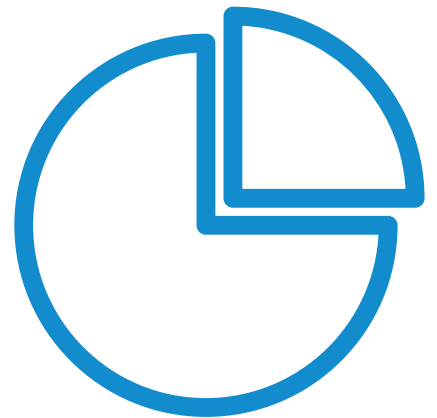
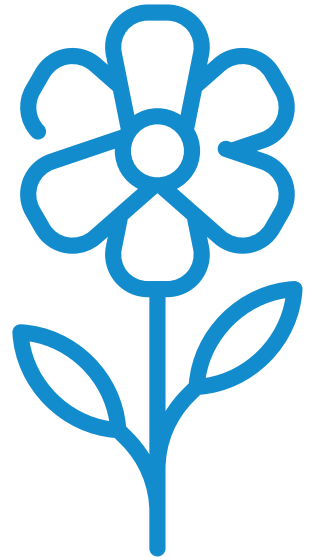


2019

St Francis Hospice Dublin

Annual Report and Audited Financial Statements



St. Francis Hospice Dublin



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Our Vision

As a voluntary organisation our vision is to continue to harness widespread community support and be at the forefront in identifying specialist palliative care needs in the community and develop responses to them. The principle of “voluntarism” is at the centre of the hospice’s mission and success.

Our Values

Dignity

Respect

Compassion

Collaboration

Excellence

Kindness



Our Mission

St Francis Hospice provides a specialist palliative care service to people in North Dublin. This includes support for their families and friends and all healthcare professionals involved in their care. The service is based on a Christian philosophy of human dignity, which treats each person with respect and compassion, irrespective of their cultural or religious background or socio-economic status. The Hospice plays a leadership role in shaping palliative care nationally, working in partnership to advance policy, education, research and service innovation.

Definition of Palliative Care

Palliative care is an approach that improves the quality of life of patients and their families facing the problem associated with life-threatening illness, through the prevention and relief of suffering by means of early identification and impeccable assessment and treatment of pain and other problems, physical, psychosocial and spiritual. Palliative care:

- provides relief from pain and other distressing symptoms;
- affirms life and regards dying as a normal process;
- intends neither to hasten or postpone death;
- integrates the psychological and spiritual aspects of patient care;
- offers a support system to help patients live as actively as possible until death;
- offers a support system to help the family cope during the patients illness and in their own bereavement;
- uses a team approach to address the needs of patients and their families, including bereavement counselling, if indicated;
- will enhance quality of life, and may also positively influence the course of illness;
- is applicable early in the course of illness, in conjunction with other therapies that are intended to prolong life, such as chemotherapy or radiation therapy, and includes those investigations needed to better understand and manage distressing clinical complications.

World Health Organisation definition 2018



Chairperson's Report



I am delighted to present the 2019 St. Francis Hospice Dublin Annual Report and Financial Statements. Throughout 2019, St. Francis Hospice Dublin continued to provide specialist palliative care services to patients and their families.

A sincere thank you to the staff, contract staff and volunteers of the hospice and to my fellow directors for the great efforts they have made during 2019 in ensuring the provision of a first class hospice service.

I would like to pay tribute to our former director, Fr. Eugene Kennedy, and express our sadness at the death of Fr. Eugene. May he rest in peace. We owe Fr. Eugene a huge debt of gratitude for his immense contribution towards the development of St. Francis Hospice Blanchardstown and his contribution as a Board member. He will be sadly missed by all at St. Francis Hospice Dublin.

As a Board we ensured that we continued to adhere to governance best practice through comprehensive training on all legal and governance matters relevant to the hospice. Directors were provided with a comprehensive governance manual as part of this training. The Board completed a review of the hospice's Section 39 status to include the pros and cons in the context of Government pay policy since 2016. The CEO was given Board permission to explore the Voluntary Hospices Group

collaborative approach towards ensuring financial sustainability, service development and Section 38 status into the future.

The hospice is extremely grateful to all who have participated in raising funds for our two hospices during 2019. I would ask you to continue to support us with the same level of generosity in 2020. I thank in a special way our benefactors without whom we would be unable to provide a quality hospice service.

I look forward with hope and confidence for the future development of the services we provide in North Dublin and its environs.

Dermot McCarthy,
Chairman, Board of Directors.

Chief Executive Statement



Since its foundation in 1989 St. Francis Hospice Dublin has played an integral leadership role in the provision of palliative care services. As a voluntary organisation our independence has enabled us to harness widespread community support and we have been at the forefront in identifying needs in the community and developing responses to them.

I am delighted to report that during our 30th anniversary year we continued to provide high quality and accessible palliative care services at no charge to patients and families. Our objective of ensuring that the people of North Dublin and surrounding counties have improved access to specialist palliative care was demonstrated by our care for 1,802 patients and their families in 2019. This represents a 5.2% increase on 2018 activity and a 46% increase since 2014. I would like to take the opportunity to thank all our staff and volunteers for their kindness and commitment in caring for our patients and their families.

St. Francis Hospice Dublin celebrated its 30th anniversary in 2019 by honouring all those we have cared for over the past 30 years, celebrating the work of our staff, contract staff and volunteers (including directors), acknowledging and thanking our donors and setting out our plans for the future.

St Francis Hospice was honoured to be awarded the 2019/2020 Charity Impact Award (Large Organisation Category) presented by The Wheel, the national association of charities, community and voluntary organisations and social enterprises. This prestigious award was a timely

acknowledgement of the care for and kindness to our patients and families from all our staff and volunteers, past and present.

I wish to express my appreciation for the continuing strategic and financial support of the Health Service Executive through the Directorate of Primary Care and Community Health Organisation 9. I look forward to continuing to work constructively together to maintain, develop and improve the vital services provided by St. Francis Hospice Dublin.

We, at St. Francis Hospice Dublin, will continue to work closely with and for the community we serve and will very much continue to need the support of our community into the future.

Fintan Fagan,
Chief Executive Officer

St. Francis Hospice Dublin Winner Best Large Charity 2019-2020



Directors' Report

The Directors of St Francis Hospice present their annual report and the audited financial statements for the year ended 31 December 2019.

Our History

In 1988 Dr. Mary Redmond identified a need for a hospice on the north side of Dublin city. She asked the Daughters of Charity for help in setting up a home care service for this area. Over the years, numerous individuals, groups and organisations have provided the dedication and financial support to enable St Francis Hospice to develop a comprehensive specialist palliative care service for North Dublin city, county and surrounding counties.

Raheny

The Community Palliative Care team were originally based in a portacabin on the grounds of the Capuchin Friary in Raheny. The team provided advice and support to patients and families in their own homes.

The Capuchin Friars donated the site of their monastery garden and St. Francis Hospice Raheny was built in two phases.

In 1993, office and meeting space for the Community Palliative Care team and a purpose-built Day Care centre opened.

The Day Care service began that year, providing patients with a place to come for support and advice from the multidisciplinary team and to receive complementary therapies.

In 1995, the second phase, St. Anne's In-Patient Unit (19 beds), was completed. Patients are admitted to St. Anne's In-Patient Unit when their need for specialist palliative care cannot be met at home or in hospital.

Education is an important way of extending the palliative care philosophy and approach to other healthcare settings, such as hospitals and nursing homes. An Education Department was formed in 1997 in order to develop courses and workshops for staff of other healthcare institutions, as well as staff of the hospice.

In 1999, St Francis Hospice Dublin purchased the adjoining Walmer Villa. This was restored and became Walmer Out-Patient services, offering a range of services to patients living at home. Further expansion took place in 2002, when a new phase of building was completed, providing enhanced facilities for the provision of day care, bereavement counselling and a Centre for Continuing Studies.

Blanchardstown

The need for a hospice to be provided for the people of Dublin North West was identified a number of years later. Blanchardstown was identified as an ideal location from which to serve the needs of Dublin North West. The Government allocated a 6.8 acre site on the Abbotstown lands for the building of the hospice. The construction works were completed in April 2011. St. Francis Hospice Blanchardstown is now fully open and providing services to patients in the Dublin North West and surrounding counties.

St Francis Hospice Dublin today

Together, St. Francis Hospice Raheny and Blanchardstown provide specialist palliative care services to the people of North Dublin city, county and surrounding counties with life limiting illnesses.

We are a voluntary organisation under the care of the Daughters of Charity of St. Vincent de Paul. All of the services are provided free of charge to patients and their families. Today St Francis Hospice Dublin plays a leadership role in shaping palliative care nationally, working in partnership to advance policy, education, research and service innovation.



What We Do

St Francis Hospice Dublin provides four distinct services to patients:

- Day Care, providing a visit to the hospice on a weekly basis for nursing care, therapies and social/creative activities.
- Out-Patient Service for nursing/medical care, occupational therapy or physiotherapy, complementary therapies and lymphoedema treatment.
- Care in their own home through our Community Palliative Care Team.
- In-Patient Care, offering admission for management of complex symptoms and psychosocial problems, as well as care in the terminal phase of a patient's illness.

The hospice philosophy also addresses the needs of the patients' families and friends:

Education and support is provided to family members caring for people at home. Counselling is offered to family and friends to help them adjust to changing situations. Bereavement support is offered through the multidisciplinary team, including pre-bereavement, post-bereavement counselling and bereavement work with children. Family and friends are encouraged to share in the care of their loved one.

The team at St Francis Hospice includes nurses, doctors, health care assistants, household staff, complementary therapists, lymphoedema nurse specialists, physiotherapists, occupational therapists, social workers, chaplains, pharmacists, volunteers, administrative staff, finance, and education professionals. They are supported by contract catering, security and cleaning staff.

Each makes a valuable contribution to the holistic care of patients and their families.

As part of St Francis Hospice's strategy to continue to provide accessible, high level specialist palliative care to patients and families we have an Education and Practice Development Team who provides education, training and orientation for staff and volunteers. Education is a core component of specialist palliative care. The programmes provided ensure that we develop our staff and volunteers to deliver the best possible care and services. The team also deliver palliative care education to healthcare staff working in hospitals, nursing homes and community settings. The Education Team delivers the Interdisciplinary MSc in Palliative Care in conjunction with Trinity College Dublin; they also facilitate third level students of many disciplines to complete clinical placements within St Francis Hospice Dublin.

Volunteers are an integral part of the hospice; they bring a dimension in terms of enthusiasm and commitment which are further enhanced by their considerable life skills and community links.



“I cannot express how much your kindness and care has affected me and my family. The compassion of every member of the staff has been inspiring and comforting.”

Directors' and Other Information

BOARD OF DIRECTORS

Dermot McCarthy

Chairperson

Patrick Kenny

Company Secretary and Board Director
Appointed on 25th September 2019

Angela Coughlan

Company Secretary
Resigned on 25th September 2019

Prof Peter Daly

Board Director

James Flynn

Board Director

Ita Gibney

Board Director
Resigned on 30th January 2019

Mary Hayes

Board Director

Dr Carol Ann Casey

Board Director

Sr Bernadette MacMahon

Board Director

Thomas Joseph McMahon

Board Director

Padraig O'Dea

Board Director

Joseph Pitcher

Board Director

Sr Claire McKiernan

Board Director

Sr Nuala Dolan

Board Director

Fr Philip Baxter

Board Director
Resigned on 25th September 2019

LEADERSHIP TEAM

Fintan Fagan

Chief Executive Officer

Sr Margaret Cashman

Director of Nursing

Dr Regina Mc Quillan

Medical Director

EXECUTIVE TEAM

Yolanda Cuadrado

Head of Human Resources

Breda Hawkshaw

Head of Finance

Dee Kinane

Fundraising Manager

Aishling Kearney

Quality and Risk Manager

Peter Crowe

General Services Manager

SOLICITORS

McCann Fitzgerald

Riverside One
Sir John Rogerson's Quay
Dublin 2

Mason Hayes & Curran

Barrow Street
Dublin 4

Eversheds Sutherland

One Earlsfort Centre
Earlsfort Terrace
Dublin 2

AUDITORS

JPA Brenson Lawlor

Brenson Lawlor House
Argyle Square
Morehampton Road
Dublin 4

PRINCIPAL BANKERS

Bank of Ireland

Raheny
Dublin 5

Allied Irish Bank

Westend Retail Park
Blanchardstown
Dublin 15

ABOUT US

St Francis Hospice Dublin is a company limited by guarantee and is registered in Ireland as a charity. It is a Section 39 Agency under the Health Act 2004.

Company Registration No: 153874

Charity Number: CHY10568

Charity Regulatory Authority Number:
20027193

Registered Office:
St Francis Hospice Dublin
Station Road
Raheny
Dublin 5
D05 E392

Structure, Governance and Management

Legal Status

St Francis Hospice Dublin is a company limited by guarantee.

St Francis Hospice Dublin is a registered charity (with the Charities Regulatory Authority) with charitable tax exempt ("CHY") status from the Revenue Commissioners. It is also a Section 39 Agency under the Health Act 2004.

Governance

BOARD OF DIRECTORS

The Board of Directors comprising of voluntary, non-executive Directors, is the body governing St Francis Hospice and is vested with the powers to carry out its aims in particular focusing on matters of policy and oversight. The Board of Directors meets six times per year. In addition, the Annual General Meeting of Trustees/Members is held in June each year. The Board ensures that the activities of St Francis Hospice are consistent with its charitable objectives.

In particular, the Board of Directors has collective responsibility for:

- Putting in place a clear scheme of delegation of accountability from the Board to the CEO;
- Approval of the strategic goals, annual service plans and the annual Service Level Arrangement with the HSE;
- Approval of annual budgets and ensuring the adequacy of internal financial control measures;
- Approval of significant procurement contracts and acquisitions, disposals and retirement of assets of SFHD;
- Ensuring effective systems are in place for identifying and managing risk;
- Approval of Annual reports and Audited Financial Statements; and
- Approval of Annual Compliance Statement prior to submission to HSE.

Management and Decision Making

Decisions of the Board are taken on a consensus basis following discussion. The Board of Directors has devised and agreed procedures for supporting decision making and conducting its business in a productive way. To do this it has established an appropriate sub-committee structure creating five sub-committees assigned with responsibility for specific areas. Each sub-committee has at least three members and has approved terms of reference. The Chief Executive Officer and members of senior management are in attendance at the sub-committee meetings. There are clear distinctions between the roles of the Board of Directors and the Leadership Team, to which day-to-day management is delegated. Matters such as policy, strategic planning, and budgets are drafted by the Management Team for consideration and approval by the Board, who then monitor the implementation of these plans unless they have been specifically delegated authority to make decisions.

The following committees are approved by the Board:

Governance and Risk (to include Board Nominations and Remuneration)

The role of the Governance and Risk Committee is to oversee the implementation of governance and risk management at St Francis Hospice Dublin and to review its compliance with the HSE's Standards for Governance. Four committee meetings are held each year.

Finance Audit

The role of the Finance Audit Committee is to focus principally on assisting the Board in fulfilling its duties by providing an independent and objective review of the financial status and performance of St Francis Hospice Dublin. Four meetings are held each year.

Quality and Safety

The role of the Quality and Safety Committee is to make a positive difference to the safety, health and

welfare of all patients, staff, volunteers and visitors at St Francis Hospice Dublin. Four meetings are held each year.

Fundraising Advisory

The role of the Fundraising Advisory Committee is to ensure that all fundraising activity is conducted in line with current best practice for fundraising and Board approved policy. Three meetings are held each year.

Research Ethics

The purpose of this Research Ethics Committee is to evaluate from an ethical viewpoint any planned research at the hospice or by its staff in settings where no Research Ethics Committees are available. A minimum of two meetings are held each year.

Management

St Francis Hospice Dublin's Leadership Team includes the Chief Executive Officer, Medical Director and Director of Nursing. The Leadership Team is supported by an Executive Team comprising the Head of Finance, Head of Human Resources Manager, Fundraising Manager, General Services Manager and Quality & Risk Manager.

