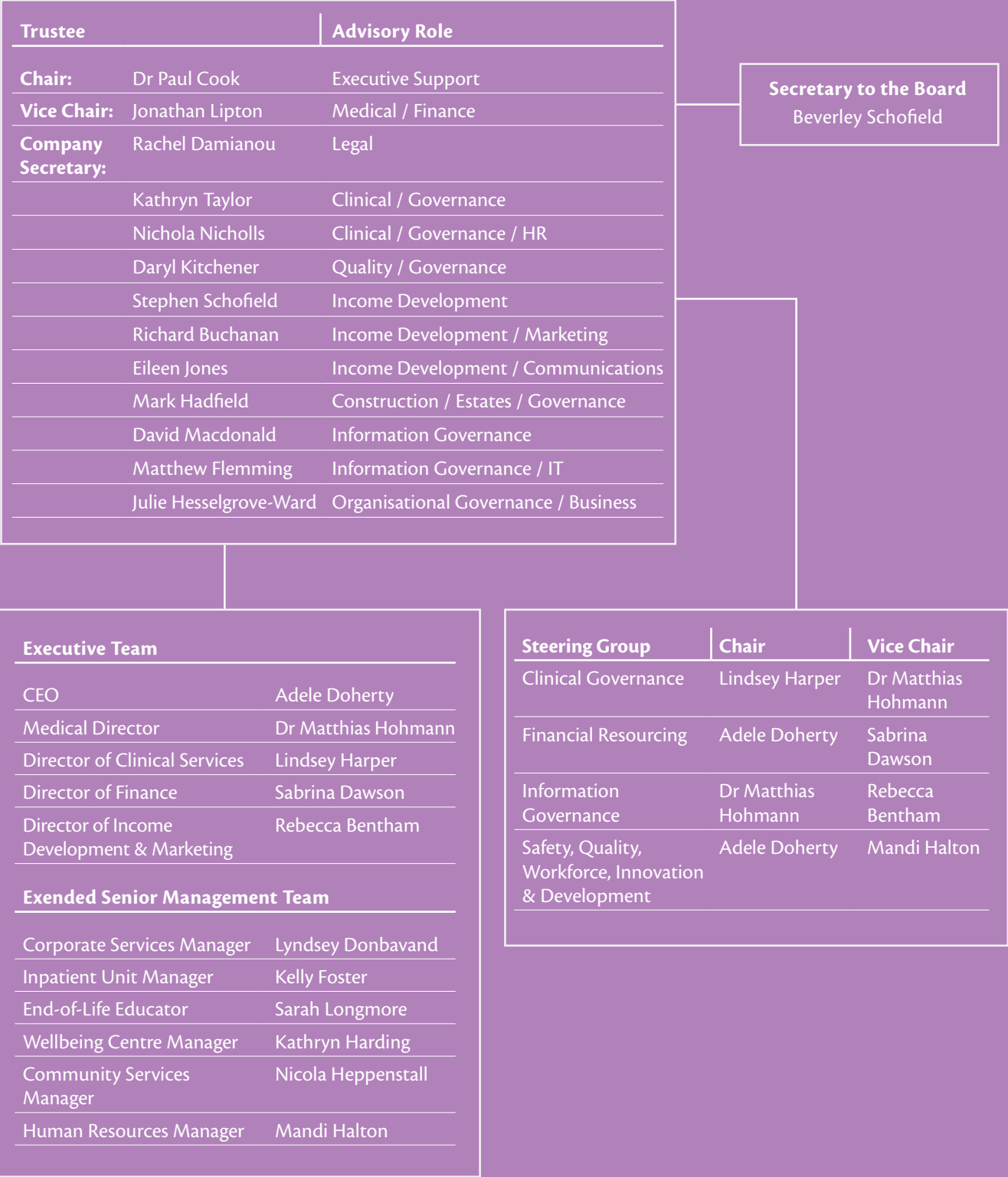
External Auditors.

Chadwick & Company - Chartered Accountants
Capital House, 272 Manchester Road
Droylsden, Manchester M43 6PW

Structure, Governance & Management.

Dr Kershaw’s Hospice organisational governance structure is shown in the diagram below.

Board Governance Structure - 2024/25.



Structure, Governance & Management.

Organisational Governance.

The Board of Trustees are fully committed to the values and principles of the Hospice. They are accountable to the Charity Commission to act in the best interests of the Hospice and to manage its resources responsibly whilst seeking to minimise risks.

They have continued to ensure that Dr Kershaw's has a clear strategy, that it remains true to its original vision, and that it complies with all necessary rules and legal obligations.

The day-to-day management of the Hospice is under the direction of the Chief Executive and the accompanying Executive Team. The Hospice, with oversight from the Board, has progressed well with the 2020-25 strategy, completing 35 objectives in total. The Board of Trustees, in partnership with the Extended Senior Management have developed the new strategic plan covering 2025-28.

The Chair wishes to thank all our staff and volunteers in delivering another successful year, despite challenges within the healthcare system, and our Trustees for the significant time commitment and contribution to improving outcomes for users of Dr Kershaw's services.

The year saw the recruitment of five new Trustees to the Board, with a range of experience, which will

add real value to the Hospice and support the Senior Management Team with the implementation of the new Strategic Plan. Dr Kershaw's Hospice is in a good position to serve the Oldham community, that continues to support us unwaveringly. Thank you to all our supporters.

Throughout the year, the Hospice maintained strong financial governance, ensuring effective oversight and accountability in all financial matters. Prudent financial management and strategic decision-making have contributed to a positive financial performance, allowing us to meet our goals and continue investing in key areas. The stability ensures the long-term sustainability of our services and supports ongoing infrastructure improvements.

Dr Kershaw's Hospice is a charitable company limited by guarantee and is registered under the Companies Act 1985, Company Registration Number 05221414, Charity Registration Number 1105924. Its activities are governed by its Memorandum and Articles of Association listed at Companies House on 3 September 2004 and amended on 18 January 2024. The principal and registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited to £10 per member of the charity.





Trustee Recruitment.

Trustee recruitment is undertaken when a vacancy or skill gap is identified via our skills analysis.

Opportunities advertised to both broad and targeted audiences, to give us the best chance of securing interested individuals with the appropriate skills and diversity mix.

Potential trustees are invited to apply by submitting an expression of interest and then invited to a formal interview, in front of a panel made up of the Chief Executive and 3 other Trustees, to discuss skills, expectations and commitment as well as to ensure that the candidate has a clear understanding of the role and responsibilities of being a trustee of Dr Kershaw's Hospice.

If successful, a candidate trustee will be welcomed for a term of office as laid out in our Memorandum and Articles of Association. The new trustee is issued with an Induction Pack including details of the Board and Hospice Structure, role specifications, the Trustee Code of Conduct, Nolan Principles for Standards in Public Life and Trustee Declaration of Interests along with a number of other supporting guidance documents. Attendance is required at a formal induction half-day, meeting with selected members of our Senior Management Team and fellow Trustees.

Trustees are required to complete a programme of mandatory training, enhanced DBS checks and are provided with access to Dr Kershaw's Trustee SharePoint and Vantage, ensuring access to the risk register, policies, strategies and all strategic actions.

Clinical Services.

Inpatient Unit.

Dr Kershaw's Hospice worked closely with the NHS commissioning teams in Oldham to develop a range of additional clinical services that enhance patient choice, patient flow and utilisation of hospital beds. The Hospice received additional NHS funding for these services and has been more financially sustainable as a result.

Dr Kershaw's is such a wonderful facility and we are so lucky to have this so close to home. Nothing was too much trouble, we could take our dog in which was great for morale. All the staff were exceptional, professional, caring and thoughtful.

Due to the success of the Step-down and In-reach services last year, we were able to continue with these services from April 24. The services support patient flow and discharges from the acute sector, whilst also allowing our Hospice senior nurses to recognise patients in need of end-of-life care during their daily attendance at the hospital site.

Step-Down: The Step-down Service allows us to offer care for patients that are to be discharged to their home or to a care/nursing home safely with appropriate social support. A number of Hospice beds were made available to accept patients from hospital who no longer need to be in hospital and who do not meet the Hospice's usual admission criteria. This helps with patient flow at the Royal

Oldham Hospital: patients are discharged more quickly so that hospital bed capacity is utilised to its best potential. The Hospice will then identify the best suited next place of care and provide proactive discharge support.

In-Reach: The In-reach Service aims to recognise patients who need end-of-life care and would be more suitably cared for in a hospice setting. A dedicated nursing sister liaises directly with the Royal Oldham Hospital's Emergency Department (A&E), Acute Medical Unit (AMU) and Integrated Discharge Team every working day. This scheme has helped identify patients suitable for transfer to the Hospice and has prevented avoidable hospital admissions when patients were transferred straight from A&E to the Hospice.

Palliative Care: We continue to provide excellent palliative and end-of-life care and we accept referrals for end-of-life care and complex symptom control. From April 24 – March 25 the total admissions to the IPU were 253, an increase of 13.5% on the previous year. Preferred Place of Death achieved was 90%.

We will be forever grateful to Dr Kershaw's for the care and compassion shown to my mum in her last days. Dr Kershaw's is an amazing place and will always hold a special place in my heart.

Thank you to everyone!



253
Admissions to
the IPU



13.5%
increase in IPU
admissions



90%
Preferred Place of
Death achieved

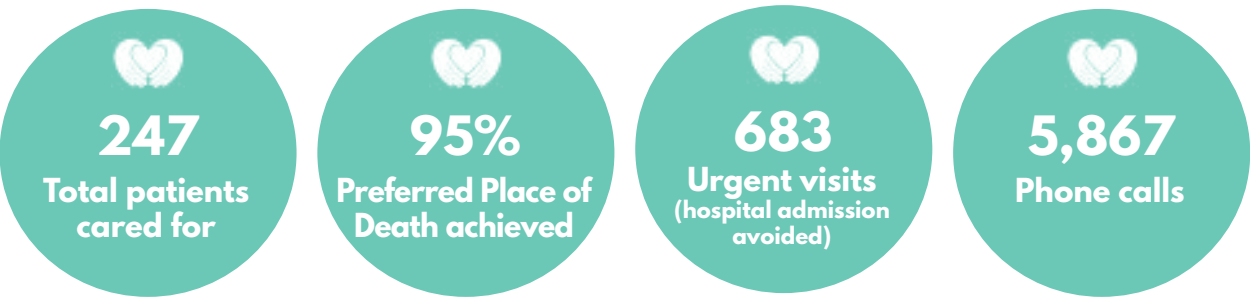


Clinical Services.

Hospice at Home.

Our Hospice at Home service continues to benefit the local community by providing individualised, responsive and flexible end-of-life care. The Hospice at Home Team work alongside and in addition to services provided by the Community Nursing Team, Home Care providers and Specialist Palliative Care Nurses. It is a rapid response service aiming to reduce the need for hospital admissions and allows patients, in their last weeks of life, to fulfil their wish to die comfortably at home. In total, 247 patients were cared for in their

own homes with 683 of the visits made being deemed urgent. These urgent visits would have resulted in a hospital admission if our Hospice at Home Team had not been able to respond so quickly and support these patients and their loved ones when they needed it most. The team made 5,867 phone calls to patients, relatives and other health professionals whilst supporting the delivery of quality care, and working in collaboration with our community colleagues. Preferred Place of Death achieved was 95%.



	2022/23	2023/24	2024/25
Hospice at Home Visits	2,261	2,255	2,495

“My mum was sent home from hospital on palliative care with heart failure and respiratory problems, it was a great comfort to know we had the support of the nurses from Dr Kershaw’s. Along with their knowledge and care, they were able to make mum comfortable in her last days.”

“I thought the service was excellent and a comfort to know we could contact Dr Kershaw’s when needed. The nurses explained everything in great depth and came across as very professional but also very caring and considerate.”



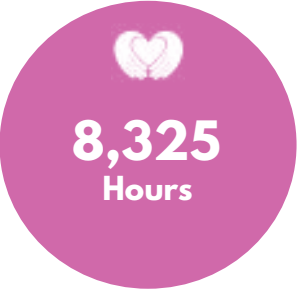


Clinical Services.

Caring Hands.

Caring Hands is a domiciliary care service and has an excellent reputation for providing high quality, personalised care for patients with a rapidly deteriorating life-limiting illness. The team is specially chosen with well-trained Health Care Assistants visiting patients in their last weeks or months of life in their own homes. The service offers individualised care that is flexible and responsive to the patient and their loved ones. Throughout the year, the team cared

for 85 patients and put in place an individualised care package for each service user. They have provided 8,325 hours of care for people in their own homes when they need it most. This year we have been working on moving to a digital system to record care for our Caring Hands service users. Ensuring that a live record is available to record and share information is a national requirement. Preferred Place of Death achieved was 97%.



	2022/23	2023/24	2024/25
Caring Hands Visits	7,792	7,622	6,581

“
All the staff who entered my house were respectful, courteous, kind and caring with a great sense of humour.
”

“
All the carers were kind and treated my husband with dignity and respect, keeping me informed and supported at such a difficult time.
”

Clinical Services.

Wellbeing Centre.

Our Wellbeing Centre services have grown significantly, with the overall number of attendances for this year being 3,148, which in comparison is an 80% increase on the previous year. Confirming that our new model of care better meets the needs of specific populations and service users. Carers have represented a further 2,473 attendances at Wellbeing Centre Sessions.

We run groups that are targeted and specialised, and have worked with teams from Macmillan, The Christie, Oldham Memory Assessment Service and other local care providers to ensure that our support is accessible and equitable to those who need it.

The majority of our groups are now well established and are regularly well attended, with new people accessing services week on week.

Dementia Hub

A weekly nurse led drop-in support service run in collaboration with Oldham Memory Assessment Service, and specially chosen Hospice volunteers, which has been running since November 2022. We have seen numbers increasing week on week, and in response to this we have developed the service by introducing an additional afternoon session. This has allowed us to better manage the number of attendees and offer more time and space to new attendees in the afternoon session. The Dementia Hub supports anyone who is affected by dementia: people living with dementia, carers, people who have concerns about themselves or a loved one. Nurses specialising in dementia care and palliative care are available for support. There are opportunities to socialise with a brew and a biscuit and offer and receive peer support from others in similar circumstances.

Music in Mind

Music Café for Dementia. This is a weekly group bringing moments of joy, connection and true expression to people living with dementia, their carers, their family and friends. Group sessions are designed to provide support to all who attend, delivering genuine care through the power of music, delivered by our in-house trained Music Champions.

Men's Group

A fortnightly, counsellor led small group exclusively for men living with life-limiting illnesses. Attendees have the opportunity to meet regularly, spend time with those who have similar experiences, offload about and explore the impact of illness, and offer and receive peer-led support.

Social Group

A fortnightly social meeting open to anyone connected to the Hospice was facilitated until early 2023, when the group was reduced to monthly due to declining numbers. In December 2024 the social group held its last meeting due to the reducing numbers.

Complementary Therapy and Crafts

Our Complementary Therapist supports patients, relatives/unpaid carers and bereaved people with one-to-one sessions in the Complementary Therapy room or in the patient rooms on the IPU. Our Complementary Therapist also facilitates an ad-hoc Complementary Therapy and Craft Group with support from our volunteers. The focus of this group is to enhance wellbeing and relaxation through craft and complementary therapies. Anyone with a connection to Dr Kershaw's is welcome to attend this group.

Carer Support Group

A fortnightly group that is specifically for carers of people living with dementia, led by a Therapist. This group was reviewed last year and a 10-week programme was developed to enhance the experience of the carers attending. Sessions provide a compassionate and safe space for attendees to connect, share experiences, and receive emotional support alongside others on a similar journey. The new programme explores, living loss, self-care and self-compassion, challenging thoughts and feelings, and accessing practical support which includes sessions with professional speakers for added guidance.





“All the help we have had from the Dementia Hub has been tremendous, it’s been like a godsend. It’s been nice to come here and talk to others about how we are feeling.”

Relaxation Group

A weekly guided relaxation session, facilitated by our Complementary Therapist. This group is open to patients living with a life-limiting illness, carers of people living with a life-limiting illness and those who are accessing our bereavement support services. The session is delivered in a relaxed group setting. A new 12-week running programme was developed this year and sessions now include wellbeing/health promotion advice along with guided relaxation.

The Nightbird Project

This is a Creative Wellbeing initiative running from March – September specifically for people living with life-limiting illness. Each session explores a different artform alongside facilitated therapeutic discussion, and peer-lead support. Sessions are delivered collaboratively by a Counsellor and Artist, and attends to the emotional and psychological impact of living with life-limiting illness. The project was inspired by a former patient who died in the

Hospice in September 2021 after receiving care from us for the last year of her life. She discovered and found comfort in her creative self during the course of her illness, and also wanted to share her life story with others. Reflecting on this with her husband, we wanted to facilitate this experience for others affected by serious illness, and so The Nightbird Project was designed to support people to share their life stories in creative ways. We have brought together a supportive group of incredible people all impacted by life-limiting illness, and have shared our stories, our laughter, our creativity and our friendship to wonderful effect. The first Nightbird Project ran from March 2022 – September 2023 and was funded by The Hospital Saturday Fund. The continued delivery of this project is reliant on external funding, and we were grateful to receive funding from The Rose of Lancaster Fundraisers to run the project for the third year.



Clinical Services.

Bereavement Support.

We understand that individual grief, and dealing with a bereavement is different for everyone, and this year we have continued with our bereavement services in recognition of this. Giving our patients' loved ones a choice of how to access and experience bereavement support.

Bereavement Support Groups

A facilitated group that is counsellor led, with volunteer support. Open to the bereaved community of Dr Kershaw's Hospice patients, the group runs from Winter through to Spring. Attendees receive a mixture of facilitated time and space for understanding and normalising grief and loss, alongside peer-led discussions and group support of people who have experienced the loss of a loved one who was being cared for by one of our Hospice services. This service is offered 6 months+ post bereavement. There was a 70% attendance at group sessions this year, with 298 attendances in total.


70%
Attendance at
group sessions
this year

walks are fully risk assessed with a recce undertaken by the counsellor prior to introducing the walk to the group. This forms part of the bereavement support offered. Group members are responsible for their own health and safety, and must arrive in appropriate attire. The walk lasts approximately 1 hour and members stay for brews and conversation afterwards in the park café.

We provide bereavement and wellbeing resources in collaboration with Me and My Therapy, a counselling service specialising in bereavement and loss, to support children to communicate and process complex feelings about loss and bereavement. We also provide books with messages that are evidence-based and age appropriate to support children and young people as their loved ones are accessing Hospice services.



Wellbeing Walks

A regular group, meeting on the last Friday of each month, promoting overall wellbeing for those affected by loss. This is a wellbeing initiative open to the bereaved community of Dr Kershaw's Hospice. The walk is facilitated at a gentle pace, enjoying a different local park each month. All

Counselling.




276
Counselling
sessions

Our full-time Counsellor started at the Hospice in August 2022, and has made a strikingly positive impact across our Inpatient and Wellbeing Services. We employed a second counsellor in May 2024 and have facilitated 276 counselling sessions this year.

The Counsellors offer specialist psychological support where required on the Inpatient Unit, as well as one-to-one counselling sessions and group support to people accessing our Wellbeing and Bereavement Support Services.

The Medical Team.

The Senior Medical Team at Dr Kershaw's Hospice is a small team of experienced doctors, the vast majority of whom have been at Dr Kershaw's Hospice for many years. In 2024/25, we were thrilled to welcome Dr James Killeen as one of our regular senior medics. Following his 12-month fixed-term employment here, he decided to stay on for regular weekend on-call cover. Just like all our other senior doctors, he has been a real asset to the organisation.

Training

Dr Kershaw's Hospice has been a training environment for resident (junior) doctors for many years. In 2024/25, we trained nine Foundation Doctors and four GP Specialist Trainees. Doctors in training find their hospice placements extremely valuable. Hospice experience is beneficial for any future medical career, and some doctors have even changed their career plans and gone into specialist palliative medicine training as a result of their placement here.

Working collaboratively

We are increasingly working across organisational boundaries, in particular with other hospices in Greater Manchester. A good example is our active collaboration with Bolton Hospice in teaching our doctors in training. We run a fortnightly joint teaching session for resident doctors at both hospices. On the back of this we have now opened up our Journal Club to Bolton Hospice and we take turns on a monthly basis reviewing and appraising papers from medical journals. It helps us keep up-to-date with emerging evidence in palliative medicine and sharpens our critical reading skills.

Electronic Prescribing

Historically, we prescribed medication for our inpatients on paper drug charts. In May 2024, we commissioned Ashtons Live View, an electronic prescribing and medicines administration software. Prescribing safety has improved and the risk of medication errors is reduced. Our senior doctor on-call is able to access the system remotely and review and adjust prescriptions as required. This makes the service more efficient and more responsive. Record keeping has improved and by reducing paper usage, we are also helping environmental sustainability.

Research

At the end of 2024, we completed data collection for the CHELsea II trial, a large national multi-centre randomised controlled study. It examines burdens and benefits of hydration support ("drip") in the final days of someone's life. Despite having a shortened recruitment period, we completed the full study protocol, collecting data on 20 participants who had agreed to take part in this research. We received accolades for the pace and quality of our work. We are now eagerly anticipating the publication of the trial results and are looking for future opportunities to get involved in palliative and end-of-life care research.

Outcomes (IPOS)

The Hospice's Medical Team collects patient reported data about the positive difference that an admission to the Inpatient Unit makes to people's lives. Most symptoms and issues are very significantly improved when a patient receives care on the Hospice Inpatient Unit:



Safeguarding.



Dr Kershaw's Hospice is fully committed to safeguarding the welfare of all those we care for, our visitors and staff. We promote an ethos that embraces diversity and inclusion and respects the rights of all involved within our services. We recognise our responsibility to promote safe practice and to protect all from harm. We have measures in place to ensure we are able to handle safeguarding issues effectively:

- The Hospice has proactive membership within the Oldham Safeguarding Adults Board governance structure and is an active participant in Greater Manchester Hospices Safeguarding Forum.
- The Safeguarding Vulnerable Adults and Safeguarding Children Policies form part of our core policies that all staff must read.
- We have a Safeguarding and Deputy Safeguarding Lead for the organisation, who completes Level 5 Safeguarding training every three years.
- The Hospice ensures that it adheres to the six principles of safeguarding and this is referred to throughout the core mandatory training and delivered in line with RCN intercollegiate document recommendations.
- The Hospice has promoted all aspects of safeguarding training in a bespoke manner. All staff must undertake a range of training including:
 - Safeguarding Adults
 - Safeguarding Children
 - Prevent
 - Restraint
 - Mental Capacity Act, Deprivation of Liberty (DoLs) and Restraint (Clinical Staff)
 - Equality, Diversity and Human Rights
 - Learning Disabilities, Autism and Mental Health Awareness
 - LGBTQ+ Awareness
 - Chaperones and Consent (Clinical Staff)
- Our volunteers are required to complete Safeguarding Training upon joining and every two years.
- We have increased the number of staff members trained as Mental Health First Aiders.
- Established safeguarding supervision for staff with an associated policy adhering to the supervision standards.
- The Hospice has tried and tested systems in place for reporting safeguarding incidents and concerns. Safeguarding incidents at the Hospice are rare but processes are in place to manage these.
- The Hospice has an ethos and a culture of proactive and reflective learning. Any incident or safeguarding concern is seen as an opportunity to drive quality and improve systems.
- Safeguarding, DoLS and DBS audits form part of the Audit Calendar.
- We have robust recruitment practices in place with mandatory DBS processes for staff and volunteers including renewals.

Information Governance.

In 2024/25, the Hospice continued to enhance its Information Governance policies and procedures and improve data security across all teams. We satisfied the mandatory requirements of the Data Security & Protection Toolkit (DSPT) and extended our Cyber Essentials accreditation to include our retail operations.

Data Security Protection Toolkit

The Information Governance Team worked hard to achieve full compliance with the standards outlined in the Data Security and Protection Toolkit. In June 2024, we successfully submitted our annual assessment, meeting all mandatory requirements.

Cyber Essentials

In July 2024, after expanding the scope of our Cyber Essentials assessment we successfully submitted our evidence to achieve accreditation.

Due to changes to the 'Bring Your Own Device' section, a Hospice-wide audit commenced to document the staff devices being used for work purposes. This procedure has now become embedded and is managed throughout the year.

Clinical Business Continuity Plan

Business Continuity continued to be a key focus over the past year. To enhance IT resilience for our clinical data systems, we installed a new 4G router in the Inpatient Unit as a backup in case of HSCN broadband failure. A comprehensive Business Continuity Guide was developed, tested by staff, and is now fully embedded into our operations.