Commitment to Standards of Best Practice

St Francis Hospice Dublin is fully committed to implementing the highest standards of governance and accountability in its stewardship. St Francis Hospice Dublin has a detailed Corporate Governance Manual and a Code of Conduct for the Board of Directors. The Conflict of Interest policy is observed at each board meeting. Each Director is required to divulge any associated business. If this arises the Director in question is required to remove himself/herself from the meeting.

St Francis Hospice Dublin is fully committed to achieving the standards delineated by the Charities Regulator's Governance Code for Fundraising. In all of its fundraising activity, it is committed to

adhering to the core principles of respect, honesty and openness by:

- Respecting the rights, dignity and privacy of supporters, clients and beneficiaries
- Answering reasonable questions about fundraising activity and fundraising costs honestly
- Making information about our purpose, activities and governance available to the public

All Directors at St Francis Hospice Dublin are unpaid volunteers. No Director is employed directly or indirectly by St Francis Hospice Dublin or has any financial relationship with St Francis Hospice Dublin. No expenses or fees are paid to any Directors. Governance training opportunities are provided to ensure all Board Directors are prepared for their roles.

St. Francis Hospice Dublin works in compliance with the terms and obligations set out in Part 1 and Part 2 (Service Schedules) of its Service Level Arrangement with the HSE.

All procurement and purchasing activities carried out at the hospice are in accordance with best professional practice and ethical codes of conduct. There is co-ordination with HBS Procurement and the Office of Public Procurement where possible on contracts that provide cost savings.

St Francis Hospice is in compliance with the HSE Standard for Governance.

The Head of Finance has been assigned to lead the compliance journey to achieve the requirements for compliance with the Charities Regulator's Governance Code.

Financial Reporting

St Francis Hospice is committed to high levels of openness and transparency. The financial statements are prepared according to the Financial

Reporting Standard (FRS) 102 and the Statement of Recommended Practice (SORP) 2015 Accounting and Reporting by charities, issued by the Charity Commission in the UK.

Reserves Policy

St Francis Hospice Dublin strives to ensure a balance between the need to expend donations as donors would expect and the need to maintain an appropriate level of resources to ensure that there is sufficient funding for working capital, income shortfalls and unexpected expenditure. The Board of Directors hold a minimum level of free reserves as part of prudent financial management. The target amount to be attained and maintained for the operating reserve fund is €1,500,000, representing about one month of expenses on average.

Vetting

St Francis Hospice Dublin is fully compliant with the obligations of the National Vetting Bureau (Children and Vulnerable Adults) Act, 2012 which was commenced in April 2016. St Francis Hospice Dublin applies Child and Vulnerable Adult Protection policies, which are based on Children First Act 2015 and Children First Guidelines 2017, and best practice recruitment policies and procedures.

Complaints Policy

St Francis Hospice Dublin's Complaints Policy ensures that all complaints are dealt with in accordance with Part 9 of the Health Act 2004 and Statutory Instrument No. 652/2006 – Health Act 2004 (Complaints) Regulations 2006. Our Complaints Policy aims to meet the needs of patients, families, carers and visitors to the Hospice. St. Francis Hospice Dublin received a total of six complaints during 2019. These complaints were dealt with in accordance with our Complaints Policy and are now closed. On review of these complaints, no trends were identified.

Risk Management

St Francis Hospice Dublin's risk management system is managed by the Chief Executive Officer and is overseen on behalf of the Board by the Governance and Risk Committee. A Risk Register is in place which identifies the key risks the hospice is

subject to. Each risk is assessed and is gauged on the register at the level of risk it is exposed to. Financial risks are identified by the Finance Audit Committee and if necessary are reported to the Board of Directors for assessment. Identified risks and internal controls are subject to periodic review and this work is carried out by management, the internal auditors and from time to time by some external parties such as the HSE who are a major funder of the hospice. Risk is further reduced by having appropriate insurance in place.

Current Principal Risk And Uncertainties Identified are:

- Adequate funding by the HSE is crucial towards maintaining the current range of services and also towards providing for the totality of services at both hospice locations.
- St Francis Hospice Dublin, as a priority, strives to maintain and develop its income sources to meet the specialist palliative care service needs of North Dublin city, county and surrounding counties. It closely monitors reserve levels to ensure that they are sufficient to meet planned outgoings in the short term.
- St Francis Hospice Dublin has three interest bearing loans of €4.46 million. The level of debt is significant given that the hospice relies entirely on fundraising activities, donations and bequests to service interest costs and handle agreed arrangements for repayments. In addition to meeting the annual gap €6m in 2019 between HSE grants and the ongoing cost of hospice activities, St Francis Hospice Dublin is making special efforts in its current fundraising programmes to reduce debt levels. In relation to increasing interest costs, this risk has been significantly mitigated by the rate and term of fixed interest rates negotiated in the bank loan contract. The hospice closely monitors the ongoing adequacy of headroom over the banking covenants in the bank loan agreement.

The hospice's activities expose it to a number of financial risks including credit risk, cash flow risk and liquidity risk. These are disclosed in Note 24 to the financial statements.

Attendance – 2019 Board and Committee Meetings

Name	Board Meetings	Governance and Risk Committee Meetings	Finance Audit Committee Meetings	Quality and Safety Committee Meetings	Fundraising Advisory Committee Meetings	Research and Ethics Committee Meetings
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St Francis Hospice Dublin Board of Directors

Mr. Dermot McCarthy	6/6	2/4		1/4	1/3	
Sr. Bernadette McMahon	4/6	4/4				
Mr. Thomas Joseph McMahon	6/6	4/4				2/2
Sr. Nuala Dolan	5/6					
Ms. Mary Hayes	5/6					
Mr. James Flynn	4/6	4/4			3/3	
Prof. Peter Daly	6/6	4/4		4/4	3/3	
Fr. Philip Baxter	4/5			2/3	2/3	
Mr. Joseph Pitcher	5/6	4/4	4/4			
Sr. Claire McKiernan	5/6					
Dr. Carol-Ann Casey	5/6					
Ms. Ita Gibney	1/1					
Mr. Pdraig O'Dea	4/6	4/4	4/4			
Mr. Patrick Kenny (appointed as Company Secretary on 25 Sept 2019)	5/6	2/4	3/4			

Company Secretary

Ms. Angela Coughlan (resigned 25 Sept 2019)	6/6	4/4	4/4			
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Senior Management Team

Mr. Fintan Fagan Chief Executive Officer	6/6	4/4	4/4	4/4	3/3	1/2
Sr. Margaret Cashman Director of Nursing	6/6	3/4				
Dr. Regina McQuillan Medical Director	6/6	3/4		4/4		
Ms. Breda Hawkshaw Head of Finance	4/6	2/4	4/4		3/3	

The Directors are aware of the key risks to which the charity is exposed, in particular those related to the operations and finances of the charity and are satisfied that there are appropriate systems in place to mitigate these risks appropriately.

REFERENCE AND ADMINISTRATIVE DETAILS

Directors and Company Secretary

The Directors and Company Secretary, who served at any time during the financial year, were as follows:

Directors:

Dermot McCarthy (Chairman)
Dr. Carol Ann Casey
Prof. Peter Daly
James Flynn
Ita Gibney (Resigned on 30th January 2019)
Mary Hayes
Patrick Kenny
Sr. Bernadette MacMahon
Thomas Joseph McMahon
Padraig O'Dea
Joseph Pitcher
Sr. Claire McKiernan
Sr. Nuala Dolan
Dr. Philip Baxter (Resigned on 25th September 2019)

Company Secretary:

Angela Coughlan (Resigned on 25th September 2019)
Patrick Kenny (Appointed on 25th September 2019)

Directors and Company Secretary and their interests

The Directors do not hold any beneficial interest in the charity.

EXEMPTION FROM DISCLOSURE

The charity has not availed of any disclosure exemptions.

FUNDS HELD AS CUSTODIAN TRUSTEE ON BEHALF OF OTHERS

The charity does not hold any funds or other assets by way of custodian arrangement.

LIKELY FUTURE DEVELOPMENTS

The charity plans to continue its charitable activities for the foreseeable future, subject to satisfactory funding arrangements. St Francis Hospice Dublin is currently reviewing the refurbishment and redevelopment of its Raheny Hospice with a view to improving In-Patient facilities.

EVENTS AFTER THE END OF THE FINANCIAL YEAR

There were no post reporting date events which require disclosure.

GOING CONCERN

It is noted that St Francis Hospice Dublin is currently not fully funded for the public sector pay restoration and pay progression by the HSE. St Francis Hospice Dublin requires 2016/2017/2018/2019/2020 funding. St Francis Hospice Dublin had implemented both the LRA/HRA pay cuts and achieved the associated cost savings. The hospice is strongly of the view that the HSE funding alignment for salaries is long established. The annual funding of the pay awards is essential to St Francis Hospice Dublin to continue to provide existing services to our patients and families. We have fully participated in the HSE's request for extensive information and understand that the HSE reported same to the Department of Health and the Work Place Relations Commission.

The HSE has stated that only pay restoration will be funded. St Francis Hospice Dublin continues its discussions with HSE officials in HSE Community Health Organisation 9 regarding the need to receive full funding for recent and future pay progression awards.

The Directors have a reasonable expectation that St Francis Hospice Dublin has adequate resources to continue in operational existence for the foreseeable future, thus they continue to adopt the going concern basis in preparing the annual financial statements. Further details regarding the adoption of the going concern basis can be found in Note 1 to the financial statements.

RESEARCH AND DEVELOPMENT

St Francis Hospice Dublin carries out on-going research to achieve and enhance optimum care for patients.

POLITICAL CONTRIBUTIONS

The charity did not make any political donations during the year.

RESULTS FOR THE FINANCIAL YEAR

The net movement of funds during the financial year was a deficit of €974,770 (2018: Deficit €1,126,601).

DIVIDENDS AND RESERVES

The reserves are not distributable and are applied in accordance with the Articles of Association to finance the work of the hospice.

SUBSIDIARY COMPANY

Details relating to the subsidiary company are set out in Note 15 to the financial statements.

ACCOUNTING RECORDS

The measures that the Directors have taken to secure compliance with the requirements of sections 281 to 285 of the Companies Act 2014 with regard to the keeping of accounting records, are the employment of appropriately qualified accounting personnel and the maintenance of computerised accounting systems. The hospice's accounting records are maintained at the hospice's registered office at Station Road, Raheny, Dublin 5, D05 E392.

DISCLOSURE OF INFORMATION TO AUDITORS

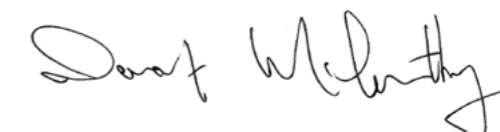
In the case of each of the persons who are Directors at the time the Directors' report and financial statements are approved:

- So far as the director is aware, there is no relevant audit information of which the Hospice's statutory auditors are unaware; and
- Each Director has taken all steps that ought to have been taken by the Director in order to make himself/herself aware of any relevant audit information and to establish that the hospice's auditors are aware of that information.

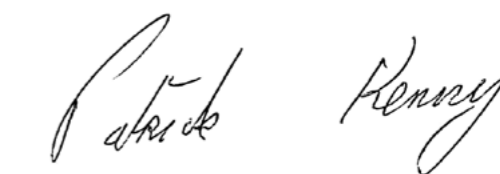
Auditors

In accordance with the Companies Act 2014, section 383(2), JPA Brenson Lawlor continue in office as auditor of the company.

Approved by the Board and signed on its behalf by:



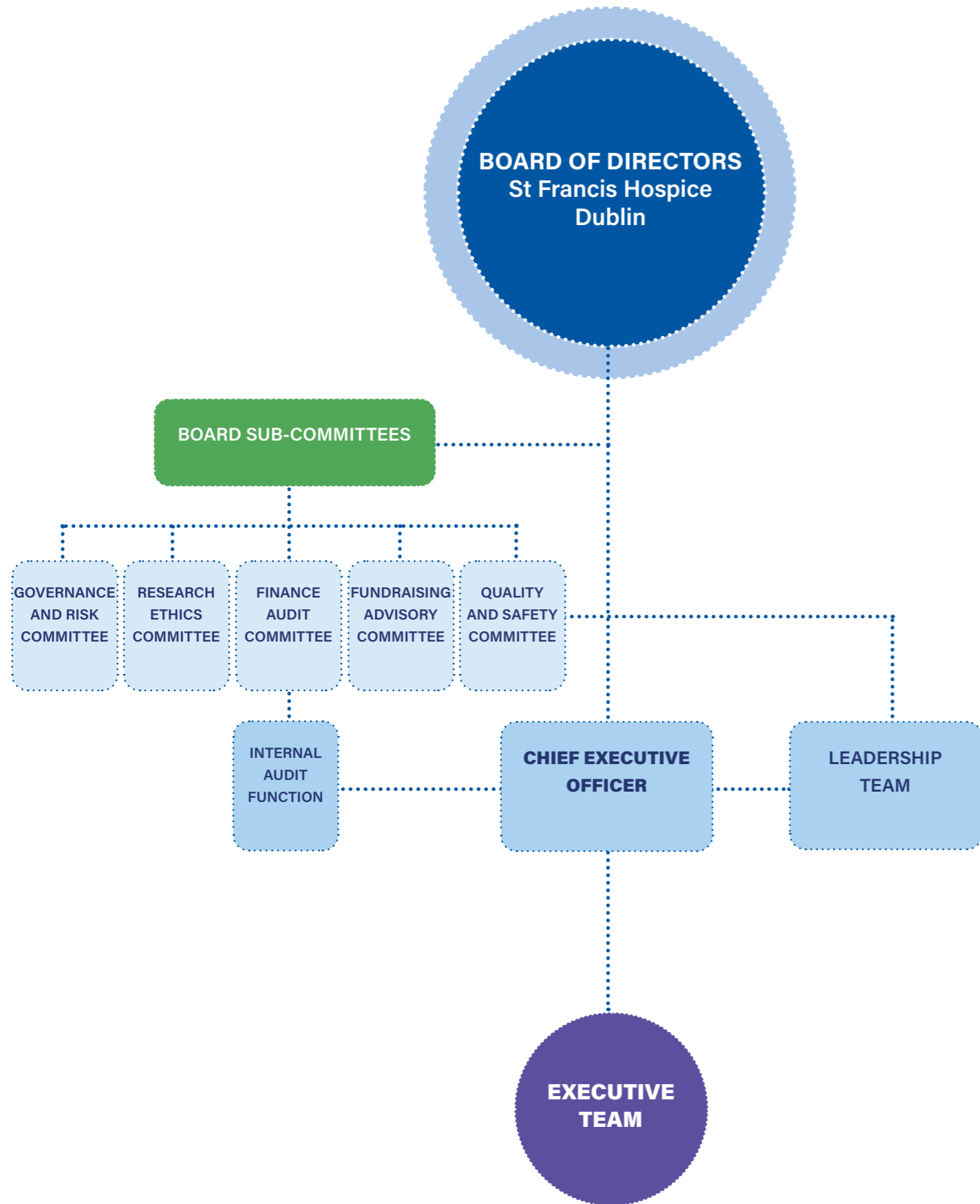
Dermot McCarthy
Chairman



Patrick Kenny
Director

Date: 27th May 2020

Organisational Chart



“Excellence is doing ordinary things extraordinarily well.”