Improvements were also made to the network with an additional broadband line being installed so the non-clinical traffic could be re-directed to improve speeds and efficiency and to improve contingency measures should one broadband line fail.

Information Governance Team Structure

Towards the end of the financial year, the Hospice reviewed its position in terms of Information Governance. We made the decision to source a new Data Protection Officer with more experience specifically in charities and fundraising.



Quality, Innovation & Improvement.

Following a successful business case, the Quality Team has welcomed a new Quality Lead to the Team, who will progress the Quality Improvements in the next Financial Year. The entire Hospice was proud to see our Director of Clinical Services receive a Queen's Nurse Award this year, recognising her commitment to ongoing learning, leadership and excellence in healthcare. The Hospice has further strengthened its Board of Trustees this year after a successful Trustee Recruitment campaign. Five new Trustees have brought with them a wealth of knowledge, which will complement the Hospice's areas of development.

Vantage

We have continued to utilise our Vantage system to create more modules to support robust operational and data management procedures and to support quality initiatives. These modules have become an integral part of Hospice systems now and help us to move towards becoming a paperless organisation.

Additional modules have been developed to support various departments across the organisation including the creation of a suite of Facilities Management Modules alongside the development of a Contracts and Purchase Order Module to support the Finance Team.

Strategic Plan

The 5-year strategic plan was successfully completed by the end of March 2024 and a new 3-year strategic plan developed following workshops with the Board of Trustees and the Senior Management Team. All Strategic Objectives are regularly reviewed by the relevant Steering Group and progress is monitored via the associated action plans on Vantage.

Audit Calendar

The Quality Team has also developed a new calendar of audits for a number of non-clinical teams, to ensure the Hospice is achieving a high quality service consistently across the wider organisation to mirror our Clinical Services.

Dashboards

The team have worked alongside the Information Governance and Data Systems Lead to create role specific dashboards on our Vantage system to ensure actions, responsibilities and priorities are more easily accessible to staff.

Key Performance Indicators

The Hospice Key Performance Indicators (KPIs) are calculated every quarter to showcase our achievements and areas of improvement across the five CQC domains.

The KPIs are calculated based on national, regional and internal averages from the previous financial year and the various sources are listed in the document for clarity – these are re-calculated every year. The KPIs are presented in a document that is distributed to all staff and displayed on noticeboards throughout the Hospice, our top 12 KPIs are also displayed in The Learning Hub.





Quality, Innovation & Improvement.

Audits.

The Quality Team continues to coordinate a well-established audit calendar that includes both clinical and non-clinical departments. The audit results, summaries and associated action plans are displayed in the Hospice so that staff are able to engage with the audits.

The Vantage Audit and Action Plan module allows for effective oversight of all audits and action plans, enabling the team to track overdue audits, schedule in audits that need to be recompleted, analyse compliance and observe trends over time.

The Quality Monitoring Calendar is regularly updated, this provides assurance and monitors all of the audits across the 5 CQC domains. All audits are assigned to a responsible staff member with a specified frequency of completion.

This year the Quality Team have further developed the Facilities audit calendar and introduced a number of additional audits across non-clinical departments, to better monitor processes.

Departments include:

- Retail
- Lottery
- Marketing
- Events
- Community and Partnerships

Overall Audit Compliance 2024-25



Quality, Innovation & Improvement.

Patient Experience.

Dr Kershaw's is always looking to initiate service improvements; therefore, feedback is extremely important to us. In the last year (April 2024 to March 2025) we received 302 compliments from service users and their loved ones in the form of surveys, cards and feedback forms.

Within the survey, we include the Friends & Family Test questions enabling us to participate in national data collection activities. The annual results of the Friends & Family Test show that 95% of respondents rated our service as 'Very Good', the highest rating.

Within our surveys, we ask patients and their loved ones whether there is anything that we could do to improve our services in order to gain insightful and constructive feedback. In this financial year, we received 9 concerns raised in survey responses. These concerns were investigated thoroughly by our Senior Clinical Team and the respondents were contacted and all concerns were resolved satisfactorily with actions taken to improve services.

The common themes in the responses were around communication. In order to improve services, we have implemented several new processes. Additional training has been developed in relation to communication and rolled out to all clinical staff. One concern raised was around access to food outside of normal Catering hours, which we have since rectified with the introduction of an out of hours offer of pre-packaged foods.

In our Steering Group meetings, we have further developed the dashboards, which include compliments, complaints and incidents so that positive feedback and learning outcomes are shared. We share feedback and patient stories at each Steering Group meeting to ensure everything we do enables the highest quality care.



“
When my wife died and the Dr Kershaw’s Team came to tend to her they left three small knitted red hearts, one for my wife, one for me and one for our son. I carry mine always as a reminder of her, it was a lovely touch.
”

Friends and Family Test Data 2024-25

	Quarter 1	Quarter 2	Quarter 3	Quarter 4	Total
Very Good	29	36	38	39	142
Good	4	1	0	1	6
Neither Good nor Poor	0	0	1	0	1
Poor	0	0	0	0	0
Very Poor	0	0	0	0	0
Don't Know	0	0	0	0	0
Not Answered	1	0	0	0	1

“
Everyone at Dr Kershaw’s was understanding, helpful, calming, showed compassion and made me and my family feel that my husband was in the best place he could possibly be. We stayed with him day and night and this meant a great deal to us and it helped keep my husband calm too. We held his hands and told him we loved him, so he wasn’t alone at the end.
”

“
From the moment we walked in and were greeted by the girls on reception we could tell it was a very special place. You were not only there for my sister but for me also and for this I will be eternally grateful. No words are enough to say thank you for all the kindness, love and care you gave us.
”

Quality, Innovation & Improvement.

Learning & Organisational Development.

Dr Kershaw's Hospice is committed to the development of its staff and aims to provide a working environment in which staff are able to maximise their performance, commitment and contribution. This is supported by the End-of-Life Nurse Educator based at the Hospice.

At the Hospice, we provide a mandatory training programme via a blended approach to learning including face-to-face, online and practical methods of teaching. This reflects current practice and is consistent with relevant national and local regulations/legislation. Mandatory training compliance has been consistently high all year and we have expanded the programme to include Preventing Sexual Harassment in the Workplace Training for all staff and Medicine Calculations Training for members of the Clinical Team.

We arrange a comprehensive two-day induction for all staff who are new to the Hospice, they are welcomed with a full orientation to help them settle into their new roles and ensure that they have the knowledge and support they need to perform their roles. We aim to give them background on the Hospice and its culture, information on the services we provide and our core values that we expect all staff to adhere to. During the induction, staff are introduced to their mandatory training requirements. Face-to-face sessions are presented over the two-day induction and time is also allocated to gain IT access and complete their computer based/online mandatory training.

Our Education and Training Prospectus is published on our website for ease of access to the most current offer of courses available. It is our mission to provide excellent education and training to improve the knowledge, skills and attitudes of our staff and volunteers. We also deliver training to our external partners in order to share our specialist knowledge in palliative and end-of-life care and to promote best practice in the wider community. We receive excellent feedback on our training sessions from both external candidates and staff in-house at the Hospice.

We deliver a wide range of specialist palliative, end-of-life and non-clinical in-house training, including but not limited to:

- Naso-Gastric (NG) Tube Placement & Management for Gastric Drainage
- Verification of Expected Death by Trained Nurses
- Non-Invasive Ventilation
- Venepuncture & IV Cannula Insertion & Care
- Syringe Driver Management
- Grief Awareness
- Mayfly Advance Care Planning Programme
- Palliative Care Emergency Training
- Delegation
- Team Building
- Skills for Appraisal
- Presentation Skills

I just want to say how amazing the trainer was, the training was definitely a credit to your team.

Trainee Nurse Associate

I found training really interesting and look forward to doing a spoke placement at the Hospice.

Trainee Nurse Associate

In order to deliver this training, we use specialist equipment including a training defibrillator and a patient care simulator mannequin for hands-on training in a wide range of skills required for day-to-day patient care. We are in the final stages of completing a clinical skills training suite based on the Hospice IPU. We received funding from the Hospital Saturday Fund to equip the room with training additional equipment.

This environment will enable us to provide clinical training in a realistic simulated environment, allowing us to capture more staff within our training, as they will remain close to the patients should they be required to assist on the Inpatient Unit. By practising skills in a realistic environment, with real equipment, staff will feel more confident and familiar with the required equipment.

This space will also enable training to be revisited as often as staff require as they will have the opportunity to 'practise' their clinical skills without an arranged formal training session on an ad-hoc basis.

We also work in collaboration with our partner organisations, Northern Care Alliance and Pennine Care NHS Foundation Trust, to provide on-site training to Trainee Nurse Associates (TNAs) and spoke placements.



Staff Wellbeing.

We have continued to consolidate much of our Wellbeing support for our staff whilst looking for opportunities to develop areas of activity. We remain committed to focusing on maintaining a healthy, content, resilient and productive workforce ensuring staff are able to work to the best of their ability.

Continuing Activities have included:

Annual Staff Survey

This valuable snapshot of our staff's opinions and views about the Hospice, their roles and working environment, focused on our Values this year and how we live these through our work at the Hospice. The feedback staff share anonymously provides us with ideas, observations and comments from across all departments, which we analyse and can then act upon to make improvements where possible.

Mental Health First Aiders (MHFA)

Our existing trained MHFA's underwent re-training and qualification and a number of new MHFA's became qualified for the first time, broadening the support and members of the team who can offer support and signpost any staff feeling overwhelmed or experiencing crisis.

Stay Interviews

We have continued to issue Stay Interview questionnaires to our staff throughout the year, via

our electronic system (Vantage), to gather insights into why our staff enjoy working at the Hospice. This feedback supports our efforts into making the Hospice the best environment it can be, for staff, patients and visitors.

Wellbeing Week

Our Wellbeing Team planned a fabulous staff wellbeing week in February, full of activities to brighten the darker winter period. The focus of this week was spreading love and kindness, including sending messages of support to colleagues, a staff wellbeing walk, a dance and movement session, some guided relaxation and a shared staff lunch.

Reflection Rounds

Our programme of Reflection Rounds continues to run quarterly, providing the opportunity for staff across departments of the Hospice to come together to focus on the specific topic of the round, offering insights and sharing ideas and thoughts with each other, helping to create a stronger understanding and appreciation of each other's roles and challenges.

Vision & Values Sessions Run by the CEO

The CEO expanded the series of Vision and Values presentations for all staff Hospice-wide continuing to share the bigger picture of our incredible organisation and its direction for the future. As a result, staff are much more informed and engaged and are fully aware of the direction that the Hospice is going in.







Staff Wellbeing.

New developments this year have been on:

Menopause Friendly Workplace

We are proud to employ a large proportion of female staff, many of whom have reached or are approaching menopause and we want to retain their invaluable experience, in providing care to our community. A number of initiatives are in place including a Menopause awareness session for staff, lighter uniform options, and a section on our intranet with useful and supportive information. The Hospice hopes to achieve the Menopause Friendly Workplace Accreditation in the near future.

Suggestion Box

The Senior Management Team have implemented a digital feedback system alongside a traditional suggestion box to encourage feedback from staff. Feedback and actions are then considered and actioned where reasonably possible.

Activity & Movement-structured Exercise Sessions

To further enhance future staff wellbeing, we are currently looking into expanding our offer to staff to include accessible functional movement exercise sessions delivered on site at the Hospice by an experienced Coach, designed to improve our staff health, and resilience.

Oldham Business Awards

Finally, this year we are proud to announce we achieved a Finalist Award at the Oldham Business Awards in the category of 'Workforce Health & Wellbeing'.

The Hospice received recognition and was one of three organisations to be awarded Finalist status in the Workforce Health & Wellbeing category and celebrated with the other finalists from across all award categories, at a glittering event held at the Queen Elizabeth Hall. We are proud to be recognised for all our staff health and wellbeing activities.



Volunteering.

In the last financial year, we have been incredibly lucky to have 404 volunteers contribute 39,947 hours of their time to the Hospice, an increase of 10.4% on the previous year. This equates to a huge cost saving of £539,812.30 to the Hospice.

Despite the growth of the volunteer team the department has continued to run a varied calendar of events, with the financial support of an Action Together Grant, and continues to prioritise recognition and engagement. The monthly events all have a wellbeing focus and aim to bring together volunteers from different departments, providing an element of peer support.

Volunteer Welcome Sessions ensure new volunteers are able to access information on the Hospice staffing structure, and the impact volunteers have on the wider organisation. Alongside a robust Volunteer Handbook and a designated staff member acting as a Volunteer Lead, volunteers are welcomed to the team and provided with sufficient support to complete their roles.

The Hospice continues to be amazed by the growth of the volunteer team and the continuous support which the community provide to Dr Kershaw's. We do not take for granted how generous people are in giving their time to us.

This year volunteers continue to be able to access a small library of specialist training modules on an optional basis, with a focus on inclusion, diversity and dementia support. Volunteers in specific roles have also benefitted from access to; Cyber Resilience sessions, Tool Box Talk Training packs, Basic Life Support and Difficult Conversation Training. Additional training opportunities are always well received with good attendance levels.

Through working closely with other Hospice teams the Volunteer Department has strengthened the volunteer team for events substantially and been able to offer more student placements than previously possible.



Absolutely love coming to the Hospice. It has given me my self-worth back after my retirement.



Possibly the most enjoyable voluntary job I have ever done.



Everyone has been very kind and welcoming since day one of my volunteering journey.



Corporate Services.

Housekeeping.

The Housekeeping Team pride themselves on high standards of cleanliness and this is reflected in the Hospice's annual Housekeeping audit, most recently scoring 96%. We consistently receive great feedback on the Hospice's facilities from patients and families.

The Housekeeping Vantage module, which has digitalised the Housekeeping checklists and provides further audit opportunities, has been developed ready for launch in 2025.

Preparation has also taken place for the implementation of Simpler Recycling Legislation, ensuring we are able to segregate our waste at source. A new range of cleaning equipment has been purchased and the Housekeeping Team are being trained to use these to the optimum level.

The PLACE inspection this year highlighted a number of minor suggestions but that overall the service user felt very confident that 'a good level of patient care and experience will be delivered in the environment.'

Quotes from surveys:

“

The Hospice was always clean and tidy and everyone had a great manner about them.

”

“

The Inpatient Unit was spotlessly clean.

”



Corporate Services.

Reception.



The Reception staff and volunteers have continued to provide a professional and friendly front-of-house reception service throughout 2024-25 ensuring all visitors to the Hospice feel welcome and valued. This year we have fully implemented the use of an electronic signing in system at the Hospice for all staff, volunteers, trustees and visitors. The checking out process now allows us to gain feedback from visitors as they exit the building, through an additional feature.

Being heavily supported by volunteers, a request was made for additional training in handling difficult

conversations and supporting emotional families. This training course has now been run on several occasions and the feedback has been incredibly positive. Our reception volunteers feeling more confident and well equipped to support visitors will undoubtedly mean a more supportive and positive experience for visitors to the Hospice.

All Reception Standard Operating Procedures have been updated this year and cascaded to the team, to ensure a consistent experience for all visitors to the Hospice.

Corporate Services.

Catering.

The Catering Team are proactive and continue to make improvements to menus, taking on board feedback from patients and visitors. With the development of our new café, providing more work space, we are also now able to offer fresh, nutritious smoothies and have launched a Take Away menu.

Patient diet sheets have been revised and the process upon admission improved to ensure Catering are

informed of patient choices and dietary requirements at the earliest opportunity.

The Hospice has invested in Catering Equipment to ensure we continue to offer high quality catering options and that our team have the resources they need to do this consistently. Our new breakfast trolley means that breakfast options can be delivered directly to patients and can be prepared at each patient's room.

IPU Patient Survey Responses



Positive comments received included:

The onsite cafe and staff are amazing. Staff always happy, chatty and food variety was good.

The quality of catering helped to provide a high level of care.







Corporate Services.

Facilities, Health & Safety & Risk Management.



Throughout 2024-25 the Facilities Team have continued to effectively support the Hospice by ensuring a safe, comfortable and efficient environment for everyone through the maintenance works completed. Over 657 reactive jobs were resolved during 2024-25 in addition to the many verbal maintenance requests received.

The Facilities Department have made a number of improvements this year, supported by the development of new Vantage Modules, and a more robust Audit Calendar. The department have completed a full internal asset register, which will allow the team to plan ahead for the replacement of items, and ensure assets are not being used beyond their lifespan. The new Cyclical Maintenance Schedule links in with the Asset register to ensure suitable internal and external maintenance happens in a timely manner, reducing the need to replace assets unnecessarily and reducing the risk of faults and failures. A consistent approach to Fleet Management has also been rolled out, across all vehicles to guarantee they are in excellent condition and all drivers are provided with consistent and accurate information should they experience any difficulties during their working day.

The team have dedicated a significant amount of time to enhancing Fire Safety practices at the Hospice and supporting staff members in the wider team to fully understand their roles in Fire Safety. Having obtained a Conditional Survey report the team have now prioritised and mapped out the workload and required financial resources over a 10-year period, allowing the team to work more proactively, and less reactively.

Much of the year has been focused upon continued landscaping work, in partnership with Urban Green. The Hospice is currently awaiting planning permission for a modular build which will increase the footprint of our Wellbeing Centre and mean that additional sessions can be introduced, without impacting our existing offer. The landscaping has been thoroughly considered with input from the Clinical Team, to ensure it adds to the experience of those on the IPU, Wellbeing Centre users, and visitors, but also can be utilised for events. Particular time has been spent ensuring the gardens will be dementia friendly. This year we were delighted to have our gardens recognised by North West in Bloom, being awarded a 'Level 5 – Outstanding' by judges from the prestigious Royal Horticultural Society.

Income Development.

The Income Development Department is responsible for all income generation, covering Retail, the Hospice Lottery, Fundraising, and Marketing and Communications. The Department's core objective is to raise sustainable income in support of the Hospice's overarching strategy. Dr Kershaw's receives only one third of its funding from the Integrated Care System (ICS), with the remaining £3.8 million annual budget being raised through fundraising activities and donations.

During the 2024/25 financial year, the Hospice saw a drop in its Retail income. However, the Hospice maintained its income from legacies, which enabled the Department to exceed its fundraising target for the year. In addition, our loyal supporters continued to champion the Hospice, and through their donations we were able to achieve some key highlights throughout the year. Most notably, there has been a significant increase in income from Gift Aid, not only from our retail settings, but the Income Development Team as a whole, with a £42,734 increase on last year.

Hospice Retail.



2024-25 has been a challenging year for our Retail arm, with changes to staffing, and the staffing structure. With a new Head of Retail appointed in October 2024, there has been a clear focus on streamlining and standardising processes across all of our shops.

A seasonal calendar has also been introduced to provide consistency in the Hospice's brand expectations across all settings. Research is underway to establish the viability of introducing Hospice merchandise across Retail and the Hospice as a further source of income. During the year it became apparent that The Business Centre at The Furniture Hub was not going to be as profitable as anticipated, and in order to make the most of the space available to us, to bring in the most income, the decision was



made to utilise this space for retail sales and stock management.

Significant progress has been made into improving communications amongst the team, with the implementation of monthly budget meetings, and quarterly 1 to 1s. The successful improvement in Gift Aid should continue to grow with the recent introduction of electronic gift aid.

During the year Retail brought in £644,504 under budget. However, this was a gross increase of £71,656 on the previous financial year (inclusive of Gift Aid).

A huge thank you to all our customers and donors who continue to support our shops and help to raise vital income for the Hospice.



Income Development.

Hospice Lottery.



Our Weekly Lottery continues to be a crucial and sustainable source of income, helping to fund the specialist care we provide to patients and their families across our community.

In 24/25, £705,304 was raised through our Lottery – funds that go directly toward providing compassionate end-of-life care, supporting families, and helping patients make the most of every moment.

We now have over 13,600 active players, and we're incredibly grateful to everyone who takes part – whether playing every week, participating in our bi-annual raffles, purchasing gift vouchers and wedding favours, or encouraging others to sign up.

This year we've focused on:

- Growing our player base through in-person canvassing
- Improving the supporter experience with clearer communication and digital campaigns in accordance with our supporters consent & preferences
- Ensuring full compliance with Gambling Commission regulations and responsible fundraising practices

Our Lottery door-to-door and venue canvassers have continued to grow members. Due to the cost of living crisis and the reduction in winter fuel payments for many, we saw an increase in cancellations. This said our income was up £44,640 on the previous year.



Our bi-annual Raffle Draws took place in May and October raising £25,468 for patient care, and saw us introduce our first digital mailing, responding to donor preferences whilst helping to reduce costs.

Dr Kershaw's Hospice Lottery is committed to ensuring that the Lottery is operated in a secure, fair and socially responsible way and endorses responsible gambling amongst its members. Dr Kershaw's Hospice Lottery is a member of the Hospice Lotteries Association, which is committed to working together to encourage responsible gambling and provide access to support if needed.

Dr Kershaw's Hospice is licensed and regulated in Great Britain by the Gambling Commission under account number 5224.

89p* of every £1 goes directly towards providing patient care, 10p* towards Lottery prizes, and the remaining 1p* is spent on Lottery administration, training, staff costs, licenses and marketing. Average number of players in the Draw is 13,482*.

*These figures are based on income and expenditure for May 2024.

The continued support from every player who participates in our Weekly Lottery and bi-annual Raffle Draws is greatly appreciated. Thank you for making a difference!



Income Development.

Events.

The 2024/25 calendar was bursting with an array of events and there was something for everyone to get involved in, from golf, to dance and everything in between. The first event in the calendar saw the return of Rose to Remember, for the third year running our local community gathered together at the Hospice to remember their loved ones. With the opportunity to buy a pink rose in memory of a lost loved one, guests gathered to see their roses in the Hospice gardens, tuck into a cream tea, and enjoy the remembrance service. Sponsored for the third year running by the Co-op, over 750 roses were sold and the event and the campaign collectively raised £13,262.70 for patient care.

Our Summer Fayre followed on Sunday 21st July, sponsored by Booth's Garden Centre. The carnival themed event was a great success and, with the sun shining, we saw a fantastic turnout for a fun-filled afternoon. Children enjoyed the helter-skelter, face painting, and carnival games, while adults browsed stalls, raffles, and refreshment stands. Our mascot, Hartley welcomed guests, and many relaxed in the gardens with ice cream, hotdogs, or a refreshing 1989 gin cocktail! The event raised £9,126.37 for patient care.

Our biggest, sell-out event, Dr Kershaw's Strictly, took place on Friday 28th February, with eight couples competing for the glitterball trophy. Themed a 'Night in the Musicals', local businessman and Hospice supporter, Frank Rothwell displayed his very own Chitty Chitty Bang Bang car at the entrance – setting the scene for a truly amazing evening. Guests enjoyed a three-course meal, fabulous live entertainment from West End Star Melanie Marshall, and lots of dancing! The night was a roaring success and feedback highlighted it was the best Strictly to date. With sponsorship from our dancers, ticket sales, and on the night fundraising, the event raised a record-breaking gross income of £53,289.37, an increase of £24,424 on the previous year

The events programme for the year also included a Golf Day, Light Up a Life, the Christmas Carol Concert and the Christmas Fayre. Collectively the Hospice's events programme raised £108,737, which was 20% over target.

A heartfelt thank you to our incredible local community for volunteering, participating, attending, and supporting our events throughout the year. Your involvement has been key to their success. These events not only bring us all together but also raise essential funds for the clinical services that care for patients across the Oldham area.





Income Development.

Corporate Fundraising.

The 1989 Club, Corporate Partnership Scheme, has grown throughout the year with new and existing partners including; Ribble Packaging, Pilgrim International, Olympic Construction, Oldham Community Radio, OMC Group, ROC Fire & Security and Northern Pest Management.

We have also seen growth in our 'Charity of the Year' partnerships, sponsorship opportunities, volunteering, and donations from new supporters, and continued support from our longstanding corporate partners.

December 2024 saw our first Corporate Indoor Mini Golf Event bringing together new and old corporate supporters for a day of fun, exploring a new way to network whilst supporting the Hospice. As their chosen Charity of the Year, Diodes Semi-Conductors held their very own Light Up A Life Service within their own grounds with our mascot, Hartley switching on the tree lights.

Many of our corporate supporters give in many different ways, including their services in kind, to the Hospice. Thanks to Raw Green Energy Group for servicing our solar panels, helping to keep them efficient and our costs down.