John W Gardiner

Strategic Aims

Strategic Aim	Strategic Objective	Enablement Action Taken and Performance 2019
To continue to provide accessible, high level specialist palliative care at no charge to patients and families	Put a stronger emphasis on mobilising financial resources at every level to ensure that we have the financial capacity to see our plans fully implemented. Obtain optimal funding from Government and donors.	Secured an additional €900k from the HSE to address the historic underfunding of core costs since 2014 at St Francis Hospice Blanchardstown.
		Developed a joint proposal with the Voluntary Hospice Group to seek to resolve the overdependency on fundraising income to cover core costs, for consideration by Government, Department of Health and Health Service Executive.
		Secured additional capital expenditure funding from the HSE for the purchase of two replacement patient transport vehicles.
		Continued to maintain strong, productive working relationships with the HSE (locally, nationally) to promote continuity and development of services.
	Raise our profile to ensure that there is a greater awareness of the role and activities of the hospice within the communities we serve.	Secured Major Donor funding to cover the future cost of two strategic roles at the hospice. Major Donor Fundraising resource and a Communications Manager
	Recruit and support a skilled and engaged medical, clinical, administrative and volunteer workforce and ensure that the hospice provides them with appropriate opportunities to grow and develop.	Established a Culture and Values Project team, building on previous work completed, the initiative being to underpin and promote the core values of the hospice. Workshops were developed "Our Values in action" in consultation with staff and volunteers. The newly adopted core value are Dignity, Respect, Compassion, Kindness, Excellence and Collaboration.
	Ensure that we have an adequate number of appropriately skilled staff and volunteers to meet our objectives.	Celebrated St Francis Hospice Dublin's 30th Anniversary and organised a number of events where we took the opportunity to honour those we cared for, celebrated the work of our staff and volunteers and acknowledged and thanked our donors and supporters.
	Secure quality facilities that provide an optimal care and work environment.	Secured additional statutory funding for the replacement of outdated telecommunications systems at both hospices.
	Achieve excellence in our governance, administrative and management systems to ensure that the hospice continues to function effectively as an organisation.	The Board of Directors participated in governance training during the year. The training incorporated a comprehensive update on all legal and governance matters related to the hospice. The Directors were provided with a governance manual.
		Internal Audits were carried out during the year and recommendations were adopted.
Leverage technology to optimise care.	Engaged a professional IT Managed Services company to fully manage and support our IT services to ensure our infrastructure is fully monitored and secure. This enables us to implement new IT systems and focus on our core activity.	

Strategic Aim	Strategic Objective	Enablement Action Taken and Performance 2019
To improve access to specialist palliative care services for patients and families.	Specialist Palliative care is assessed via a referral system and is often initiated by the GP caring for the patient. It is our goal to provide timely access to quality care where possible within the constraints of our finances. Extend care to those who are most in need.	1802 patients were cared for in 2019. 5.2% increase on 2018 Activity. 46% increase since 2014. 91% of patients referred to in our community received a visit within 7 days. 96% of patients referred to our In-patient service were admitted within 7 days.
	Increase the multidisciplinary mix of staff within our Community Palliative Care teams such as Physiotherapy, Occupational Therapy and Social work.	Secured additional statutory funding to recover core costs at Blanchardstown Hospice.

Strategic Aim	Strategic Objective	Enablement Action Taken and Performance 2019
Plan for the redevelopment of St Francis Hospice Raheny	Develop plans to move to all single room patient accommodation in order to ensure the privacy and dignity for each patient. Increase the availability of suitable beds to increase access. Increase family space for visitors.	Development of concepts plans and site selection.
		Secured a donation in kind of additional lands from a benefactor.
		Developed Major Donation fundraising Campaign to raise funds for capital rebuild.

Fundraising

How We Raise Funds

We raise a substantial amount of income through hospice led community supporter events. We also receive donations from the general public.

Fundraising Activities Include

Raheny Five Mile, Spring Memorial Walk, Women's Mini Marathon, collections, supporter events and merchandise sales.

Ireland's Biggest Coffee Morning for Hospice – Each year friends, family, neighbours and work colleagues work together to host coffee morning events to raise money for St Francis Hospice. The coffee morning campaign is sponsored by Bewley's.

Community Supporter Events – Each year supporters organise events in memory of their loved ones or for general support. Advice, support and marketing materials are provided by the Fundraising team as required.

Corporate Business Community – St Francis Hospice is supported by many Corporate Partners within the community.

Tree of Life Ceremonies - Raheny and Blanchardstown – These ceremonies are a wonderful way to remember loved ones while at the same time helping to raise funds for people in need of our services.

Public Collections

We hold two annual collections **National Sunflower Day** in June and our **Christmas Collection** which starts in November and continues into December.

Church Gate Collections within our local community.

Our 'mite box' – our public collection boxes which are managed and placed in the shops in our local area by volunteers (our Mite Box Collectors).

Many of our volunteers support us in those collections which provide vital funds for the hospice. Many have maintained their involvement with us over the years.

Hospice Merchandise/Gifts – Various items are available to purchase in our online shop and at our two hospice sites. Items include candles, greeting cards, small teddies and local handmade crafts gifted to the hospice.

Committed Giving

Monthly Draw - Our monthly draw established since 1998 provides regular monthly income to the hospice.

We also recruit regular donors through committed giving recruitment at the hospice sites.

Donations

Donations include restricted and unrestricted donations from the general public. These are gifted for general support and sometimes in memory of a loved one that has died.

We raise funds through our online donation platform on our website at www.sfh.ie.

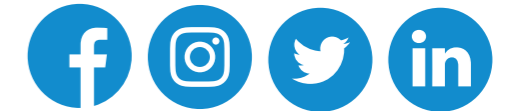
Donations can also be made on our website through our Remembrance Book and our Hospice Virtual Garden.

We receive periodic major donations and legacies. Each November we participate in Best Will Week.

Grant Income

Where possible we source applicable grant funding for special projects which enhance our service provision.

You can follow us @SFHDublin on



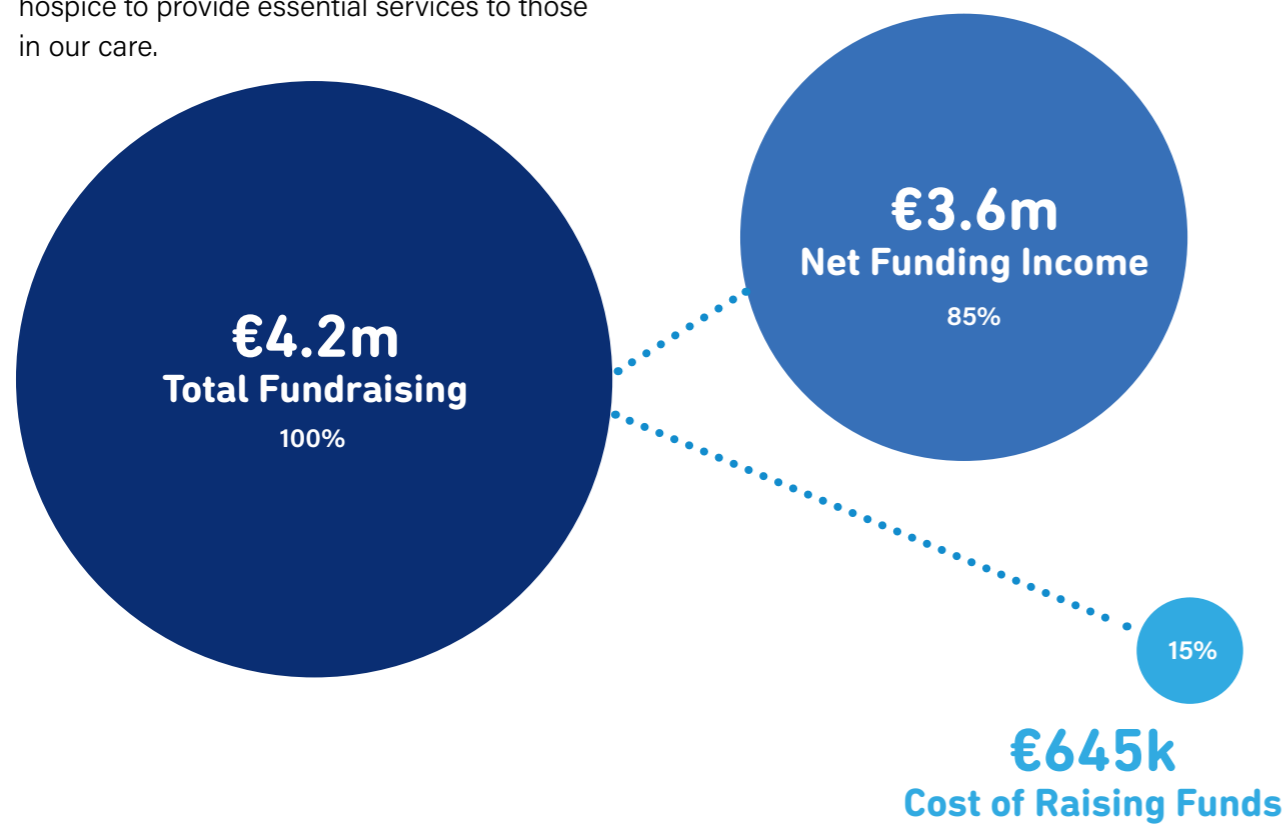
Fundraising 2019

Our fundraising efforts throughout 2019 were reflective of our 30th Anniversary. It provided us with a very welcome opportunity to reach out to all our supporters and thank them for their unwavering financial support over the years. The anniversary gave us time to revisit and celebrate so many of the steps that we walked together to develop quality hospice facilities for the people of North Dublin city, county and surrounding counties.

Throughout our 30th Anniversary year our donors, once again, have been extraordinarily generous not only financially but also with the time that they have given to the hospice in 2019. Their support, which comes in so many ways, ensures that the hospice can continue to provide the highest standard of care for patients and families.

In 2019 a total of €4,215,742 was raised by the hospice to provide essential services to those in our care.

Blanchardstown Centre Oratory Group continues to support the hospice by holding two major events annually and also act as powerful advocates for the hospice within the local community. This year the Blanchardstown Centre Oratory Group in tandem with the community raised the very generous amount of €222,596.



Fundraising Future Plans

Obtaining reliable and recurring sources of fundraising income remains a key challenge for the hospice. In 2019 a detailed fundraising plan was developed. As part of this plan a decision has been made to increase fundraising resource capacity in 2020-2021. A major donor fundraising resource will be recruited to launch a fundraising campaign to raise funds for the redevelopment of St Francis Hospice Raheny. In addition, the fundraising team is working steadily to increase other revenue streams such as committed giving, legacies, institutional funding and corporate partnerships. In tandem with this we will continue to raise our profile on all relevant social media platforms.

Communications

In 2020 a Communications Manager will also be recruited to work with the Chief Executive Officer and the Fundraising Manager. Part of the role will be to develop a successful marketing and communications strategy to support the fundraising plan that will raise the profile of the hospice and drive the expansion of our donor base.

St Francis Hospice Dublin is committed to the highest standards of fundraising and is compliant with the **Guidelines for Charitable Organisations on Fundraising from the Public**.

All our fundraising activities are carried out in an open, transparent, honest, respectful and accountable manner.



Impact in 2019



1,802

patients cared for in 2019



964

patients and clients helped by our social workers



10,223

visits by nurses to people in the community



91%

of patients referred to our Community Palliative Care service received a visit within 7 days



96%

of patients referred to our In-Patient service were admitted within 7 days



304

Number of Volunteers



902

Medical visits to people in the community



1,907

Day Care Attendances



645

People admitted to the In-Patient Unit



44

Volunteer Roles



43,775

Volunteer Hours



720

Secondary school students who attended an education session



2,106

Out-Patient Attendances



1,500

Bereavement counselling and support sessions provided



€4.2m

Fundraising income raised



807

Staff attendances at in-service education sessions



281

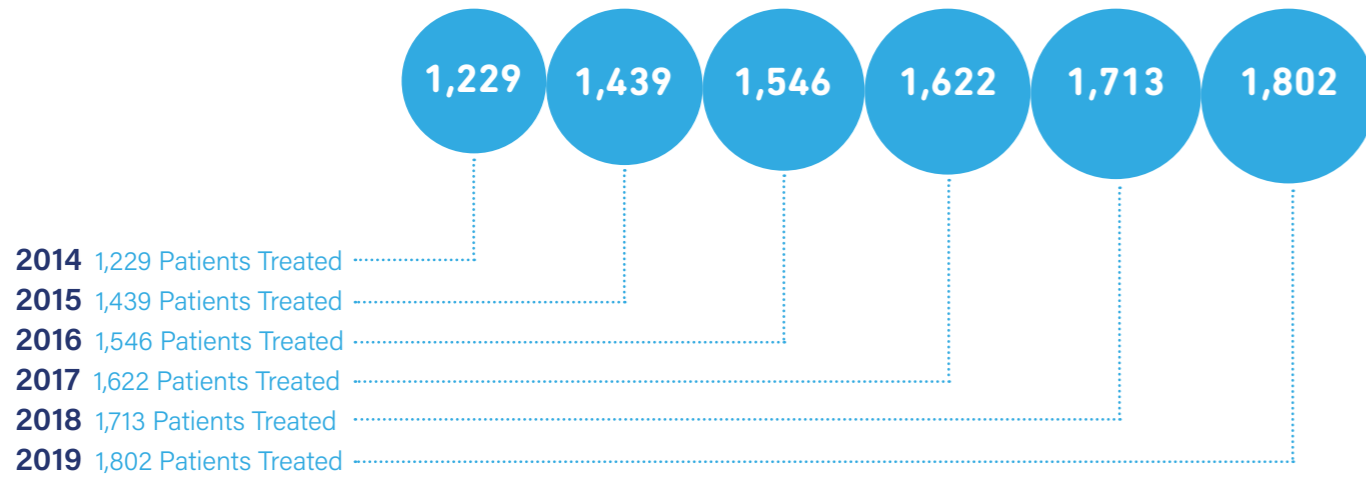
Number of Staff



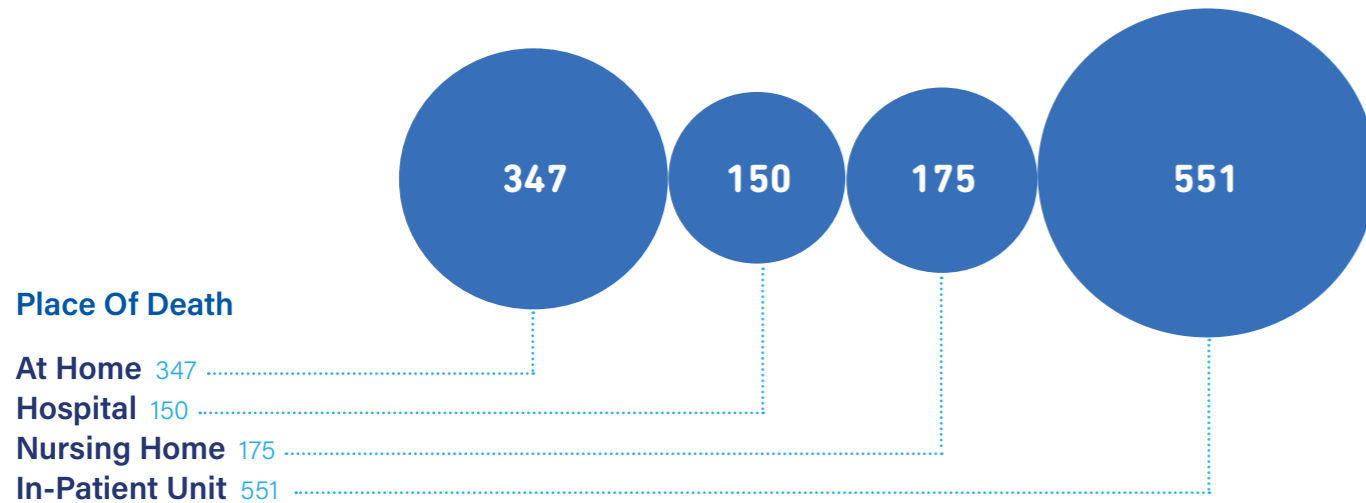
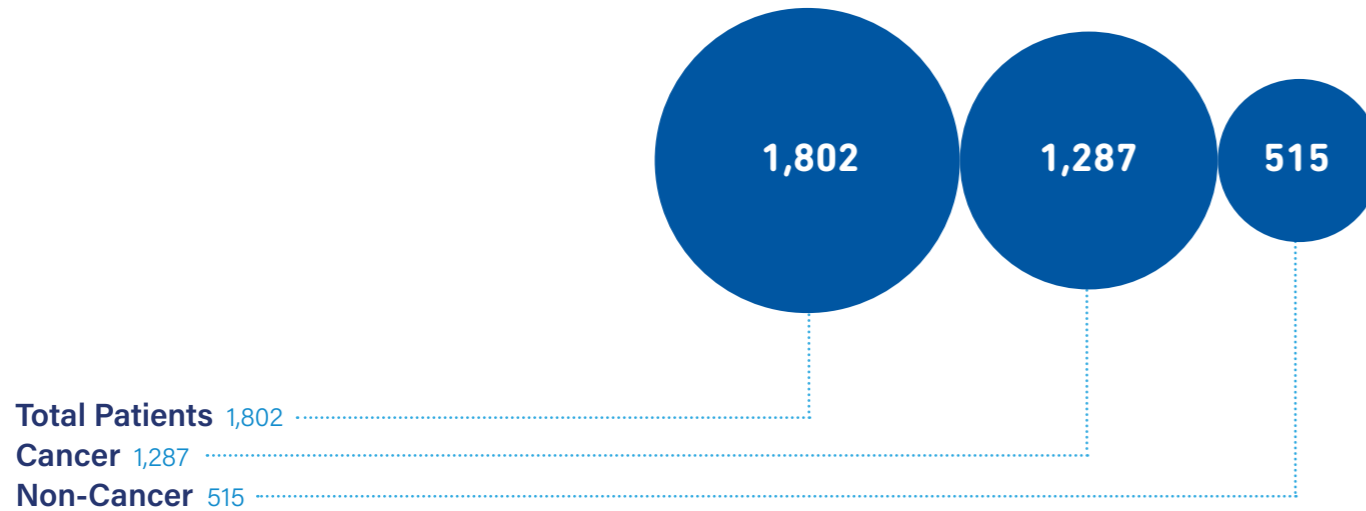
30 Years

providing specialist palliative care services

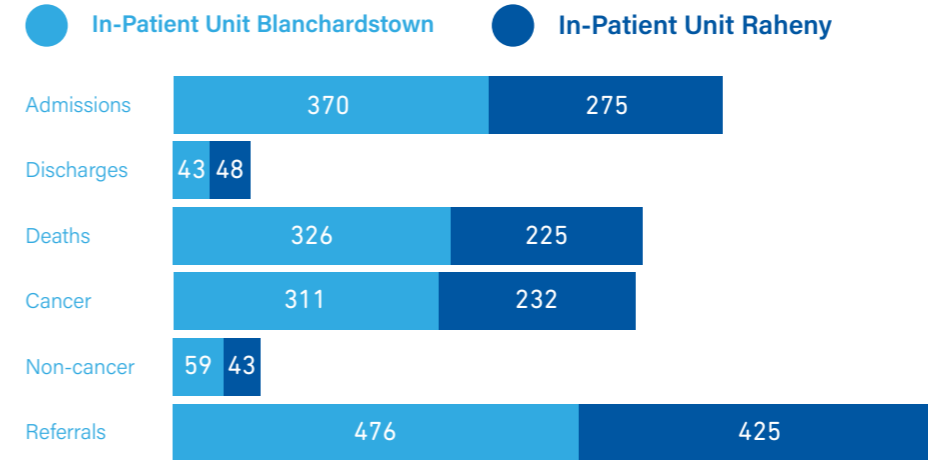
Growth In Services Provided To The People Of North Dublin



St Francis Hospice Dublin All Service



In-Patient Care 2019



St. Anne's In-Patient Unit, Raheny, and the In-Patient Unit, Blanchardstown, can accommodate 19 and 24 patients, respectively. Blanchardstown consists of all single rooms, while Raheny has 7 single rooms and 3 four-bedded areas. Both sites have children's playrooms, therapy rooms and rooms for the use families if they wish to stay overnight.

Out-Patient Care 2019

● Out-Patient Department Blanchardstown ● Out-Patient Department Raheny

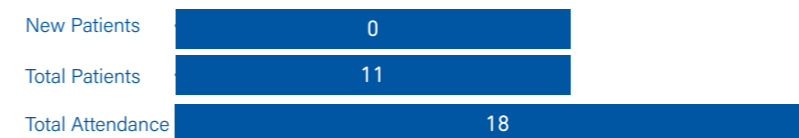
Complementary Therapy Service:



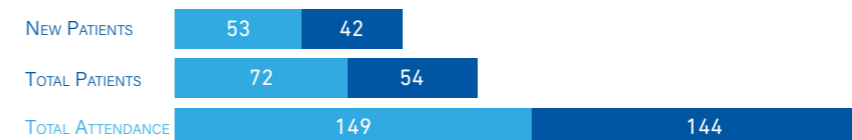
Lymphoedema Service:



Oncology Lymphoedema Service:



Physiotherapy service:

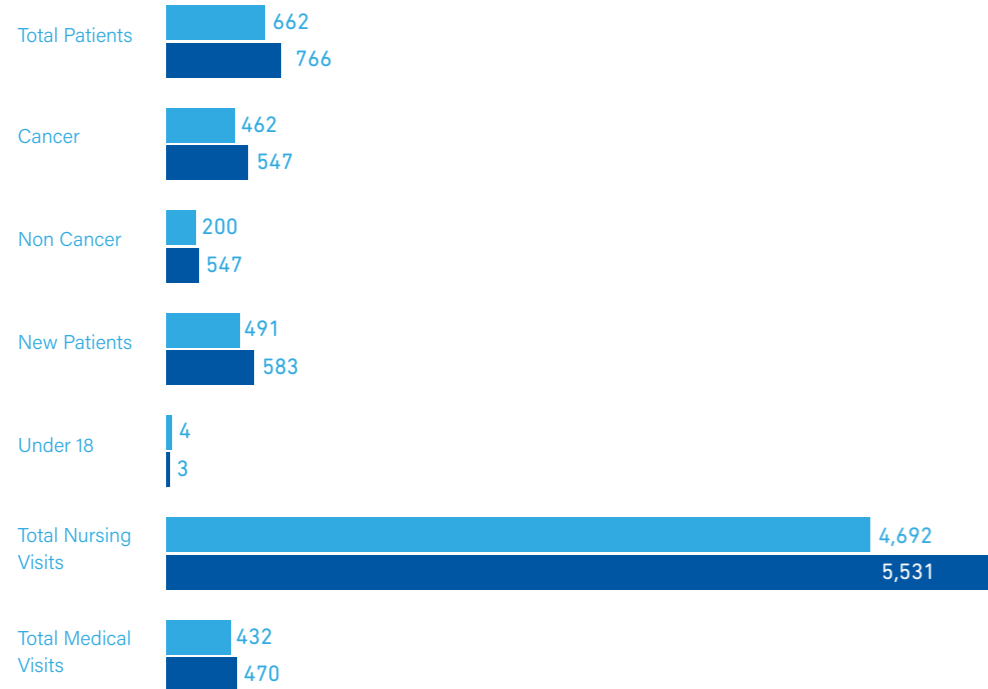


The Out-Patient Department provides patients with high quality multidisciplinary care in a comfortable and relaxing setting. Patients under the care of St Francis Hospice Community Palliative Care (CPC) Teams who are referred to the Out-Patients Department have access to numerous services such as Complementary therapy, Lymphoedema therapy, Occupational Therapy, Chaplaincy, Social Work, nursing and medical reviews.



Community Palliative Care

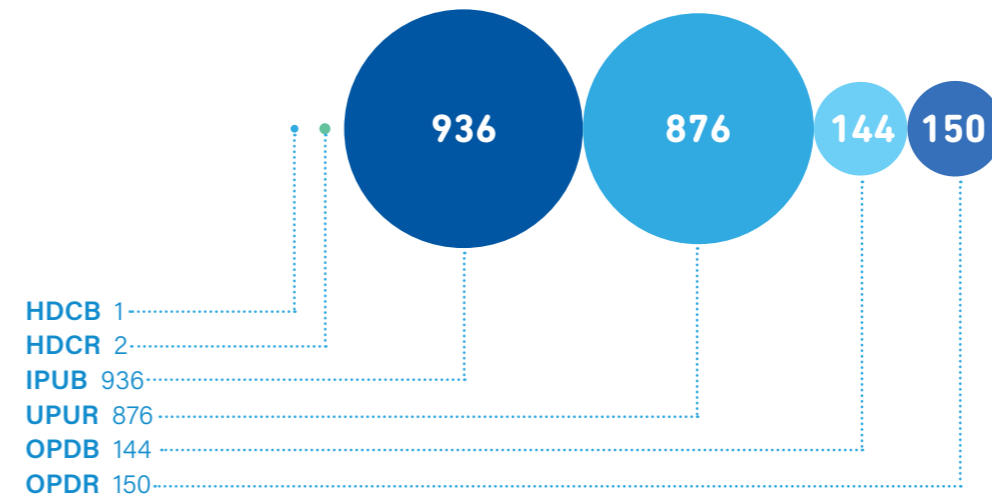
● CPC Blanchardstown ● CPC Raheny



The Community Palliative Care team uses its specialist knowledge and experience to support people who are living at home with a life limiting illness, and their families. Our aim is to help patients to live as well as possible for as long as possible at home through our expert knowledge in symptom control and management of psychosocial complexities. We support the patient's GP and PHN in the delivery of palliative care.

As with previous years those accessing the Community Palliative Care service with non malignant disease continue to rise. In 2019 there was a 10% increase on the previous year.

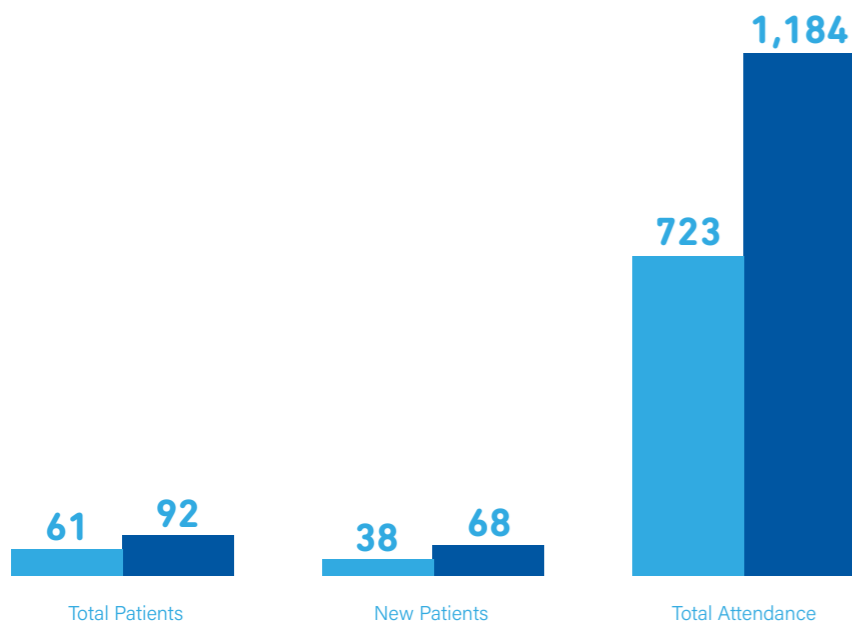
Physiotherapy Interventions 2019



Physiotherapists in St Francis Hospice seek to support those affected by advanced life-limiting conditions by alleviating physical symptoms and maximising independence within the constraints of their situation. We aim to help patients to live their lives as fully and as independently as possible by showing them how to maintain and make the most of their physical abilities.

Hospice Day Care 2019

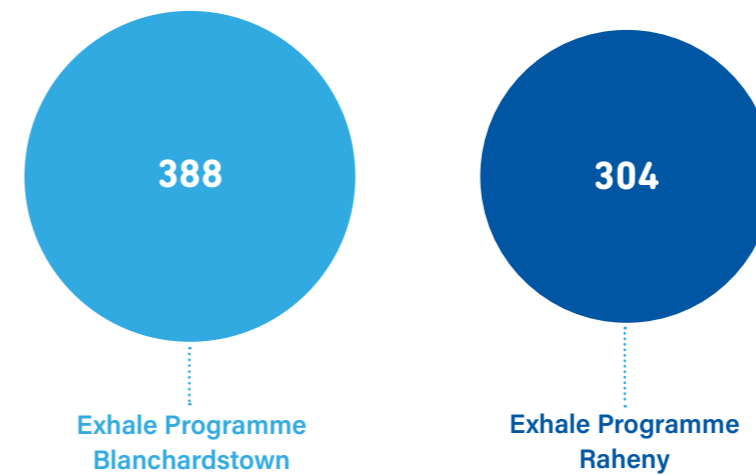
● HDC Blanchardstown ● HDC Raheny



Specialist Palliative Day Care has been described in the literature as "bridging the interface between homecare services and Specialist Palliative Care In-Patient Units, so that patients can be referred smoothly from one to the other as required" (Fisher and McDaid, 1996).

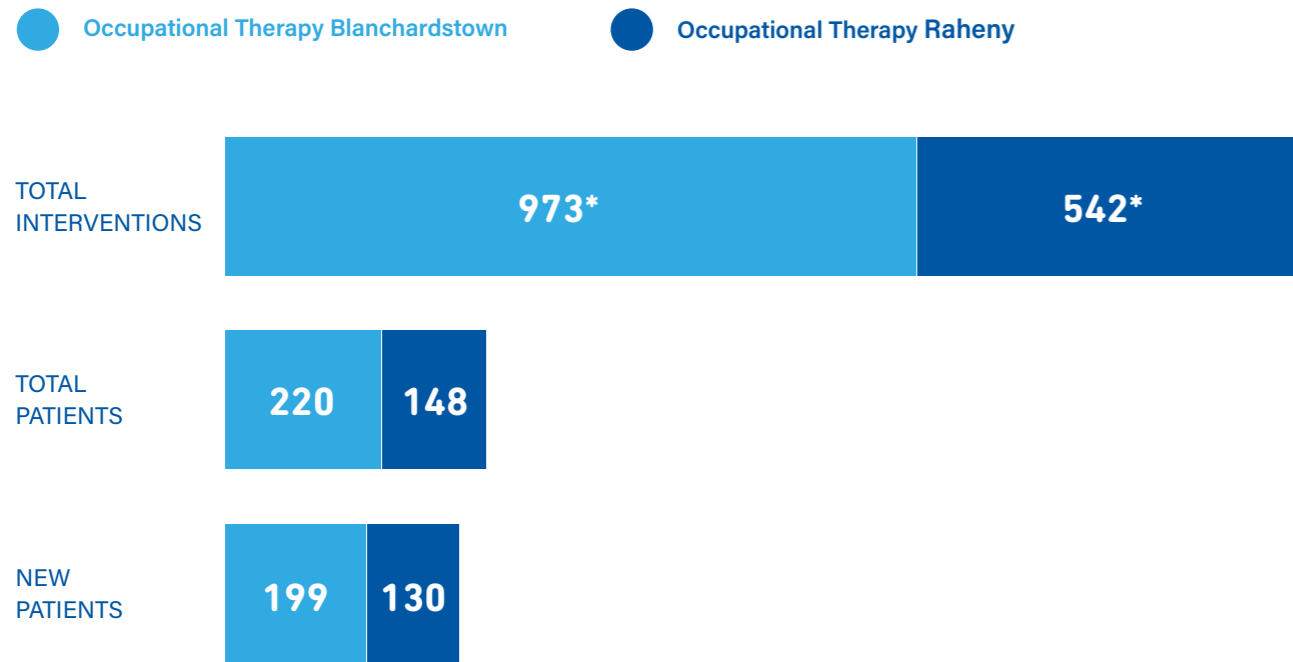
The Hospice Day Care service provides symptom control and clinical surveillance, promotes independence for patients and enhances quality of life. Hospice Day Care is open three days a week in Raheny and two days a week in Blanchardstown. During each visit, patients meet with members of the multidisciplinary team who provide support for physical, psychological, spiritual and social needs through symptom management, future care planning and practical advice.