Thanks also to Booth's Garden Centre for donating plants to keep our gardens as beautiful as they are, Bid Food Logistics for keeping us well hydrated during our events and Holroyd's Skip Hire for their continued support with our Waste Management. We are incredibly grateful for Gifts in Kind we receive from Corporate and Community Partners. During 24/25 Gifts in Kind alone equated to £49,378, which is a remarkable saving for the Hospice.

We love working with the local business community and want to express our thanks to all our corporate supporters.





Legacies (Gifts in Wills).

This year, Legacy income exceeded an incredible £1.3 million including a substantial legacy of £420,847.07 — a testament to the enduring generosity of those who have chosen to remember the Hospice in their Will. We are deeply grateful for these gifts, which play a vital role in sustaining and developing the compassionate care we provide to patients and families.

As part of our commitment to growing this essential source of income, the Hospice joined the national

Hospice UK Legacy Campaign. We are proud that a member of our team sits on the campaign's national steering group, helping shape the future of legacy giving across the sector.

Alongside this, we have begun developing a dedicated Legacy strategy to ensure we continue building strong relationships with our supporters and honouring their wishes. Every legacy left to us makes a lasting difference — and we are truly thankful for this powerful expression of care and trust.

Trust, Grants & Foundations.

Through applications submitted the Hospice was able to secure grant funding of £50,261 towards core costs, capital items and the Wellbeing Centre.

We also received £93,262 through the Hospice UK Grant scheme which ensured we could progress with our substantial landscaping project.

Dr Kershaw's is extremely grateful to the Trusts and Foundations that supported us throughout the year:

- The Albert Hunt Trust
- The Crane Fund for Widows and Children
- The February Foundation
- Hospital Saturday Fund
- The Treeside Trust
- Action Together

Income Development.

Community Fundraising.

Dr Kershaw's Hospice is always overwhelmed by the unfaltering support we receive from our local community. We thank each and every one of our supporters for their dedication and loyalty throughout the year.

During the past 12 months, members of the public have hosted their own events or fundraising activities to raise vital funds for the Hospice. Activities have included climbing the Yorkshire Three Peaks, hosting musical concerts, a zumbathon, taking on sponsored walks, swims and runs, obstacle courses, and more. Thank you to everyone who took on an activity, be it large or small, to support our Hospice and helped to raise awareness and essential funds for patients who need our care now and in the future.

In addition to all our supporters' events, our Hospice Community Team also hosted a range of challenges and events that people could sign up to, including the Bunny Hop, Morecambe Bay Walk, and Festive Fundraisers; Jolly Jumper Day, the Reindeer Run and Cards for Care.

The Reindeer Run was ran as a mass participation event this year in Alexandra Park with 1,000 children from local schools taking part. The first ever Morecambe Bay Walk had over 100 walkers joining the King's Guide. For the second year our Fundraising Team took part in the Royton Pubs and Bars 6-a-side Cricket and Family Fun Day organised by Royton Cricket Club and they can't wait to take part again in 2025.

The team introduced a new initiative; Junior Dragons' Den, each and every child from the schools impressed everybody with their commitment, imagination and entrepreneurship, accumulating in a grand finale which left a lasting impression on all our dragons. Participating schools included: Medlock Valley Community Primary School, Alexandra Park Primary School, Fir Bank Primary School, Thorpe Primary School, Burnley Brow Community School, Blackshaw Lane Primary School, Crompton Primary School, Medlock Valley Primary School and Thornham St James Primary School.

Since his launch Hartley has become a very popular addition to our events and is in demand to attend our third-party community events.

We ran a Christmas Tree Collection campaign for the second year. It was well received and we were delighted by how many people got behind the initiative. We

would like to thank Life for a Life Memorial Forests, WillMow Reclamation & Salvage Ltd, Howard's Domestic, and Poplar Tree Company for all of their support. This year, 184 trees were recycled by Poplar Tree Company and the campaign raised just over £2,400 for patient care, inclusive of Gift Aid.

Dr Kershaw's Hospice Friends continued to give generously with over £20,000 donated within the year to support clinical services.

Over £325,413 was raised by the community throughout the year, and our sincere thanks go to everyone who supported us including, but not limited to; Booths Garden Centre, Brooklands Private Day Nursery, Co-op Royton, Halfway House Royton, Mossley Cancer Committee, Newbank Garden Centre, OCL, Oldham Athletic Football Club, Oldham & District Ladies Bowling League, Rotary Club of Oldham, Saddleworth Old School Tractor Group, The Oddfellows, Thorp Primary School, Whitegate End Primary School and Shaw Freemasons.

We have been incredibly fortunate to have the support of a number of Major Donors this financial year, with Shobna Gulati donating £16,000, The Roger Tanner Trust making a donation of £10,000 and numerous other individuals generously donating to the Hospice.







Income Development.

Marketing & Communications.

This year, our Marketing and Communications Team have continued to deliver dynamic, digitally driven campaigns to raise awareness of our Hospice's care, share powerful patient stories, and dispel common myths about hospice services.

Much of the year has focused on preparing our new website which will offer a more accessible, mobile-friendly experience for supporters and patients — with key features including simpler online donations and event bookings, clearer patient resources, and multi-language access in Bengali and Urdu.

As part of our wider digital strategy, the team has also started to send email campaigns to supporters. Work has begun developing a 360 video tour of the Hospice to help families visualise our care environment.

Engagement continues to grow across Facebook, Instagram, LinkedIn and YouTube, whilst activity on X (formerly Twitter) has declined, we will continue to monitor its value moving forward. We were proud to host the North West Hospices Marketing and Communications meeting in September, receiving excellent feedback on our branding and communications from regional colleagues. Internally, we've also strengthened our marketing efforts, shifting to a more digital approach for our staff newsletters to improve engagement and accessibility.

Our weekly Oldham Times column and regular coverage across local print, radio and online media remain key tools for sharing updates. We're especially grateful to our local media outlets for including our Hospice in their coverage, in particular The Oldham Times and Oldham Community Radio 99.7FM for their ongoing support.



Strategic Report & Financial Review.

Financial Review.

The Statutory Accounts for the year ended 31st March 2025, have been prepared in accordance with the Statement of Recommended Practice Accounting and Reporting by Charities (SORP 2019), and comply with all statutory requirements. Following the appointment of the Hospice's Accountants and External Auditors, Chadwick & Company Chartered Accountants, both the format and content of the Statutory Accounts embrace the advice and recommendations of our Auditors.

The overall net increase in funds was £734,316 (2024: £1,306,260).

The Hospice's principal sources of income are donations, legacies, NHS income, our retail outlets, fundraising, Lottery and trading surpluses. A total Income of £5,977,268 was achieved in the current financial year – an increase on the previous financial year of 2.3%

The Hospice recognises, and would like to give special thanks to Greater Manchester Integrated Care who continue to support the Hospice, and contributed £2,446,327 to Dr Kershaw's. These funds are secured through our block contract to support both our Inpatient Unit and Hospice at Home services. Greater Manchester Integrated Care additionally continue to support further care in the community provided by our Caring Hands Domiciliary Service. This year this also included a contribution of £443,000 towards the costs of providing the Step-down Service to support

patient flow in local hospitals.

Legacies received for the year-ended 31st March 2025 totalled £1,338,490, including a substantial legacy of £420,847.07. This is an increase of £141,605 (2024: £1,196,885)

Dr Kershaw's Lottery continued to performed well and contributions to patient care were £360,000 of regularly monthly transfers.

Elsewhere, income generally held up well, with retail income totalling £644,504, an increase of £71,656 from the previous year. (2024: £572,848)

The Hospice continued to see increases in the cost of goods and services, with a spend of £4,376,447 a rise of 8.5% to the previous financial year. This reflects both increased staffing costs and a significant increase in overhead costs alike.

As of 31st March 2025, the funds balance of the Hospice sits at £12,584,351. A detailed analysis of funds held can be found in notes 24 in the Hospices Statutory Accounts.

The Hospice would like to express its sincere thanks and appreciation to everyone who contributes to our running. Whether this be in time, gifts or monetary donations. The work we do would not be possible without our loyal supporters.



Investments.

For the year ended 31 March 2025 this was a net gain of £103,910 (2024: gain of £336,294; 2023: loss of £31,500).

During the year a total of £1,250,000 was invested into the Hospice's investment portfolio, which is maintained to support long-term growth. The portfolio continues to be professionally managed and closely monitored by RBC Brewin Dolphin, with the Finance and Resourcing Steering Group providing ongoing oversight to ensure strong governance and prudent risk management.

Investment markets in 2025 were mixed. Inflation moderated but remained above central-bank targets, prompting interest rates to stay higher for longer and creating short-term volatility in equities and bonds. Geopolitical tensions also contributed to market swings. Nevertheless, structural growth

sectors such as technology and healthcare—fuelled by advances in artificial intelligence and innovation—remained resilient.

The combination of a carefully managed higher-risk strategy and significant new capital, positions the Hospice for stronger long-term returns while maintaining appropriate risk management. Although immediate gains were modest, the portfolio is now aligned to capture growth opportunities as global conditions stabilise and interest rates ease. Looking ahead, the Board anticipates that over the next three to five years this strategy will provide enhanced income and capital growth to further advance the work of the Hospice. Changes in the market valuation of the Investment Portfolio are recorded within Other Recognised Gains and Losses.



Reserves.

A Statement of Unrestricted Funds is shown in Note 23 of the Statutory Accounts. During the year, the Trustees reviewed the reserves policy and set out the criteria required to hold designated reserves going forward.

Firstly, an Absolute Minimum level of Free Reserves will be held, equal to the funds required to ensure the orderly closure of the Hospice. This includes the fulfilment of all financial obligations, predominantly but not limited to staff notice/redundancy and lease commitments.

Secondly, the Hospice designates an element of its reserves to ensure the resilience and continuity of its core operations. To include both provision for a period of loss making, arising from, for example, a shortfall in income and secondly, to fund essential expenditure required over a 3-year period (e.g. repairs, equipment replacement and building works).

Thirdly, remaining free reserves are available for designation into both the Maintenance Fund and the Development Fund. This will provide the financial resources to further develop services and maintain facilities in line with the Hospice's strategic objectives.

Reserves in excess of that designated, are available to spend on any of the charity's purposes and further enable the Hospice to meet its financial commitments and obligations. This excludes all fixed assets, restricted and designated funds.

Note 24 of the Statutory Accounts provides further detail around the Designated Funds of the Hospice.



Financial and Reputational Risk.

Dr Kershaw's Hospice recognises the risks associated with the nature of its operating activities. There have always been uncertainties, the only predictable income the Hospice receives is from our Commissioning Partners. Non-commissioned and voluntary income is more difficult to budget for. The continuing impact of COVID-19, the cost of living crisis and high inflationary environment means that the Hospice now operates in a different, more volatile and possibly riskier environment. The Hospice continues to identify new opportunities to improve the financial sustainability of the organisation.

The Hospice is pro-active in mitigating these risks via its Risk Management process. The Senior Management Team meet regularly to discuss current and potential risks, and put controls in place to mitigate these. Our main external risk, is that of Cyber Crime / Attack. Dr Kershaw's Hospice continues to work very closely with its partnering Hospices, and has for a number of years held a Service Level Agreement with St Ann's Hospice to secure the invaluable skills of their Data Protection Officer. While we have chosen to move to an external Data Protection Officer we continue to be active members in the GM Hospice Provider Collaborative.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

The Trustees are responsible for preparing the Trustees Report and the Financial Statements in accordance with applicable law and 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 charitable company and of the incoming resources and application of resources, including the income and expenditure, of the charitable company for that period. In preparing those financial statements the Trustees are required to:

- Select suitable accounting policies and then apply them consistently
- Observe the methods and principles in the Charity Statements of Recommended Practice (SORP);
- Make judgements and estimates that are reasonable and prudent
- State whether applicable accounting standards have been following, subject to any material departures disclosed and explained in the financial statements

- Prepare the financial statements on the going concern basis unless it is inappropriate to presume that the charity company will continue in business.

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

So far as the Trustees are aware, there is no relevant information (as defined by section 418 of the Companies Act 2006) of which the charitable companies' auditors are unaware, and each Trustee has taken all steps necessary in order to make them aware of any audit information and to establish that the charitable company's auditors are aware of that information.



Dr Kershaw's Trustees 2024/25.

Statement of Board of Trustees' Responsibilities for the Financial Statements.

Public Benefit Statement.

In setting our objectives and planning our services, the Trustees of Dr Kershaw's Hospice have considered the Charity Commission's general guidance on public benefit. Dr Kershaw's Hospice provides hospice services free of charge to those individuals aged over

18 years with life-limiting illness living in the Oldham Borough. The charity also provides supportive care for their families and carers and our care services are available, without restriction, to all groups in the communities we serve.

Charitable Purpose & Social Investment Policies.

To promote the relief of illness and suffering in such ways as the Trustees think fit:

(1) by establishing, maintaining and conducting residential nursing and convalescent homes for the reception and care of persons of either sex who are suffering at any age from any chronic or terminal illness or from any disability or disease attributable to old age or from any other physical or mental infirmity, disability or disease and so that any such home may be restricted as aforesaid to patients suffering from any particular type or types of illness, disability or infirmity and by providing medical or other treatment or attention for any such persons as aforesaid in their own home;

(2) by conducting and promoting or encouraging research in to the care and treatment of persons suffering from any such illness, disability, disease or infirmity and particularly in to the care and treatment of persons suffering from cancer or terminal illnesses and by providing for the dissemination of the results of such research;

(3) by promoting or encouraging or assisting in the teaching or training of doctors, nurses, physiotherapists and other persons engaged in any branch of medicine surgery, nursing or allied services and in the teaching or training of students in any branch of medicine, surgery or nursing or allied services.



Auditors.

In accordance with the company's articles, a resolution proposing that Chadwick & Company (Manchester) Limited, be reappointed as auditors of Dr Kershaw's Hospice, will be put to the Board of Trustees at the Annual General Meeting.

Approval.

The Trustees report including Accounts and Strategic Review was approved by the Trustees on 18 September 2025, and signed on 31st October 2025 on their behalf by:



NAME: Rachel Damianou
POSITION: COMPANY SECRETARY



NAME: Dr Paul Cook
POSITION: CHAIR / TRUSTEE



“My husband arrived unsettled and unhappy, but within 24 hours he was a different person, he was calm, clean and looked after. He was clean shaven with clean clothes and tucked up in bed with pristine bedding. This helped me rest while at home as I knew he was in good care. I genuinely believe that with the care he received we had an extra 4 weeks of his life.”

“Dr Kershaw’s Hospice would like to express its sincere thanks and gratitude to everyone who fundraised, supported, or donated to the Hospice during the past year. Your generosity enables the Hospice to remain open and provide free, quality, specialist care to our local community. On behalf of all our staff, patients and their families we thank you.”

Adele Doherty, CEO



DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT

TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Opinion

We have audited the financial statements of Dr Kershaw's Hospice (the 'charity') for the year ended 31 March 2025 which comprise the statement of financial activities, the balance sheet, the statement of cash flows and notes to the financial statements, including significant accounting policies. The financial reporting framework that has been applied in their preparation is applicable law and United Kingdom Accounting Standards, including Financial Reporting Standard 102 *The Financial Reporting Standard applicable in the UK and Republic of Ireland* (United Kingdom Generally Accepted Accounting Practice).

In our opinion, the financial statements:

- give a true and fair view of the state of the charitable company's affairs as at 31 March 2025 and of its incoming resources and application of resources, including its income and expenditure, for the year then ended;
- have been properly prepared in accordance with United Kingdom Generally Accepted Accounting Practice; and
- have been prepared in accordance with the requirements of the Companies Act 2006.

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (UK) (ISAs (UK)) and applicable law. Our responsibilities under those standards are further described in the *Auditor's responsibilities for the audit of the financial statements* section of our report. We are independent of the charity 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 charity'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.

Other information

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2006

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

- the information given in the trustees' report, which includes the strategic and directors' report and the strategic 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' report have been prepared in accordance with applicable legal requirements.

DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT (CONTINUED) TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

Matters on which we are required to report by exception

In the light of the knowledge and understanding of the charity and its environment obtained in the course of the audit, we have not identified material misstatements in the strategic report or the directors' report included within the trustees' 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, or returns adequate for our audit have not been received from branches not visited by us; or
- the financial statements are not in agreement with the accounting records and returns; or
- certain disclosures of trustees' remuneration specified by law are not made; or
- we have not received all the information and explanations we require for our audit.

Responsibilities of trustees

As explained more fully in the statement of trustees' responsibilities, the trustees, who are also the directors of the charity for the purpose of company law, are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as the trustees determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error. In preparing the financial statements, the trustees are responsible for assessing the charity'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 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.

A further description of our responsibilities is available on the Financial Reporting Council's website at: <https://www.frc.org.uk/auditorsresponsibilities>. This description forms part of our auditor's report.

Extent to which the audit was considered capable of detecting irregularities, including fraud

The extent to which our procedures are capable of detecting irregularities, including fraud, is detailed below.

- At the planning stage of the audit we gain an understanding of the laws and regulations which apply to the Group and how management seek to comply with them. This helps us to make appropriate risk assessments.
- The principal risks of non-compliance with laws and regulations which we identified as being significant to the company related to UK Financial Reporting Standards, Company Law, Charity Law, UK Tax Legislation and Health & Safety regulations.
- During the audit we focus on relevant risk areas and review compliance with laws and regulations through making relevant enquiries and corroboration by, for example, reviewing Trustees Minutes and other documentation.
- We assess the risk of material misstatement in the financial statements including as a result of fraud and undertake procedures including:
 - I. Review of controls set in place by management
 - II. Enquiry of management as to whether they consider fraud or other irregularities may have occurred or where such opportunity might exist
 - III. Challenge of management assumptions with regard to accounting estimates
 - IV. Identification and testing of journal entries, particularly those which may appear to be unusual by size or nature.

DR KERSHAW'S HOSPICE

INDEPENDENT AUDITOR'S REPORT (CONTINUED) TO THE TRUSTEES OF DR KERSHAW'S HOSPICE

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 regulations. 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 of not detecting a material misstatement resulting from fraud is higher than for one resulting from error as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.

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.



**Michael Royle BA(Hons)FCA (Senior Statutory Auditor)
for and on behalf of Chadwick & Company (Manchester) Limited**

**Chartered Accountants
Statutory Auditors
Capital House
272 Manchester Road
Droylsden
Manchester
M43 6PW**

31 October 2025

DR KERSHAW'S HOSPICE

STATEMENT OF FINANCIAL ACTIVITIES INCLUDING INCOME AND EXPENDITURE ACCOUNT

FOR THE YEAR ENDED 31 MARCH 2025

		Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
	Notes						
Income and endowments from:							
Donations and legacies	3	2,091,193	131,062	2,222,255	1,783,401	34,672	1,818,073
Charitable activities	4	2,446,327	-	2,446,327	2,575,418	-	2,575,418
Other trading activities	5	1,113,241	-	1,113,241	1,320,577	-	1,320,577
Investments	6	156,019	8,489	164,508	74,994	8,722	83,716
Other income	7	30,937	-	30,937	42,300	-	42,300
Total income		5,837,717	139,551	5,977,268	5,796,690	43,394	5,840,084
Expenditure on:							
Raising funds	8	970,415	-	970,415	838,294	-	838,294
Charitable activities	9	4,152,516	223,931	4,376,447	3,841,566	190,257	4,031,823
Total expenditure		5,122,931	223,931	5,346,862	4,679,860	190,257	4,870,117
Net gains/(losses) on investments	15	92,937	10,973	103,910	298,303	37,990	336,293
Net income/(expenditure) and movement in funds		807,723	(73,407)	734,316	1,415,133	(108,873)	1,306,260
Reconciliation of funds:							
Fund balances at 1 April 2024		7,372,026	4,478,009	11,850,035	5,956,893	4,586,882	10,543,775
Fund balances at 31 March 2025		8,179,749	4,404,602	12,584,351	7,372,026	4,478,009	11,850,035

The statement of financial activities includes all gains and losses recognised in the year. All income and expenditure derive from continuing activities.

The statement of financial activities also complies with the requirements for an income and expenditure account under the Companies Act 2006.

DR KERSHAW'S HOSPICE

BALANCE SHEET

AS AT 31 MARCH 2025

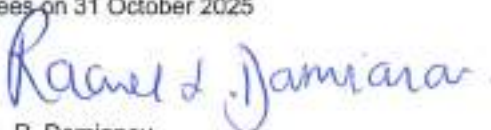
	Notes	2025 £	£	2024 £	£
Fixed assets					
Tangible assets	17		4,153,357		4,065,777
Investments	18		5,331,119		3,951,879
			<u>9,484,476</u>		<u>8,017,656</u>
Current assets					
Debtors	19	831,394		1,412,796	
Cash at bank and in hand		2,573,974		2,623,595	
		<u>3,405,368</u>		<u>4,036,391</u>	
Creditors: amounts falling due within one year	20	(305,493)		(204,012)	
Net current assets			<u>3,099,875</u>		<u>3,832,379</u>
Total assets less current liabilities			<u>12,584,351</u>		<u>11,850,035</u>
The funds of the charity					
Restricted income funds	22	4,404,602		4,478,009	
Unrestricted funds	23	8,179,749		7,372,026	
		<u>12,584,351</u>		<u>11,850,035</u>	

The financial statements were approved by the trustees on 31 October 2025

Dr P. Cook
Trustee



R. Damianou
Trustee



Company registration number 05221414 (England and Wales)

DR KERSHAW'S HOSPICE

STATEMENT OF CASH FLOWS

FOR THE YEAR ENDED 31 MARCH 2025

	Notes	2025 £	£	2024 £	£
Cash flows from operating activities					
Cash generated from operations	28		1,383,929		211,846
Investing activities					
Purchase of tangible fixed assets		(322,728)		(155,021)	
Purchase of investments		(1,275,330)		(503,680)	
Investment income received		164,508		83,716	
Net cash used in investing activities			(1,433,550)		(574,985)
Net decrease in cash and cash equivalents			(49,621)		(363,139)
Cash and cash equivalents at beginning of year			2,623,595		2,986,734
Cash and cash equivalents at end of year			2,573,974		2,623,595

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS

FOR THE YEAR ENDED 31 MARCH 2025

1 Accounting policies

Charity information

Dr Kershaw's Hospice is a private company limited by guarantee incorporated in England and Wales. The registered office is Turf Lane, Royton, Oldham, Lancashire, OL2 6EU. In the event of the charity being wound up, the liability in respect of the guarantee is limited £10 per member of the charity.

1.1 Accounting convention

The financial statements have been prepared in accordance with the charity's governing document, the Companies Act 2006 and "Accounting and Reporting by Charities: Statement of Recommended Practice applicable to charities preparing their accounts in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102) (effective 1 January 2019)". The charity is a Public Benefit Entity as defined by FRS 102.

The financial statements are prepared in sterling, which is the functional currency of the charity. Monetary amounts in these financial statements are rounded to the nearest £.

The financial statements have been prepared under the historical cost convention, modified to include the revaluation of freehold properties and to include certain financial instruments at fair value. The principal accounting policies adopted are set out below.

1.2 Going concern

At the time of approving the financial statements, the trustees have a reasonable expectation that the charity has adequate resources to continue in operational existence for the foreseeable future. Thus the trustees continue to adopt the going concern basis of accounting in preparing the financial statements.

1.3 Charitable funds

Unrestricted funds are available to spend on activities that further any of the purposes of the charity.

Designated funds are unrestricted funds of the charity which the Trustees have decided at their discretion to set aside to use for a specific purpose. The aim and purpose of each designated fund is set out in the notes to the financial statements.

Restricted funds are donations and grants which have been specified by the donor to be solely used for particular areas of the Hospice's work.

1.4 Income

Income is recognised when the charity is legally entitled to it after any performance conditions have been met, the amounts can be measured reliably, and it is probable that income will be received.

Cash donations are recognised on receipt. Other donations are recognised once the charity has been notified of the donation, unless performance conditions require deferral of the amount. Income tax recoverable in relation to donations received under Gift Aid or deeds of covenant is recognised at the time of the donation.

Legacies are recognised on receipt or otherwise if the charity has been notified of an impending distribution, the amount is known, and receipt is expected. If the amount is not known, the legacy is treated as a contingent asset.

Grants of a capital nature are treated as deferred credits and credited through the Statement of Financial Activities over the estimated use of the relevant fixed assets.

Income received in advance for a future fundraising event or for other income received relating to the following year are deferred until the criteria for income recognition are met.

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

1 Accounting policies

(Continued)

1.5 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. Direct expenditure on charitable activities is classified under the following headings:

- In-patient care
- Medical services
- Day-care
- Hospice at home
- Caring Hands

The charity is registered for VAT and is able to recover input VAT on the majority of its activities. The charity operates VAT under partial exemption. Irrecoverable VAT is charged as a cost against the activity for which the expenditure was incurred.