Exhale Programme Activity 2019



There was a significant increase in numbers of patients accessing the Exhale programme. Read more about this programme on page 50 (Excellence section).

Occupational Therapy Department Activity 2019



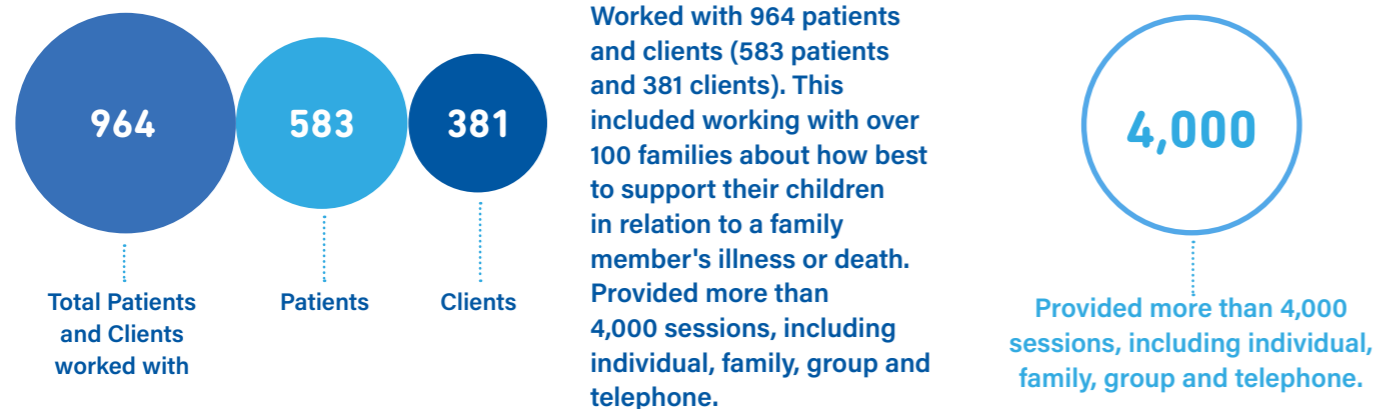
Interventions made up of the following:

- Assessment for hours out/discharge
- Functional transfers
- Personal/domestic ADLs
- Seating and pressure relief

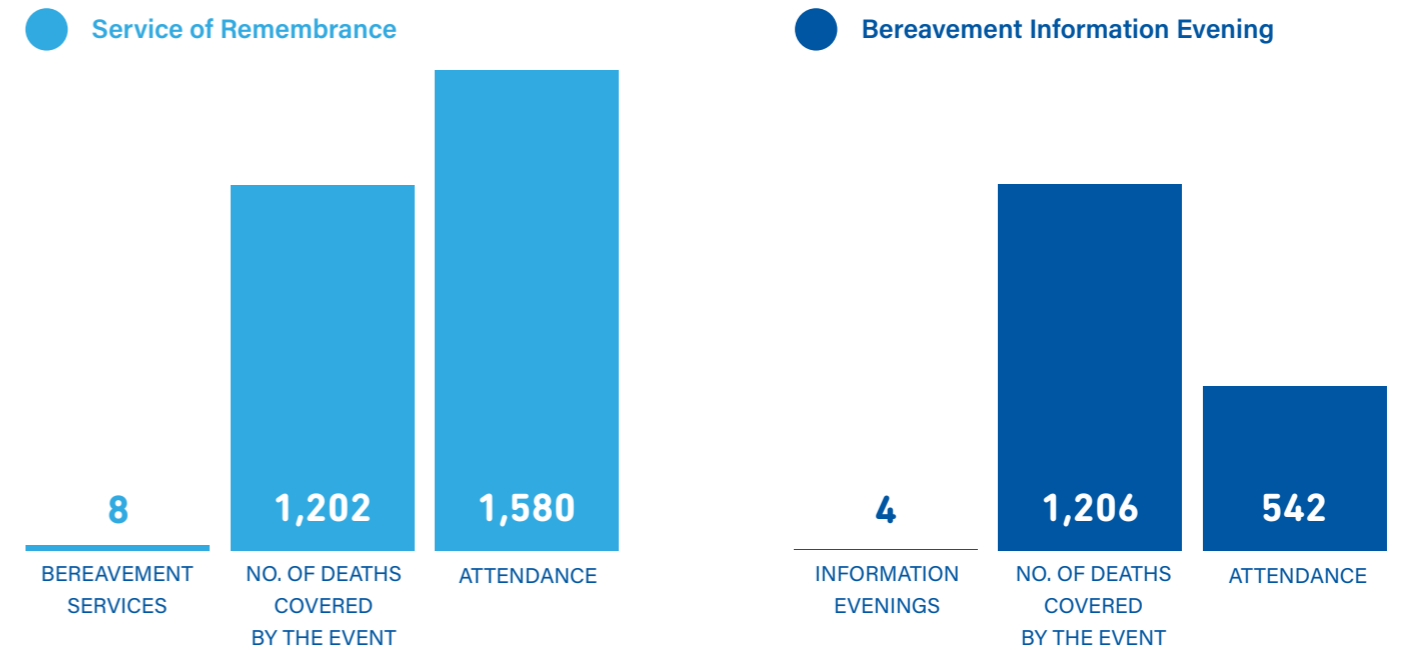
Seating and Pressure Care continue to be the priority intervention in Occupational Therapy for our patients in the In-Patient unit. 45% of direct time with patients was spent addressing seating and pressure care needs in 2019.

Occupational Therapy (OT) aims to help patients achieve their optimum independence in activities that are important to them. In 2018 the most frequent OT intervention was for seating and pressure relief. Providing appropriate chairs and wheelchairs allows for fulfilment of goals including sitting out of bed, engagement in usual daily activities, accessing the hospice gardens and facilities. Pressure care management in seating is a high priority for occupational therapy, and providing the appropriate type of pressure relieving cushion is essential.

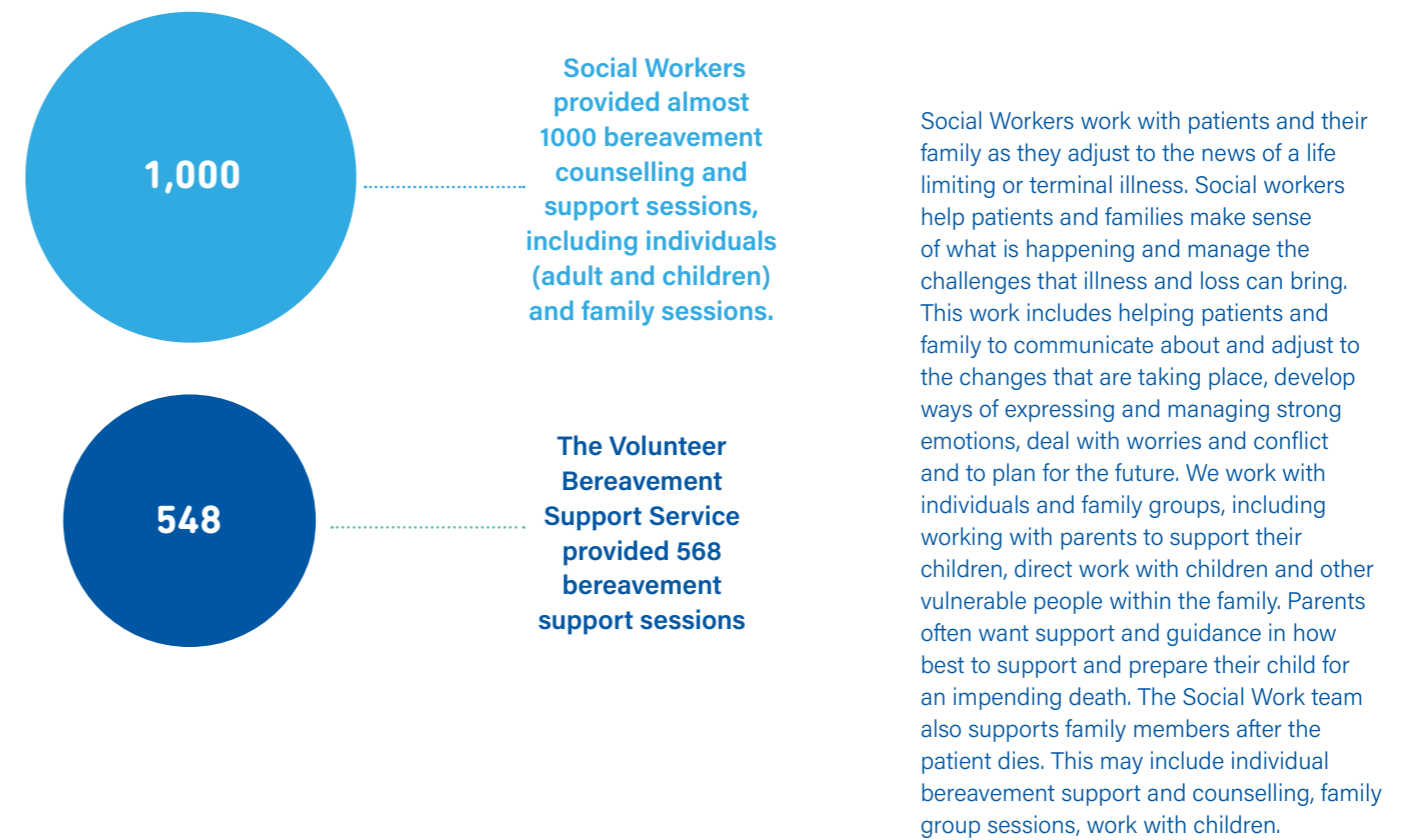
Social Work

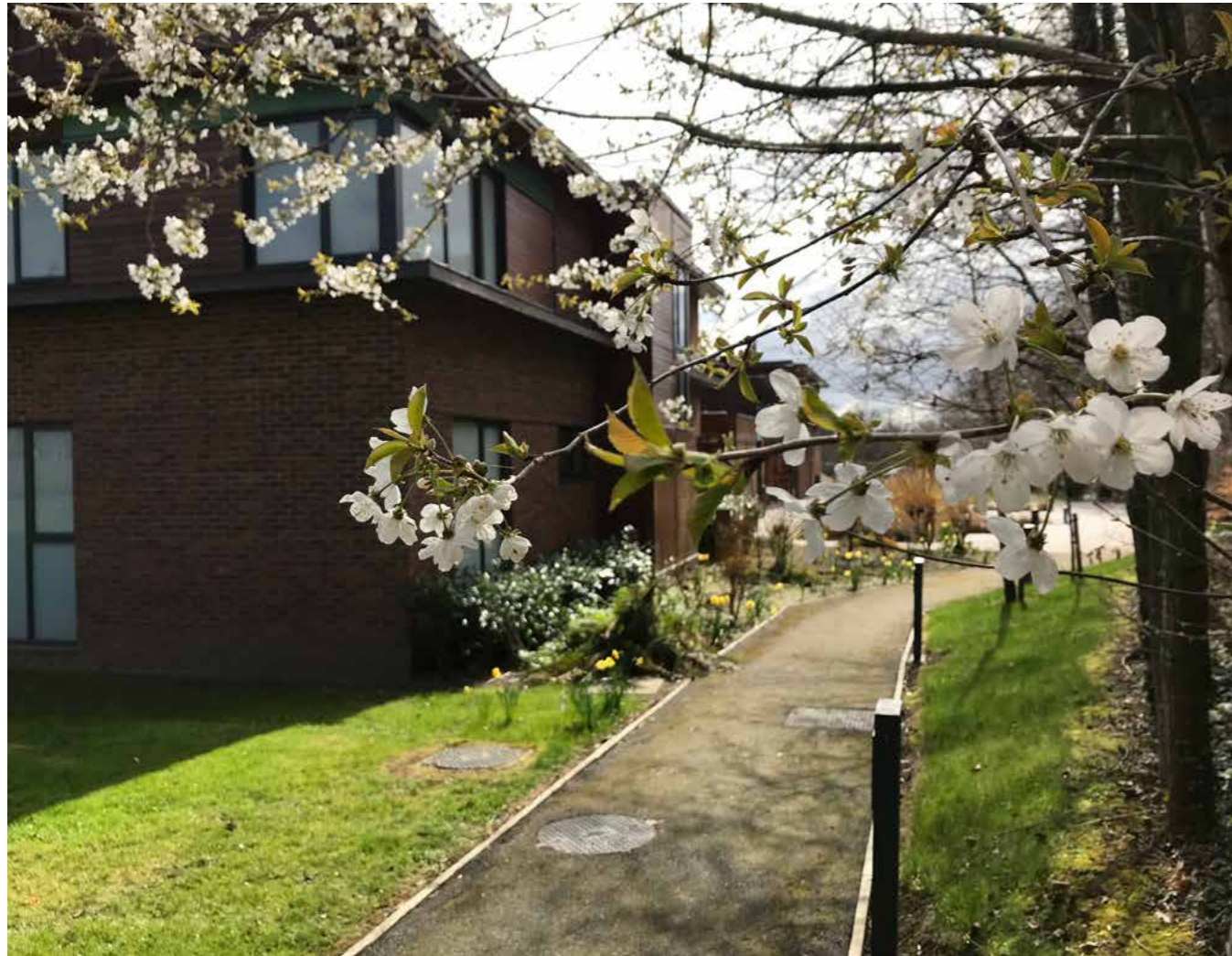


Bereavement Services



In 2019, the social work department offered a service to patients and clients (family members), which was over sessions. We worked with families about how best to support their children in relation to a family members illness or death.





“I am on a journey from one life to the next and I need a place where I am looked after and loved and above all, where I can be myself.”

Quote from a hospice patient

Activities and Achievements 2019



The staff and volunteers of St Francis Hospice Dublin cherish our six core values:

Dignity

Respect

Compassion

Collaboration

Excellence

Kindness

We believe that adhering to our core values will enable us to provide the highest level of care possible to our patients and their families, while remaining strong and unified as an organisation. Our core values carry influences from our founders, the Daughters of Charity of St Vincent de Paul, as well as from the hospice/palliative care philosophy, the voluntary sector, and our community of North Dublin and surrounding counties. Each one of our colleagues, through their professionalism, kindness and care, contributes to the values-led culture of St Francis Hospice Dublin.

In 2019, we honoured and celebrated our core values as part of our 30th anniversary activities. A core values workshop was developed and facilitated a number of times during the year, with a view to continuing in 2020. Staff members and volunteers who attended gained a deeper understanding and appreciation of our core values. We closed our 30th anniversary celebrations with a formal launch of our six core values and a new leaflet, *Our Values in Action*, which is aimed at communicating our values and their significance to our hospice community, including staff, volunteers, patients, families and supporters.

Our activities and achievements for 2019 are now presented through the lens of those values. Our hope is that this part of the report will give you a sense of who we are as an organisation, how we do things, and how we help the people under our care through some very difficult and often complex times in their lives and the lives of their families.

Dignity

“You matter because you are you, and you matter to the end of your life.”

— Dame Cicely Saunders

Empower Programme

We aim to provide person-centred care across all our services. One example is that when our occupational therapists carry out their assessments and devise treatment plans, they ensure that each patient chooses his or her own goals. This respects each person’s dignity and enables them to satisfy their spiritual, emotion and physical needs in a way that is comfortable for them.

The Empower programme is a 4-week group in which patients learn about practical strategies for managing

stress. Goal-setting is guided by the Canadian Occupational Performance Measure, which was selected because it encourages patient autonomy.

Outcomes reported by patients included re-engaging in socialising with friends, going to the cinema, reading, and other much-loved activities. Patients have also reported improvement in sleep and concentration.