Costs of raising funds includes expenditure incurred in generating donations; arranging, organising and participation in funding events; costs of operating the charity shops.

Support costs are those functions that assist the work the charity but do not directly undertake charitable activities. Support costs include staff and overhead costs for finance, governance and general overheads.

1.6 Tangible fixed assets

Tangible fixed assets are initially measured at cost and subsequently measured at cost or valuation, net of depreciation and any impairment losses.

Depreciation is recognised so as to write off the cost or valuation of assets less their residual values over their useful lives on the following bases:

Leasehold improvements	Over length of the lease
Fixtures and fittings	20% straight line
Motor vehicles	25% reducing balance
Long term leasehold property	Revaluation basis

Leasehold improvements comprise all improvements made to the main hospice site at Turf Lane, Royton, including the new in-patient unit and Barras legacy gardens.

The gain or loss arising on the disposal of an asset is determined as the difference between the sale proceeds and the carrying value of the asset, and is recognised in net income/(expenditure) for the year.

The long term leasehold property value is confirmed by the board of trustees each year. Professional revaluations are performed with sufficient regularity such that the carrying amount does not differ materially from that which could be determined using fair values at the reporting end date.

1.7 Fixed asset investments

Fixed asset investments are initially measured at transaction price excluding transaction costs, and are subsequently measured at fair value at each reporting date. Changes in fair value are recognised in net income/(expenditure) for the year. Transaction costs are expensed as incurred.

Shares in the trading subsidiary are carried at cost.

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

1 Accounting policies

(Continued)

1.8 Impairment of fixed assets

At each reporting end date, the charity reviews the carrying amounts of its tangible assets to determine whether there is any indication that those assets have suffered an impairment loss. If any such indication exists, the recoverable amount of the asset is estimated in order to determine the extent of the impairment loss (if any).

1.9 Stocks

Goods donated to the Hospice shops are principally given as gift aid donations. When the goods are sold the value realised is communicated to the donor to confirm it is their wish that the receipt be retained by the Hospice as a gift aided donation. Accordingly, stock held has no value because the charity only has control over the value and income when the donation is confirmed by the donor.

1.10 Cash and cash equivalents

Cash and cash equivalents include cash in hand, deposits held at call with banks, other short-term liquid investments with original maturities of three months or less, and bank overdrafts. Bank overdrafts are shown within borrowings in current liabilities.

1.11 Financial instruments

The Hospice 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.

1.12 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.

1.13 Employee benefits

The cost of any unused holiday entitlement is recognised in the period in which the employee's services are received.

Termination benefits are recognised immediately as an expense when the charity is demonstrably committed to terminate the employment of an employee or to provide termination benefits.

1.14 Retirement benefits

Payments to defined contribution retirement benefit schemes are charged as an expense as they fall due.

1.15 Leases

Rentals payable under operating leases, including any lease incentives received, are charged as an expense on a straight line basis over the term of the relevant lease.

2 Critical accounting estimates and judgements

In the application of the charity's accounting policies, the trustees are required to make judgements, estimates and assumptions about the carrying amount of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the period in which the estimate is revised where the revision affects only that period, or in the period of the revision and future periods where the revision affects both current and future periods.

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

3 Donations and legacies

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Donations and gifts	712,442	27,800	740,242	567,349	19,672	587,021
Legacies receivable	1,338,490	-	1,338,490	1,196,885	-	1,196,885
Grants receivable	40,261	103,262	143,523	19,167	15,000	34,167
	<u>2,091,193</u>	<u>131,062</u>	<u>2,222,255</u>	<u>1,783,401</u>	<u>34,672</u>	<u>1,818,073</u>
Donations and gifts						
General donations	376,985	12,127	389,112	305,991	12,894	318,885
In memoriam	213,503	-	213,503	191,966	-	191,966
Friends of the Hospice	20,094	-	20,094	18,454	-	18,454
Income tax recoverable	101,860	-	101,860	50,938	-	50,938
Keira's Wishes	-	3,741	3,741	-	4,418	4,418
Rebecca Taylor	-	11,932	11,932	-	2,360	2,360
	<u>712,442</u>	<u>27,800</u>	<u>740,242</u>	<u>567,349</u>	<u>19,672</u>	<u>587,021</u>
Legacies receivable						
Other	1,338,490	-	1,338,490	1,196,885	-	1,196,885
	<u>1,338,490</u>	<u>-</u>	<u>1,338,490</u>	<u>1,196,885</u>	<u>-</u>	<u>1,196,885</u>
Grants receivable						
Other grants	40,261	10,000	50,261	19,167	15,000	34,167
Hospice UK	-	93,262	93,262	-	-	-
	<u>40,261</u>	<u>103,262</u>	<u>143,523</u>	<u>19,167</u>	<u>15,000</u>	<u>34,167</u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)
FOR THE YEAR ENDED 31 MARCH 2025

4 Charitable activities

	In-patient Care 2025 £	Hospice at Home 2025 £	Caring Hands 2025 £	Total 2025 £	In-patient Care 2024 £	Hospice at Home 2024 £	Caring Hands 2024 £	Total 2024 £
Government funding	1,770,962	382,351	293,014	2,446,327	1,968,290	359,019	248,109	2,575,418

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

5 Income from other trading activities

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Fundraising events	108,737	63,729
Shop income	644,504	572,848
Sponsorships and social lotteries	360,000	684,000
Other trading activities	1,113,241	1,320,577

6 Investments

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Dividends	71,800	7,695	79,495	59,315	7,925	67,240
Investments interest	82,243	793	83,036	15,589	796	16,385
Bank interest	1,976	1	1,977	90	1	91
	156,019	8,489	164,508	74,994	8,722	83,716

7 Other income

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Room hire	24,625	23,468
Training	6,312	18,832
	30,937	42,300

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

8 Expenditure on raising funds

	Unrestricted funds 2025 £	Unrestricted funds 2024 £
Fundraising and publicity		
Staging fundraising events	64,631	55,539
Other fundraising costs	6,311	15,347
Staff costs	344,886	279,887
	<u>415,828</u>	<u>350,773</u>
Trading costs		
Operating charity shops	163,509	176,315
Other trading activities	21,349	48,161
Staff costs	369,729	263,045
	<u>554,587</u>	<u>487,521</u>
Total costs	<u>970,415</u>	<u>838,294</u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

9 Charitable activities

	In-patient Care 2025 £	Medical Services 2025 £	Daycare / Wellbeing 2025 £	Hospice at Home 2025 £	Caring Hands 2025 £	Total 2025 £	Total 2024 £
Staff costs	1,502,838	534,253	218,451	450,322	516,675	3,222,539	3,053,342
Other direct costs	40,920	4,060	26,586	8,278	16,323	96,167	81,223
Medical costs	70,405	-	-	-	-	70,405	54,014
	<u>1,614,163</u>	<u>538,313</u>	<u>245,037</u>	<u>458,600</u>	<u>532,998</u>	<u>3,389,111</u>	<u>3,188,579</u>
Share of support costs (see note 10)	453,528	161,228	65,924	135,899	155,923	972,502	829,593
Share of governance costs (see note 10)	6,918	2,459	1,006	2,073	2,378	14,834	13,651
	<u>2,074,609</u>	<u>702,000</u>	<u>311,967</u>	<u>596,572</u>	<u>691,299</u>	<u>4,376,447</u>	<u>4,031,823</u>
Analysis by fund							
Unrestricted funds	1,979,023	668,484	277,802	568,321	658,886	4,152,516	3,841,566
Restricted funds	95,586	33,516	34,165	28,251	32,413	223,931	190,257
	<u>2,074,609</u>	<u>702,000</u>	<u>311,967</u>	<u>596,572</u>	<u>691,299</u>	<u>4,376,447</u>	<u>4,031,823</u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

9 Charitable activities

(Continued)

For the year ended 31 March 2024

	In-patient Care £	Medical Services £	Daycare / Wellbeing £	Hospice at Home £	Caring Hands £	Total 2024 £
Staff costs	1,588,800	476,526	230,306	269,884	487,826	3,053,342
Other direct costs	34,176	18	25,221	6,983	14,825	81,223
Medical costs	54,014	-	-	-	-	54,014
	<u>1,676,990</u>	<u>476,544</u>	<u>255,527</u>	<u>276,867</u>	<u>502,651</u>	<u>3,188,579</u>
Share of support costs (see note 10)	431,676	129,472	62,574	73,328	132,543	829,593
Share of governance costs (see note 10)	7,103	2,130	1,030	1,207	2,181	13,651
	<u>2,115,769</u>	<u>608,146</u>	<u>319,131</u>	<u>351,402</u>	<u>637,375</u>	<u>4,031,823</u>
Analysis by fund						
Unrestricted funds	2,026,021	581,647	287,257	336,394	610,247	3,841,566
Restricted funds	89,748	26,499	31,874	15,008	27,128	190,257
	<u>2,115,769</u>	<u>608,146</u>	<u>319,131</u>	<u>351,402</u>	<u>637,375</u>	<u>4,031,823</u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

10 Support costs allocated to activities

	2025 £	2024 £
Staff costs	207,582	201,554
Depreciation	235,149	218,828
Support direct costs	94,123	103,395
Support equipment & premises costs	435,649	305,817
Governance costs	14,833	13,650
	<u>987,336</u>	<u>843,244</u>
Analysed between:		
In-patient Care	460,446	438,779
Medical Services	163,687	131,602
Daycare / Wellbeing	66,930	63,604
Hospice at Home	137,972	74,535
Caring Hands	158,301	134,724
	<u>987,336</u>	<u>843,244</u>
	2025	2024
	£	£
Governance costs comprise:		
Audit fees	13,000	12,000
Legal and professional	1,833	1,650
	<u>14,833</u>	<u>13,650</u>

Support and governance costs are allocated between the various charitable activities, based on the number of staff operating within that function of the charity.

11 Net movement in funds

	2025 £	2024 £
Net movement in funds is stated after charging/(crediting)		
Depreciation of owned tangible fixed assets	235,149	218,828
Operating lease charges	89,932	90,328
	<u></u>	<u></u>

12 Auditor's remuneration

The analysis of auditor's remuneration is as follows:

Fees payable to the charity's auditor and associates:

	2025 £	2024 £
Audit of the charity's annual accounts	13,000	12,000
	<u></u>	<u></u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

13 Trustees

None of the trustees (or any persons connected with them) received any remuneration or benefits in their role as trustees, or reimbursement of expenses from the charity during the year.

14 Employees

The average monthly number of employees during the year was:

	2025 Number	2024 Number
Direct charitable services	73	61
Fundraising services	23	21
Support services	34	30
Total	130	112

Employment costs

	2025 £	2024 £
Wages and salaries	4,144,736	3,797,828

Volunteers continued to support us and contributed 39,947 hours of their time, equating to a staff cost saving of £540,000 (2024 - 34,759 hours, saving of £360,000).

The full time equivalent average monthly head count was 99 (2024: 81).

The number of employees whose annual remuneration was more than £60,000 is as follows:

	2025 Number	2024 Number
£60,001 - £70,000	1	-
£70,001 - £80,000	1	2
£80,001 - £90,000	1	-
£150,001 - £160,000	-	1
£160,001 - £170,000	1	-

Remuneration of key management personnel

The remuneration of key management personnel, including employers NI and pension contributions is as follows.

	2025 £	2024 £
Aggregate compensation	469,380	446,690

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

14 Employees

(Continued)

The Hospice considers that the key management personnel comprise the Trustees and the Senior Management Team - who currently are the Chief Executive Officer, Medical Director, Director of Clinical Services, Director of Quality and Governance, Director of Finance, Director of Income Development and Marketing.

15 Gains and losses on investments

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Gains/(losses) arising on:						
Revaluation of investments	92,937	10,973	103,910	298,303	37,990	336,293

16 Taxation

The charity is exempt from Corporation Tax in line with paragraph 1 of Schedule 6 of the Finance Act 2010.