Mary’s Story

Mary (not her real name) wished to begin crocheting again. She had all the materials at home and was highly skilled, but had lost interest and motivation due to the impact of stress and anxiety. Over the course of the Empower programme, Mary began to crochet hats and mittens. Christmas was approaching, and Mary began receiving orders from family members and friends, and she was able to sell her creations and raise a bit of money. By respecting Mary’s crocheting as something intrinsically meaningful to her, and through the intervention of the Empower programme, the occupational therapy team provided Mary with a sense of dignity and a productive role

that gave her a sense of self-worth within her family. Mary planned to continue her “small business” into the future.



The family of the late ‘M’ would like to thank you , the staff for the love and care you tended ‘M’ in his final days. We will always remember your kindness to him and indeed to all our family. He was always treated with such dignity and love that we will always be indebted to you. Thank you for easing ‘M’ s suffering and giving us good memories of the final days of being in his company ...

— Words of a grateful family



Inclusiveness

The dignity and respect of all people is a central tenet of our beliefs in St Francis Hospice. This year, we worked with LGBT Ireland to train and prepare a number of staff to act as champions within the organisation in relation to LGBTQ rights. Education workshops were also offered to all staff and volunteers.



Complementary Therapy

Complementary therapies are used alongside conventional medical, nursing and allied health professional treatments, to help ease symptoms, promote relaxation, ease discomfort, anxiety and stress. Complementary therapies can range from self-care approaches such as relaxation to physical treatments like massage and reflexology. Aromatherapy is used in a clinical context in St Francis Hospice.

Treatments available include; Holistic massage,

Aromatherapy massage, Reflexology, Reflexology Lymph Drainage, Indian head massage and M-Technique. The complementary team consists of staff and volunteers who are experienced in treating patients with various illnesses. A new development during the year was the introduction of Reflexology Lymph Drainage, which is incorporated into reflexology treatments to assist in the reduction of lymphoedema.



Respect

“A single sunbeam is enough to drive away many shadows.”

— St Francis of Assisi

Chaplaincy

Chaplaincy often goes beyond words. ‘Presence’ is what touches people in ways that cannot be measured. In addition to supporting people within our services, we facilitate patients and family members to have access to spiritual care by members of their own faith tradition or worldwide view on request and where possible.



PACES (Pacing and Coping Enhancing Support)

Our Hospice Day Care nurses and social workers teamed up to introduce a 4-session patient psychoeducational support group. The aim was to help patients reduce their stress levels by learning advanced coping strategies. PACES groups ran 5 times during the year, across both hospice sites.



Patient/Family Feedback

Comment cards are widely available on both hospice sites, and feedback is always welcome to help with future service development and improvement. A comment card was trialled this year for Community Palliative Care patients and families, and it will be fully introduced next year.

Annual Day Care Art Exhibition

Kathryn Thomas was our special guest at the annual Day Care Art Exhibition. This is an opportunity for patients, their families and loved ones, and hospice staff and volunteers, to view the wonderful artwork created by our Hospice Day Care patients. The art studios in both hospices, and the volunteer artists who support the patients, provide a much-appreciated creative outlet for people experiencing life-limiting illness.



“If you only believed in the sun you would never get through the night, but in St Francis Hospice, the sun is always shining, thanks to the care, professionalism and empathy shown by all!”

— A patient’s relative



VOLUNTEER LONG SERVICE AWARDS

5 years – 21 volunteers
10 years – 12 volunteers
15 years – 3 volunteers
20 years – 1 Volunteers
30 years - 2 volunteers

26 new volunteers were recruited in 2019.

2 new roles were created in Blanchardstown:

gardener and nursing administration support



Compassion

“The care, compassion and support you showed us and our Dad, during his two weeks with you, the last days of his life, will always be remembered by us.”

— Family member of a patient

“Compassion naturally creates a positive atmosphere, and as a result you feel peaceful and content.”

— Dalai Lama



Bereavement Information Evenings



A number of Bereavement Information Evenings took place at both hospices throughout the year. A social worker delivers a talk about grief and how to cope. There is then an opportunity for bereaved relatives to talk informally with a social worker or bereavement volunteer to find out what supports are available to them.

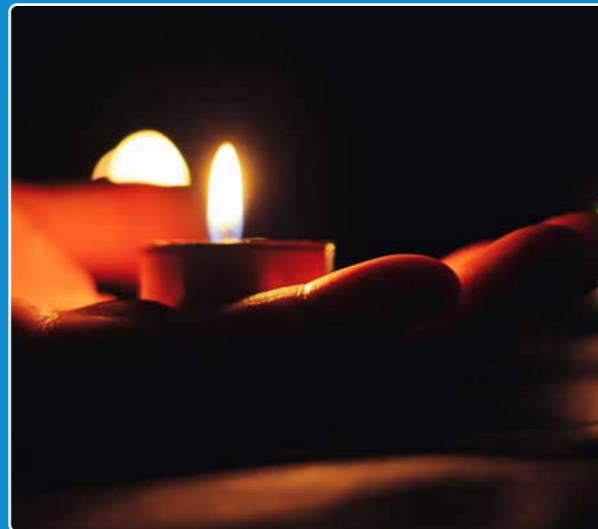
Bereaved Parents Group



Every year, we run a two-session psycho-educational group for parents who are supporting bereaved children when the other parent has died. This year, ten bereaved parents, who were supporting 25 children between them, attended the group.

Services of Remembrance

Regular services of remembrance offer a sacred space for family and friends to gather and remember, to give thanks, and pray for a loved one who has died, with staff members and volunteers who supported them during the person's final days or weeks of life. A member of the social work team delivers a talk on the early stages of grief, to help people understand what they and their family members are experiencing.



Tree of Life Ceremonies

The Tree of Life Ceremonies provide an opportunity in the dark of a December evening to gather, reflect, and remember loved ones who have died. Reflective readings and carols culminate with the lighting of our Christmas tree as 'Silent Night' rings out in the night's air. With the advances in technology, family members at home and abroad can join in via live streaming in Facebook.



Collaboration

“Alone we can do so little;
together we can do so much.”

— Helen Keller

“We should assist the people we serve in every way,
and do it both by ourselves and by enlisting the help
of others.”

— St Vincent de Paul



Interdisciplinary and Patient-Centred Care

The holistic care we deliver relies upon collaboration between all clinical, non-clinical and contract staff, volunteers, patients, their family members and loved ones. This teamwork is something we value highly in St Francis Hospice, and we believe our patients and their family members benefit from the high level of care that results.



Committees

Our value of collaboration is evident in the interdisciplinary and interdepartmental representation on committees working on a range of issues, including:

- Medication management
- Children First implementation
- Falls prevention
- Pressure ulcers
- Infection control
- Core values



Collaboration with other Agencies



As an organisation, we work in collaboration with a number of agencies regarding both funding and service delivery. Some examples are:

- HSE CHO 9, which partially funds our services
- Tusla, which provides a grant toward the provision of bereavement counselling services to children and their families
- Dublin Northside Bereavement Network, which facilitated a bereavement workshop in St Francis Hospice for healthcare professionals from a variety of agencies
- Irish Childhood Bereavement Network, which held a networking and educational workshop at St Francis Hospice
- Nursing homes – following on from the ECHO education programme on 2018, our staff delivered education sessions on site in a number of nursing homes in our catchment area in order to improve nurses’ knowledge and competency in caring for those with life limiting illnesses
- Oncology services, which delivered education to some of our nursing staff about the complex needs of patients receiving immunotherapy

PEER Programme

Our Occupational Therapy and Physiotherapy departments collaborated to develop the PEER (Palliative Enablement Exercise Rehabilitation) Programme for patients in the community. It aims to improve people’s quality of life and functional independence. The programme consists of individual sessions, group exercise, and education sessions over a 6-week period. It is designed to help people with

a range of conditions including: heart failure, and neurological conditions and patients at risk of falls. The programme helps people maintain and improve their strength and fitness, gives them strategies to managed symptoms such as fatigue, and provides additional comfort and safety for daily activities by providing assistive equipment and seating reviews.



Excellence

The Investing in Volunteers standard has provided a benchmark against which we can measure our performance, identify gaps, further develop our work, and promote the immense value of our volunteers. This award is in recognition to the commitment and dedication of the 300+ volunteers we have in St Francis Hospice Dublin.

Investing in Volunteers



We were awarded the Investing in Volunteers Award. Investing in Volunteers is the UK & Ireland's quality standard for best practice in volunteer management. It aims to improve the quality of the volunteering experience and demonstrates that organisations value the enormous contribution made by their volunteers.

Slaintecare Integration Fund

St Francis Hospice Dublin was the only hospice in the country to succeed in an application to the Slaintecare Integration Fund. The proposal, a joint one between the physiotherapy department of the hospice and the occupational therapy department of the Mater Hospital (MMUH), aims to increase rehabilitative services for patients under the care of specialist palliative care services.

Induction Booklet for Nurses

An induction booklet for new nurses was developed by the education and nurse practice development team. Based on the Palliative Care Competence Framework (HSE, 2014), the booklet enhances collaboration between new nurses and their line managers and perceptrs within the team, while setting out clear aims and objectives for each stage of induction in the first 11 months of employment.



Reducing risk of falls

The introduction of a wireless call bell system in St Anne's In-Patient Unit, Raheny, has greatly reduced the risk of falls.



“Excellence is doing ordinary things extraordinarily well.” – John W. Gardiner



ISBAR Communication Tool

As a quality improvement initiative, we are adopting the ISBAR (Identify – Situation – Background – Assessment – Recommendation) technique as a way

to plan and structure communication. It can be used in written and spoken communication.

I	Identify Identify self, name, position, location and other personnel involved. Name, title, role, location
S	Situation State problem What is the problem? What is the patient's condition? What is the patient's history? What is the patient's current status?
B	Background What is the patient's background? What is the patient's medical history? What is the patient's social history? What is the patient's family history?
A	Assessment What is the patient's assessment? What is the patient's physical examination? What is the patient's laboratory and imaging results?
R	Recommendation What is the patient's recommendation? What is the patient's treatment plan? What is the patient's follow-up plan?

Charity Impact Award

St Francis Hospice was named the Charity of the Year (Large Organisation category) in the Charity Impact Awards, run by The Wheel. The competition was decided partially by social media voting and partially by a judging panel. Our entry was a video featuring one patient's experience of our Exhale programme, a specialist physiotherapy intervention to help people who are experiencing

breathlessness. The patient described his initial fear and uncertainty about accessing the programme, followed by his experience of kindness and care during his sessions at the hospice, leading to a life-changing improvement in his quality of life.

The Exhale programme was expanded during the year, thanks to philanthropic funding. The programme

accepted referrals from acute hospitals, primary care centres and general practitioners in our catchment area, and group classes were held four times per week. It is highly beneficial for St Francis Hospice to access patients this way earlier in their palliative care journey.



Kindness

“Kindness is not an act, it is an attitude.”

— Sr Stanislaus Kennedy

CORPORATE VOLUNTEERING

A team from Guidewire planted over 200 tulip and Daffodil bulbs in the garden in Blanchardstown. Throughout 2019 we were fortunate to have the support 10 corporate groups who did different tasks within the grounds of the Hospice.



Family Involvement and Care



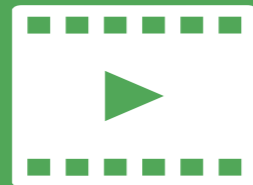
Volunteer Gardeners

A new role, for volunteer gardeners in Blanchardstown, was created this year. Two volunteers filled the posts.



Clinical Placements Video

Each year, we facilitate at least 50 students from a variety of disciplines on clinical placement. Realising that for many of these students, this placement is their first encounter with palliative care, we created a video designed to help reassure and inform the students about what to expect when working within a hospice service..



“Words cannot express how grateful we are for the wonderful care, kindness and attention that you showed our mum and us, during her stay with you. We could see from the first day, that her time there would be calm, caring and even joyous. We were always made feel welcome, included and special, all of which helped us through those difficult weeks.”

— Family Member



Volunteer Bereavement Support Service (VBSS)

The VBSS is a confidential listening service that provides one-to-one bereavement support to individuals. The 15 volunteers are specially trained and are supervised by the Social Work team. Until this year, the VBSS operated mainly in Raheny, with only limited availability in Blanchardstown.

Thanks to a grant from the Pobal Dormant Fund Account, we were able to employ a half time social worker and

administrator to recruit and train a new cohort of bereavement volunteers in our Blanchardstown hospice. Twelve volunteers began training this year and are due to complete the programme next May.



We focussed on our core values, which bridge the past, present and future

Dignity • Respect • Compassion • Collaboration • Excellence • Kindness



Excellence
 "Excellence is doing ordinary things extraordinarily well."
 - John W. Gardner

We practice the value of excellence by:

- Striving to provide the highest standard of holistic, evidence based, person-centred care
- Engaging in continuous professional development
- Communicating openly and effectively with patients, families and colleagues as part of best practice
- Ensuring quality improvement by engaging in research, audit, evaluation and accreditation
- Seeking and responding to feedback

"As for your conduct with the sick, may you never take the attitude of merely getting the task done. You must show them affection, serving them from the heart, inquiring of them what they might need, speaking to them gently and compassionately."
 - St Louise de Marillac

Kindness
 "Kindness is not an act, it is an attitude."
 - St Stanislaus Kenelly

We practice the value of kindness by:

- Creating a warm, welcoming and friendly atmosphere
- Being sensitive, caring and considerate to all
- Greeting people with a smile and a kind word
- Taking time to listen, help and reassure
- Acknowledging and supporting our colleagues

"Assist them with great care and kindness."
 - St Vincent de Paul

Dignity
 "You matter because you are you, and you matter to the end of your life."
 - Dame Cicely Saunders

We practice the value of dignity by:

- Recognising the inherent value of each human being
- Maintaining confidentiality and respecting the privacy of each individual
- Supporting people to live the best quality of life possible
- Providing a comfortable, homely environment to enhance care
- Fostering reasonable governance with sound structures and ethical practices

"Above all, be very gentle and courteous toward the people you serve... love them tenderly and respect them deeply."
 - St Louise de Marillac

Respect
 "Respect for ourselves guides our morals; respect for others guides our manners."
 - Laurence Sterne

We practice the value of respect by:

- Honouring the uniqueness and value of each person
- Ensuring equitable access to our services
- Providing the highest standard of care within a safe and friendly environment
- Listening to and acknowledging what is important to patients and families
- Listening to our colleagues and valuing the contributions of each individual

"Act in such a way that gentleness and cordiality always appear in your words and expressions... striving never to forget the respect we should have for one another."
 - St Vincent de Paul

Compassion
 "Compassion naturally creates a positive atmosphere, and as a result you feel peaceful and content."
 - Dalai Lama

We practice the value of compassion by:

- Being present in a gentle and understanding way
- Practicing empathy, being mindful of other people's needs and offering help whenever possible
- Balancing compassion for people under our care with compassion for our colleagues and teams
- Supporting colleagues with work-life balance through daily interactions, management decisions and policy
- Practicing self-care, recognising that compassion starts within

"You should nurse [them] with great charity and gentleness so that they may see you are going to their assistance with a heart filled with compassion for them."
 - St Vincent de Paul

Collaboration
 "Alone we can do so little; together we can do so much."
 - Helen Keller

We practice the value of collaboration by:

- Recognising and valuing the diverse backgrounds, cultures, life experiences, skills and talents of all
- Building teams to work together towards shared goals
- Engaging with external agencies and healthcare providers to ensure ongoing development and continuity of services
- Practising an interdisciplinary model of care
- Actively listening and clearly communicating with all our colleagues, patients, families and supporters

"We should assist the people we serve in every way, and do it both by ourselves and by enlisting the help of others."
 - St Vincent de Paul

St. Francis Hospice Dublin
 (Under the Care of the Daughters of Charity)

Dignity | Respect | Compassion | Collaboration | Excellence | Kindness

Our Values in Action

Core Values
 Values are central beliefs that act as guiding stars, or signposts, to show us the way or help us make decisions. Just as all individuals hold a unique set of values, so do all organisations.
 Core values are the most basic, fundamental beliefs within any organisation; they act as cultural cornerstones, supporting the organisation and its people through times of change and challenge.
 We show our values to the world through our actions. This leaflet offers an insight into our values in action in St Francis Hospice Dublin.
 In St Francis Hospice Dublin, the term "colleagues" includes all who provide care or services within the organisation.

Dignity | Respect | Compassion | Collaboration | Excellence | Kindness

St. Francis Hospice Dublin
 History House, Dublin Road, Dublin 22
 Tel: 01 452 7350
 Email: info@sfh.ie
 Website: www.sfh.ie



Celebrating 30 years



St. Francis Hospice Dublin

We honoured the past

- We created an audio archive of some founding members telling the story of the hospice's foundation from their perspective
- Clips from these interviews were used to create two radio programmes for broadcast
- We created a visual archive in the form of pop-up stands that were displayed in the various libraries in North Dublin during the year
- We took a full set of photos of both our hospices as an archival project



We Celebrated the Present

- We marked St Francis of Assisi's feast day with a peaceful reflection for staff and volunteers
- A magnolia tree was planted at each hospice to honour all staff and volunteers past, present and future
- Thanks to a great number of generous sponsors, a party was held for staff and volunteers to celebrate together
- A reflective concert called "Deep Peace" was open to anyone who wished to attend



We Strengthened Foundations for our Future

- People baked 30 cakes, cycled 30 kms, walked to work for 30 days, had 30 minutes device-free every day for 30 days, etc. Our 30 for 30 fundraising initiative allowed our supporters to use their creativity to raise funds for St Francis Hospice in any way they chose – as long as it had "30" in the name!
- A highlight of the year was winning the Charity Impact Award 2019. Our entry included a video focussing on our Exhale programme an innovative physiotherapy approach to helping people who experience breathlessness. This recognition affirms our work and raises our profile nationally.





Financial Review

The financial year's performance in financial terms is set out in pages 65 and 66 of the financial statements under the 'Statement of Financial Activities' and Statement of Financial Position. The main features are:

Income

The total income for 2019 amounts to €16.9m (2018: €16.1m).

This represents an increase of €801k on the income in 2018 and arises from:

Donations, Other Fundraising Activities and Legacies

Donations and other fundraising activities increased by €46k during the year, however there was a material shortfall of €680k on the legacy income on 2018 results. Overall the net decrease in fundraising income was €634k.

Charitable Activities

Charitable Activity income amounted to €12.5m (2018: €11.13m) an increase of €1.405m on 2018 income.

This arises from:

Additional recurring core funding of €900k was awarded by the HSE as part of the Service Level Arrangement.

Increase of €300k in capital grants received from the HSE for essential capital projects.

Other grants – new funding of €100k received from the HSE for PEER Programme.

New pay restoration grant received from the HSE €148k

Decrease in conference income €44.6k as a result of no Kaleidoscope Conference held in 2019.

Investment income is in line with previous years.

Other Income

Additional amount of €29.4k income relates to VAT compensation scheme income and an increase in restricted contributions received for salaries.

Expenditure

Total expenditure including depreciation for the year amounted to €17.9m (2018: €17.2m). To deliver services to patients and families in 2019, 66% of total costs (incl. interest) were funded by the Health Service Executive (HSE). This level of contribution, year to year, is crucial and the hospice gratefully acknowledges this core support from the HSE. The balance of costs, amounting to €6m, was raised by the Hospice through fundraising income, other grants and depletion of cash reserves. Total costs increased by €650k on the expenditure in 2018 and the reasons for this were:

Raising Funds

There is an increase of €35k in the cost of raising funds. This increase relates to the implementation of pay awards and also reflects the further investment in fundraising activity. This is in line with the Board of Directors' plan to increase fundraising capacity. Staff costs amount to €256k (2018: €249k) and direct fundraising costs €389k (2018: €361k).

Charitable Activities

Total expenditure on charitable activities including depreciation amounted to €17.2m (2018: €16.6m) an increase of €614k on 2018 costs.

Support Costs - staff costs excluding fundraising at St. Francis Hospice Dublin amounted to €12m (2018: €11.5m) an increase of €583k on 2018 payroll. This increase in costs relates to the public service pay awards that were implemented during the year. St Francis Hospice's alignment with the HSE pay scales is long established and the Board of Directors recognizes that the payment of the pay awards is vital to secure appropriately skilled staff to deliver the service.

Activities undertaken directly – The other costs amounted to €5.18m which are in line with 2018 (2018: €5.15m).

Governance and administration costs amounted to €152k (2018 €156k)

▪ **A deficit of expenditure over income of €974,770. This is a decrease of €151,831 on the deficit of €1,126,601 reported in 2018.**

Securing and retaining reliable sources of funding remains a key challenge for the Board of Directors of St Francis Hospice. Competition for donations is strong. St Francis Hospice is currently not fully funded for the public sector pay restoration and pay progression by the HSE. St Francis Hospice has carried this additional cost 2016-2019 and this is reflected in the depletion of the cash reserves. Discussion with the HSE will continue regarding the need to secure full funding for current and future pay awards. The Board of Directors and staff of St Francis Hospice will continue to develop strong relationships with supporters and donors to raise funds for patient care.

Internal Audit

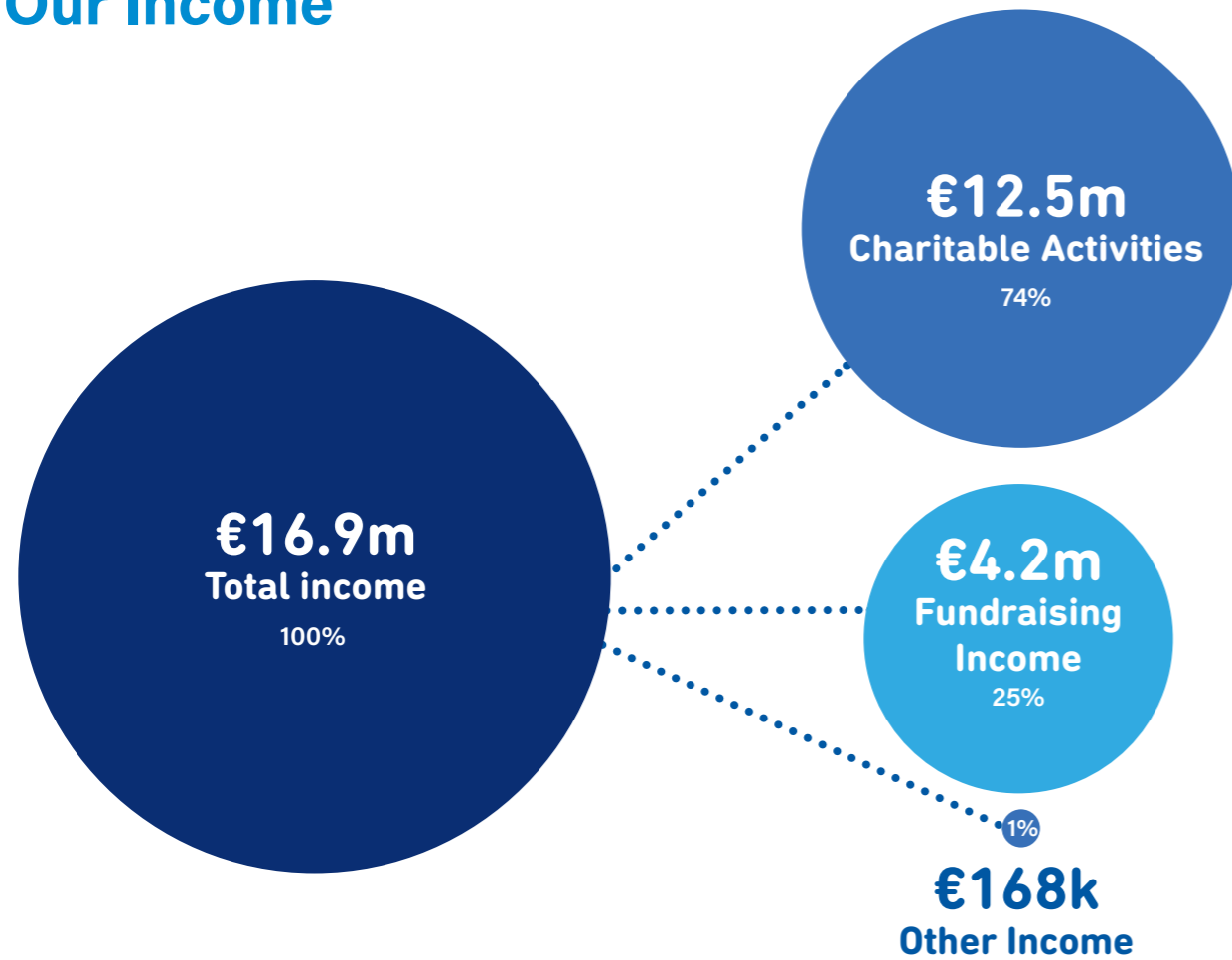
The Finance Audit Committee continue to focus on assisting the Board in fulfilling its duties by providing an independent and objective review of the financial status and performance.

The following internal audits were carried out during 2019:

Date	Audit Area	Audit By
March 2019	Public sector pay restoration	HSE Internal Audit
July 2019	Compliance with HSE SLA Part 1	Mazars
September 2019	Compliance with HSE SLA	HSE Internal Audit

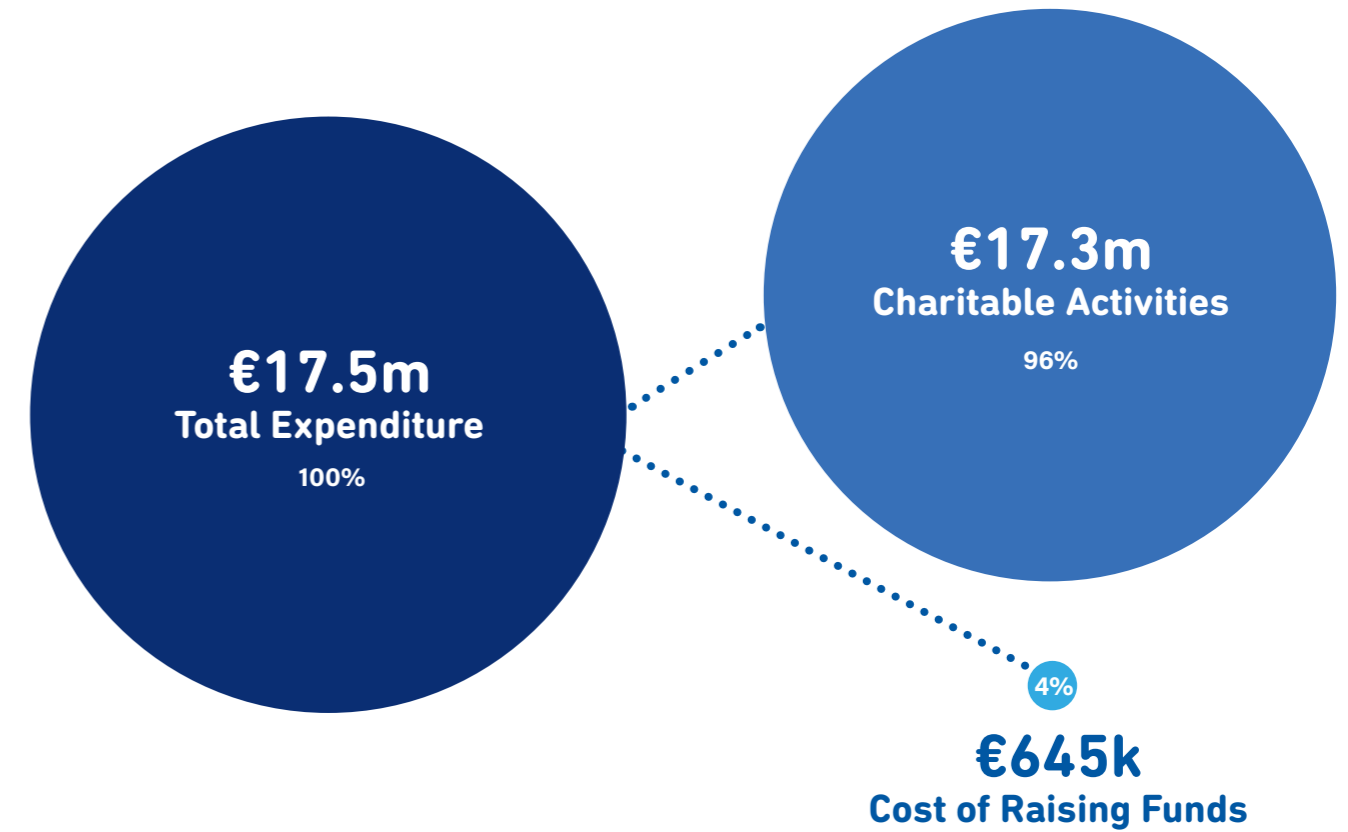
The improvements recommended by the Internal Auditors were implemented during 2019.

Our Income



25% of our total income was donated by our friends and supporters from our local communities and we are deeply appreciative of their continuing support.

Our Expenditure



For every €100 of expenditure incurred by the hospice, €96 was spent on our charitable purpose.

Future Plans

Strategic Aim	Areas of Focus	Plan 2020
To continue to provide accessible, high level specialist palliative care at no charge to patients and families	Governance	Complete the compliance with the Governance Code to meet the requirements of the Charities Regulator.
		Complete the development of the SFHD Strategic Plan 2025.
	Finance	Continue to collaborate with the other hospices to present a strong business case to address the current underfunding of core costs, pay restoration and pay progression.
		Build up the cash reserves of the hospice for future contingencies in accordance with the Reserves Policy.
		Where possible, seek additional funding for annual capital expenditure budget which is currently inadequate.
	Communications	Recruit the Communications Manager to work with the CEO on development of a marketing and communications strategy which will raise the profile and increase the brand awareness of the hospice and support the fundraising plans.
	Human Resources	Plan the specification, procurement and implementation of a new HR Integrated Management Information System to support the effective deployment of staff at St Francis Hospice Dublin and strengthen our HR compliance environment. Propose and agree with the HSE new development posts in the following areas, 5th Palliative Medicine Consultant, Community Palliative Care Clinical Nurse Specialists, Pharmacists and Advanced Nurse Practitioner.
	General Services Management	Procure and install through a tendering process two standby generators for both sites which will ensure constant electricity supply in the event of an external failure.
	Leverage technology to optimise care.	Procure and install new telephone and paging system to replace outdated system.
		Deliver all education programmes where possible through elearning methods.

Strategic Aim	Plan 2020
To improve access to specialist palliative care services for patients and families.	Achieve our KPIs and targets as set out in our service level arrangement with the HSE.

Strategic Aim	Plan 2020
Plan for the redevelopment of St Francis Hospice Raheny	Achieve our KPIs and targets as set out in our service level arrangement with the HSE.
	Further consultation with architects and planners on viability of site and design.

DIRECTORS' RESPONSIBILITIES STATEMENT FOR YEAR ENDED 31 DECEMBER 2019

The directors are responsible for preparing the directors' report and the financial statements in accordance with the Companies Act 2014.

Irish company law requires the directors to prepare financial statements for each financial year. Under the law, the directors have elected to prepare the financial statements in accordance with FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland ("relevant financial reporting framework"). Under company law, the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the Hospice as at the financial year end date and of the surplus or deficit of the Hospice for the financial year and otherwise comply with the Companies Act 2014.

In preparing those financial statements, the directors are required to:

- select suitable accounting policies for the Hospice Financial Statements and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether the financial statements have been prepared in accordance with the applicable accounting standards, identify those standards, and note the effect and the reasons for any material departure from those standards; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the Hospice will continue in business.

The directors are responsible for ensuring that the Hospice keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the Hospice, enable at any time the assets, liabilities, financial position and surplus or deficit of the Hospice to be determined with reasonable accuracy, enable them to ensure that the financial statements and directors' report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the Hospice and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities. The directors are responsible for the maintenance and integrity of the corporate and financial information included on the Hospice's website.