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

17 Tangible fixed assets

	Leasehold improvements	Leasehold improvements post 2002	Fixtures and fittings	Motor vehicles	Long term leasehold property	Leasehold improvement projects	Barras legacy garden	Total
	£	£	£	£	£	£	£	£
Cost or valuation								
At 1 April 2024	540,693	2,644,406	469,304	44,380	124,000	2,973,081	236,816	7,032,680
Additions	-	-	49,934	-	-	-	272,794	322,728
At 31 March 2025	540,693	2,644,406	519,238	44,380	124,000	2,973,081	509,610	7,355,408
Depreciation and impairment								
At 1 April 2024	540,693	1,713,490	332,015	35,116	-	328,512	17,076	2,966,902
Depreciation charged in the year	-	38,789	63,604	2,316	-	110,190	20,250	235,149
At 31 March 2025	540,693	1,752,279	395,619	37,432	-	438,702	37,326	3,202,051
Carrying amount								
At 31 March 2025	-	892,127	123,619	6,948	124,000	2,534,379	472,284	4,153,357
At 31 March 2024	-	930,916	137,288	9,264	124,000	2,644,569	219,740	4,065,777

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

17 Tangible fixed assets

(Continued)

Leasehold improvements - represents expenses incurred on the main hospice property at Turf Lane, Royton, prior to obtaining a lease on the premises. Accordingly, all expenditure in the Oldham Hospice Appeal during the years ending on 30 September 2001 was written off as incurred. From 1 October 2001 the Oldham Hospice Appeal occupied the property under a lease with the Pennine Acute Hospital Trust (formerly the Oldham NHS Trust) for a period of 25 years at a peppercorn rent, due to expire October 2025. However, as the directors wished to carry out a major rebuild, further negotiations took place during 2018 and a new lease was signed on 29 March 2018, for a further 30 years with a view to two subsequent 30-year extensions.

Leasehold improvements post 2002 - represents costs incurred on the main hospice property from 2002 onwards by The Oldham Hospice Appeal and Dr. Kershaw's Hospice towards which the hospice has received grants and other financial assistance. The net book value of this asset equates to the restricted leased building fund reserve. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Long term leasehold property - is the building owned by the Hospice and used as part of the Shaw shop at 50 Market Street, Shaw. The property was last revalued by Breakey & Nuttall, Chartered Surveyors, on 4 November 2022.

Leasehold improvement projects - represents costs incurred on the IPU, reception, car park and modular unit. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

Barras legacy garden - represents costs to create a memorial garden, funded primarily through the Barras legacy with additional funding from Hospice UK as well as general hospice funds. The costs and the reserves will be depreciated/amortised over the remaining committed lease period.

18 Fixed asset investments

	Listed investments £	Cash in portfolio £	Other investments £	Total £
Cost or valuation				
At 1 April 2024	3,901,090	50,689	100	3,951,879
Additions	1,250,000	-	-	1,250,000
Valuation changes	103,948	-	-	103,948
Cash movements	(485,160)	510,452	-	25,292
	<hr/>	<hr/>	<hr/>	<hr/>
At 31 March 2025	4,769,878	561,141	100	5,331,119
	<hr/>	<hr/>	<hr/>	<hr/>
Carrying amount				
At 31 March 2025	4,769,878	561,141	100	5,331,119
	<hr/>	<hr/>	<hr/>	<hr/>
At 31 March 2024	3,901,090	50,689	100	3,951,879
	<hr/>	<hr/>	<hr/>	<hr/>

The Hospice invests in a mixture of Fixed Interest deposits, Securities and Equities. Investment performance is monitored on behalf of the Board of Trustees by the Financial Resource Steering Group (FRSG).

FRSG are responsible for the ongoing review of the Investment Policy statement, monitoring the cashflows of the Hospice and maintaining liquidity required to fund operations.

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

18 Fixed asset investments (Continued)

	Notes	2025 £	2024 £
Other investments comprise:			
Investments in subsidiaries	27	100	100
Investments at fair value comprise:			
Corporate bonds - cost £25,000		26,536	26,876
Investment shares bequested		2,077	1,698
Brewin Dolphin RBC investments		5,302,406	3,923,205
		5,331,019	3,951,779

19 Debtors

	2025 £	2024 £
Amounts falling due within one year:		
Trade debtors	179,859	751,165
Amounts owed by subsidiary undertakings	57,779	41,652
Other debtors	81,783	73,589
Prepayments and accrued income	511,973	546,390
	831,394	1,412,796

20 Creditors: amounts falling due within one year

	2025 £	2024 £
Trade creditors	109,334	44,539
Other taxation and social security	96,944	87,511
Other creditors	58,734	23,246
Accruals and deferred income	40,481	48,716
	305,493	204,012

21 Retirement benefit schemes

The charity operates a defined contribution pension scheme for all qualifying employees. The assets of the scheme are held separately from those of the charity in an independently administered fund.

The charge to profit or loss in respect of defined contribution schemes was £281,373 (2024 - £270,010).

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

22 Restricted funds

The restricted funds of the charity comprise the unexpended balances of donations and grants held on trust subject to specific conditions by donors as to how they may be used.

	At 1 April 2024 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2025 £
Restricted capital funds	3,793,304	93,263	(166,112)	106,671	-	3,827,126
Keira's Wishes	43,290	3,741	(1,122)	-	-	45,909
Rebecca Taylor fundraising	11,949	11,932	(10,473)	-	-	13,408
Barras legacy garden	604,224	8,488	(33,296)	(96,671)	10,973	493,718
Other restricted funds	25,242	22,127	(12,928)	(10,000)	-	24,441
	<u>4,478,009</u>	<u>139,551</u>	<u>(223,931)</u>	<u>-</u>	<u>10,973</u>	<u>4,404,602</u>
Previous year:	At 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2024 £
Restricted capital funds	3,932,140	12,326	(157,783)	18,945	(7,893)	3,797,735
Keira's Wishes	40,208	4,418	(1,336)	-	-	43,290
Rebecca Taylor fundraising	10,800	17,360	(16,210)	-	-	11,950
Barras legacy garden	588,261	8,722	(11,803)	(18,945)	37,990	604,225
Other restricted funds	15,473	568	(3,125)	-	7,893	20,809
	<u>4,586,882</u>	<u>43,394</u>	<u>(190,257)</u>	<u>-</u>	<u>37,990</u>	<u>4,478,009</u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

23 Unrestricted funds

The unrestricted funds of the charity comprise the unexpended balances of donations and grants which are not subject to specific conditions by donors and grantors as to how they may be used. These include designated funds which have been set aside out of unrestricted funds by the trustees for specific purposes.

	At 1 April 2024 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2025 £
Development fund	889,100	-	(101,207)	12,107	-	800,000
Maintenance fund	1,512,000	-	(86,247)	(125,753)	-	1,300,000
Closure reserve	1,650,760	-	-	649,240	-	2,300,000
Adversity reserve	612,525	-	-	(112,525)	-	500,000
Income risk reserve	1,739,000	-	-	411,000	-	2,150,000
Revaluation reserve	54,000	-	-	-	-	54,000
General funds	914,641	5,837,717	(4,935,477)	(834,069)	92,937	1,075,749
	<u>7,372,026</u>	<u>5,837,717</u>	<u>(5,122,931)</u>	<u>-</u>	<u>92,937</u>	<u>8,179,749</u>
Previous year:	At 1 April 2023 £	Incoming resources £	Resources expended £	Transfers £	Gains and losses £	At 31 March 2024 £
Development fund	889,100	-	-	-	-	889,100
Maintenance fund	212,000	-	-	1,300,000	-	1,512,000
Closure reserve	1,700,756	-	-	(49,996)	-	1,650,760
Adversity reserve	608,400	-	-	4,125	-	612,525
Income risk reserve	1,545,200	-	-	193,800	-	1,739,000
Revaluation reserve	54,000	-	-	-	-	54,000
General funds	947,437	5,796,690	(4,679,860)	(1,447,929)	298,303	914,641
	<u>5,956,893</u>	<u>5,796,690</u>	<u>(4,679,860)</u>	<u>-</u>	<u>298,303</u>	<u>7,372,026</u>

The Financial Resource Steering Group (FRSG) of the Board meets regularly to review the reserves policy and the criteria required to hold reserves on an ongoing basis. FRSG adopt the following principles, as set out in the Reserves Policy:

1. Firstly, reserves are allocated to fund the orderly closure of the Hospice.
2. Secondly, the Hospice allocates reserves to ensure the resilience and continuity of its core operations.
3. Remaining reserves are available for designation into the Development fund. This sets aside funds required to develop and improve services in line with the Hospice's strategic objectives.

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED)

FOR THE YEAR ENDED 31 MARCH 2025

23 Unrestricted funds

(Continued)

Development Fund

In 2023/2024, funds were allocated for the Hospice to invest in its infrastructure over a three year period. This initiative is still ongoing, ensuring continued improvements and upgrades to the hospice's facilities and services during the remaining years of the plan.

Maintenance Fund

Funds have been allocated to support the Hospice's estate strategy, which includes the ongoing maintenance of internal and external areas, as well as fixtures and fittings. These funds will also be used to address essential equipment needs on a rolling basis, ensuring the Hospice and retail shops remain fully operational and fit for purpose.

Closure Reserve

Sets funds aside to cover the orderly closure of the Hospice. Predominantly but not limited to staff notice/ redundancy and lease commitments.

Adversity Reserve

Protects the Hospice against unplanned events. For 2024/25 this covers the risk of a material fall in the market valuation of the recently established Investment fund.

Income Risk Reserve

Sets funds aside to cover a fall in income levels, ensuring the activities of the Hospice can continue until income recovers or adjustments are made. The trustees consider a fallow income period of 2 years to be appropriate. Each income stream has been assessed and a reduction factor applied in each case.

24 Analysis of net assets between funds

	Unrestricted funds 2025 £	Restricted funds 2025 £	Total 2025 £	Unrestricted funds 2024 £	Restricted funds 2024 £	Total 2024 £
Fund balances at 31 March 2025 are represented by:						
Tangible assets	326,233	3,827,124	4,153,357	272,472	3,793,305	4,065,777
Investments	4,907,852	423,267	5,331,119	3,510,207	441,672	3,951,879
Current assets/(liabilities)	2,945,664	154,211	3,099,875	3,589,347	243,032	3,832,379
	<u>8,179,749</u>	<u>4,404,602</u>	<u>12,584,351</u>	<u>7,372,026</u>	<u>4,478,009</u>	<u>11,850,035</u>

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

25 Operating lease commitments

Lessee

At the reporting end date the charity had outstanding commitments for future minimum lease payments under non-cancellable operating leases, which fall due as follows:

	2025 £	2024 £
Within one year	75,658	91,094
Between two and five years	144,722	197,130
In over five years	46,292	69,542
	<u>266,672</u>	<u>357,766</u>

26 Related party transactions

There were no disclosable related party transactions during the year (2024 - none).

27 Subsidiaries

Details of the charity's subsidiaries at 31 March 2025 are as follows:

Name of undertaking	Registered office	Nature of business	Class of shares held	% Held
Dr Kershaw's Hospice (Trading) Limited	England & Wales	Dormant company	Ordinary	100.00

The aggregate capital and reserves and the result for the year of subsidiaries excluded from consolidation was as follows:

Name of undertaking	Profit/(Loss) Transferred £	Capital and Reserves £
Dr Kershaw's Hospice (Trading) Limited	-	100

The subsidiary has not been consolidated within the accounts as it is no longer trading and is not considered to be material to the overall results of the charity.

Unincorporated undertakings

Dr Kershaw's Hospice Lottery is related to the Hospice but is independently registered with and regulated by the Gambling Commission, with whom accounts are filed annually. The lottery exists solely to contribute surpluses to the Hospice and at 31 March 2025 had distributable reserves of £391,790 (2024: £252,390).

DR KERSHAW'S HOSPICE

NOTES TO THE FINANCIAL STATEMENTS (CONTINUED) FOR THE YEAR ENDED 31 MARCH 2025

28	Cash generated from operations	2025 £	2024 £
	Surplus for the year	734,316	1,306,260
	Adjustments for:		
	Investment income recognised in statement of financial activities	(164,508)	(83,716)
	Fair value gains and losses on investments	(103,910)	(336,293)
	Depreciation and impairment of tangible fixed assets	235,149	218,828
	Movements in working capital:		
	Decrease/(increase) in debtors	581,402	(732,895)
	Increase/(decrease) in creditors	101,480	(160,338)
	Cash generated from operations	<u>1,383,929</u>	<u>211,846</u>



**You are at the heart of
everything we do!**





Dr Kershaw's Hospice, Turf Lane, Royton, Oldham, OL2 6EU
www.drkh.org.uk

Tel: 0161 624 2727
Email: info@drkh.org.uk

Reg. Charity No: 1105924