On behalf of the board



Patrick Kenny
Director



Dermot McCarthy
Director

INDEPENDENT AUDITORS' REPORT TO THE MEMBERS OF ST. FRANCIS HOSPICE DUBLIN

Report on the audit of financial statements

Opinion on the financial statements of St Francis Hospice Dublin (the 'company')

In our opinion the financial statements:

give a true and fair view of the assets, liabilities and financial position of the company as at 31 December 2019 and of its incoming resources and application of resources; including its income and expenditure for the financial year then ended; and

have been properly prepared in accordance with the relevant financial reporting framework and, in particular, with the requirements of the Companies Act 2014.

The financial statements we have audited comprise:

- the Statement of Financial Activities;
- the Statement of Financial Position;
- the Cash Flow Statement;
- and the related notes 1 to 30, including a summary of significant accounting policies as set out in note 1.

The relevant financial reporting framework that has been applied in is the Companies Act 2014 and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" issued by the Financial Reporting Council ("the relevant financial reporting framework"),

Basis for opinion

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

We are independent of the company in accordance with the ethical requirements that are relevant to our audit of the financial statements in Ireland, including the Ethical Standard issued by the Irish Auditing and Accounting Supervisory Authority (Ireland) issued by the Irish Auditing & Accounting supervisory authority (IAASA), and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

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

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

Other information

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

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

We have nothing to report in this regard.

Responsibilities of directors

As explained more fully in the Directors' Responsibilities Statement, the directors are responsible for the preparation

of the financial statements and for being satisfied that they give a true and fair view and otherwise comply with the Companies Act 2014, and for such internal control as the directors 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 directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the 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 (Ireland) 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 for the audit of the financial statements is located on the IAASA's website at: [www.iaasa.ie/Publications/Auditing-standards/International-Standards-on-Auditing-for-use-in-Ire/International-Standards-on-Auditing-\(Ireland\)/ISA-700-\(Ireland\)](http://www.iaasa.ie/Publications/Auditing-standards/International-Standards-on-Auditing-for-use-in-Ire/International-Standards-on-Auditing-(Ireland)/ISA-700-(Ireland)). This description forms part of our auditor's report.

The purpose of our audit work and whom we owe our responsibilities

This report is made solely to the company's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the 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 company and the company's members as a body, for our audit work, for this report/ or for the opinions we have formed.

Report on other legal and regulatory requirements

Opinion on other matters prescribed by the Companies Act 2014

Based solely on the work undertaken in the course of the audit, we report that:

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion the accounting records of the company were sufficient to permit the financial statements to be readily and properly audited.
- The financial statements are in agreement with the accounting records,
- In our opinion the information given in the directors' report is consistent with the financial statements and the directors' report has been prepared in accordance with the Companies Act 2014.

Matters on which we are required to report by exception

Based on the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the directors' report.

We have nothing to report in respect of the provisions in the Companies Act 2014 which require us to report to you if, in our opinion, the disclosures of directors' remuneration and transactions specified by law are not made.



Ian Lawlor (Statutory Auditor)

for and on behalf of JPA Brenson Lawlor
Chartered Accountants
Statutory Auditor
Argyle Square
Morehampton Road
Donnybrook
Dublin 4
D04 W9W7

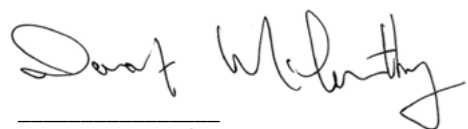
STATEMENT OF FINANCIAL ACTIVITIES FOR YEAR ENDED 31 DECEMBER 2019

		2019 Restricted Funds	2019 Unrestricted Funds	2019 Total	2018 Restricted Funds	2018 Unrestricted Funds	2018 Total
	Notes	€	€	€	€	€	€
Income from:							
Donations and legacies	3	299,168	2,371,762	2,670,930	496,845	2,270,301	2,767,146
Charitable activities	4	12,535,420	3,589	12,539,009	11,068,120	65,674	11,133,794
Other activities	5	46,053	1,498,759	1,544,812	-	2,082,802	2,082,802
Investment income	6	-	37,500	37,500	-	37,200	37,200
Other income	7	67,832	62,699	130,531	65,219	35,869	101,088
Total		12,948,473	3,974,309	16,922,782	11,630,184	4,491,846	16,122,030
Expenditure on:							
Raising funds	8	-	645,450	645,450	-	610,789	610,789
Charitable activities	9	12,222,951	5,029,151	17,252,102	11,392,004	5,245,838	16,637,842
Total		12,222,951	5,674,601	17,897,552	11,392,004	5,856,627	17,248,631
Net Expenditure	12	725,522	(1,700,292)	(974,770)	238,179	(1,364,781)	(1,126,601)
Taxation	13	-	-	-	-	-	-
Transfer to restricted reserve from unrestricted reserve		(558,679)	558,679	-	(464,140)	464,140	-
Net expenditure For the financial year		166,843	(1,114,613)	(974,770)	(225,961)	(900,641)	(1,126,601)
Reconciliation of funds							
Total funds brought forward	21	1,614,369	25,157,951	26,772,320	1,840,329	26,058,592	27,898,921
Total funds carried forward	21	1,781,212	24,016,338	25,797,550	1,614,368	25,157,951	26,772,320

STATEMENT OF FINANCIAL POSITION FOR YEAR ENDED 31 DECEMBER 2019

	Notes	2019 €	2018 €
Fixed assets			
Tangible fixed assets	14	30,402,552	31,165,667
Financial fixed assets	15	100	100
		<u>30,402,652</u>	<u>31,165,767</u>
Current Assets			
Debtors	16	249,303	266,907
Cash at bank and in hand		1,062,382	1,767,967
		<u>1,311,685</u>	<u>2,034,874</u>
Creditors: amounts falling due within One year	17	<u>(2,001,938)</u>	<u>(1,939,756)</u>
Net current assets		<u>(690,253)</u>	95,118
Total assets less current liabilities		<u>29,712,399</u>	<u>31,260,885</u>
Creditors: amounts falling due after More than one year	18	<u>(3,914,849)</u>	<u>(4,488,565)</u>
Net Assets		<u>25,797,550</u>	<u>26,772,320</u>
Reserves and funds			
Accumulated funds – restricted	21	1,781,212	1,614,368
Accumulated funds – unrestricted	21	24,016,338	25,157,951
		<u>25,797,550</u>	<u>26,772,320</u>

The financial statements were approved and authorised for issue by the Board of directors on 27th of May 2020 and signed on its behalf by:



Dermot McCarthy
Director



Patrick Kenny
Director

STATEMENT OF CASH FLOWS FOR YEAR ENDED 31 DECEMBER 2019

	Notes	2019 €	2018 €
Cash flows during the financial period			
Net cash generated during the financial period	22	523,428	472,302
Cash flows from investing activities			
Interest paid	22	(180,301)	(201,989)
Payments to acquire tangible fixed assets	14	(495,157)	(211,808)
Net cash flows used in investing activities		<u>(675,458)</u>	<u>(413,797)</u>
Cash flows used in by financing activities			
Repayment of borrowings	18	(553,555)	(533,394)
Net decrease in cash and cash equivalents		<u>(705,585)</u>	<u>(474,889)</u>
Cash and cash equivalents at beginning of financial year		1,767,967	2,242,856
Cash and cash equivalents at end of financial year		<u>1,062,382</u>	<u>1,767,967</u>
Reconciliation to cash and cash equivalents			
Cash at bank and in hand		1,062,382	1,767,967

NOTES TO THE FINANCIAL STATEMENTS FOR YEAR ENDED 31 DECEMBER 2019

1. Accounting policies

The principal accounting policies are summarised below. They have all been applied consistently throughout the financial year and the preceding year.

General Information and basis of accounting

St Francis Hospice Dublin is a company incorporated in Ireland under the Companies Act 2014. The address of the registered office is Station Road, Raheny, Dublin 5. The nature of the company's operations and its principal activities are set out in the director's report on pages 3 to 12.

In accordance with Section 1180(8) of the Companies Act 2014, the company is exempt from including the word "Limited" in its name. The company is limited by guarantee.

The financial statements have been prepared under the historical cost convention, and in accordance with the Statement of Recommended Practice (SORP 2015) "Accounting and Reporting by Charities", in accordance with the Financial Reporting Standard applicable in the UK and Republic of Ireland (FRS 102), issued by the Financial Reporting Council, and the Companies Act 2014.

The functional currency of St Francis Hospice Dublin is considered to be euro because that is the currency of the primary economic environment in which the company operates.

Going Concern

It is noted that St. Francis Hospice Dublin is currently not funded for the public sector pay restoration and pay progression by the HSE. St Francis Hospice Dublin requires 2016/2018/2019/2020 funding. St. Francis Hospice Dublin had implemented both the LRA/HRA pay cuts and achieved the associated cost savings. The Hospice is strongly of the view that the HSE funding alignment for salaries is long established. The annual funding of the pay awards is essential to St. Francis Hospice to continue to provide existing services to our patients and families. We have fully participated in the HSE's request for extensive information and understand that the HSE reported same to the Department of Health and the Work Place Relations Commission.

The HSE has stated that only pay restoration will be funded. St. Francis Hospice continues its discussions with HSE officials in HSE Community Health Organisation 9 regarding the need to receive full funding for recent and future pay progression awards.

In addition to HSE funding, the Hospice continues to focus on generating income through donations, bequests and fundraising events. Cost and funding pressures continued during the financial year. The Hospice's management have prepared budgets and reviewed activity levels to address the ongoing funding issues. The Hospice has also held discussions with its bankers and no matters have arisen in relation to ongoing funding. The Hospice's current operating budget and forecast show that the Hospice will be able to operate within its available funding for the foreseeable future (at least twelve months from the date of approval of these financial statements). The directors have a reasonable expectation that the Hospice has adequate resources to continue in operational existence for the foreseeable future. Thus, they continue to adopt the going concern basis of accounting in preparing the annual financial statements.

Tangible fixed assets and Depreciation

Tangible fixed assets are carried at cost (or deemed cost) less accumulated depreciation and accumulated impairment losses. Cost includes the original purchase price, costs directly attributable to bringing the asset to the location and condition necessary for its intended use, applicable dismantling, removal and restoration costs. Assets under construction are not depreciated until they are available for use.

Subsequent additions are included in the assets carrying amount or recognised as a separate asset, as appropriate, only when it is probable that the economic benefits associated with the asset will flow to the Hospice and the cost can be reliably measured. Assets in the course of construction are carried at cost. Major components are treated as separate assets where they have significantly different pattern of consumption of economic benefits and are depreciated separately over their useful lives.

Depreciation is calculated to write off the cost of tangible fixed assets over their expected useful lives in equal annual instalments. The annual rates of depreciation are as follows:

Buildings	2.00%
Office Equipment	12.50%
Medical Equipment	12.50%
Computers	33.33%
Furniture, fixtures & fittings	12.50%
Motor vehicles	20.00%

Residual value represents the estimated amount which would currently be obtained from disposal of an asset, after deducting estimated costs of disposal, if the asset were already of the age and in the condition expected at the end of its useful life. Repairs and maintenance costs are expensed as incurred.

Income

- Income from voluntary donations is recognised when received. As with many similar charitable organisations, independent groups from time to time organise fundraising activities and may operate bank accounts in the name of St Francis Hospice Dublin. However, as amounts collected in this way are outside the control of the company, they are not included in the financial statements until received by St Francis Hospice Dublin.
- Proceeds from the sale of donated goods are recognised in the financial statements in the period in which they are realised. Volunteer time is not included in the financial statements.
- Grants from the HSE, government and other agencies have been included as income from activities in furtherance of the charity's objects and accounted for on a receivable basis. Revenue grants received and receivable from the Health Service Executive (HSE) are accounted for on the basis of the allocated amount notified by the HSE for that financial year.
- Legacies are included when the amount to be received is probable and can be measured with certainty.
- Investment income is recognised on a receivable basis.

Expenditure

Charitable activities comprise expenditure incurred by the activities in the Raheny and Blanchardstown Hospices as well as support costs incurred at headquarters that are directly related to the implementation of charities activities. Expenditure is recognised in the period to which it relates. Expenditure incurred but unpaid at the statement of financial position date is included in accruals and other creditors. Expenditure on raising funds comprise all expenditure incurred by St Francis Hospice Dublin on raising funds for the organisation's charitable activities.

Foreign Currencies

Transactions in foreign currencies are recorded at the rate of exchange at the date of the transaction. Monetary assets and liabilities denominated in foreign currencies at the statement of financial position date are reported at the rates of exchange prevailing at that date. Exchange differences are recognised in the Statement of Financial Activities in the financial year in which they arise.

Pensions

A defined contribution pension scheme is in operation which, in the main, is non-contributory and is financially separate from the company. The pension costs charged in the financial statements represent the contribution payable by the company during the financial year.

Capital Grants

Capital grants received are shown as deferred income and credited to income by instalments on a basis consistent with the terms of the depreciation policy of the relevant assets.

Taxation

The company has been granted charitable tax-exempt status by the Revenue Commissioners under CHY number 10568 and therefore no provision for corporation tax is required.

Funds Accounting

Funds held by the charity are classified as unrestricted and restricted. Unrestricted funds are funds which can be used in accordance with the charitable objects at the discretion of the Directors. Restricted funds are funds that can only be used for particular restricted purposes within the objects of the charity. Restrictions arise when specified by the donor or when funds are raised for particular restricted purposes.

Financial instruments

Financial assets and financial liabilities are recognised when the company becomes a party to the contractual provisions of the instrument. Financial liabilities are classified according to the substance of the contractual arrangements entered into.

(i) Financial assets and liabilities

Basic financial assets and liabilities are initially measured at transaction price (including transaction costs), unless the arrangement constitutes a financing transaction. If an arrangement constitutes a finance transaction, the financial asset or financial liability is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Other financial assets are initially measured at fair value, which is normally the transaction price. These financial assets are subsequently measured at fair value and the changes in fair value are recognised in the Statement of Financial Activities.

Financial assets are derecognised when and only when a) the contractual rights to the cash flows from the financial asset expire or are settled, b) the company transfers to another party substantially all of the risks and rewards of ownership of the financial asset, or c) the company, despite having retained some significant risks and rewards of ownership, has transferred control of the asset to another party and the other party has the practical ability to sell the asset in its entirety to an unrelated third party and is able to exercise that ability unilaterally and without needing to impose additional restrictions on the transfer.

Financial liabilities are derecognised only when the obligation specified in the contract is discharged, cancelled or expires.

Balances are classified as payable or receivable within one financial year if payment or receipt is due within one financial year or less. If not, they are presented as falling due after more than one financial year. Balances that are classified as payable or receivable within one financial year on initial recognition are measured at the undiscounted amount of the cash or other consideration expected to be paid or received, net of impairment.

(ii) Investments
Investments in subsidiaries are measured at cost less impairment.

(iii) Bank loans
Bank loans are measured at amortised cost using the effective interest method.

Reserves Policy

In order to secure the long-term viability of St Francis Hospice Dublin and to maintain the smooth operation of the organisation, it is critical to ensure that the organisation has adequate reserves.

The level of reserves is required to cover the following activities of the organisation:

- Provide funding for the Hospice's activities.
- Meet contractual liabilities such as lease agreements, statutory staff payments and payments to creditors.
- Meet unanticipated expenses such as repairs and maintenance, currency variances and legal costs.
- Cover day to day expenditure of St Francis Hospice Dublin.
- Ensure there is adequate funding should any winding up costs ever arise.
- Provide for any other unanticipated expenditure of significance.

The Board may designate unrestricted reserves for specific future expenditure such as Long-Term Programmes, sinking funds to cover repairs to Fixed Assets (or as required under the terms of any lease relating to premises etc.) and any other potential future requirement(s).

2. Critical accounting judgements and key sources of estimation uncertainty

In the application of the Hospice's accounting policies, which are described in note 1, the directors are required to make judgements, estimates and assumptions about the carrying amounts 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, including expectations of future events that are believed to be reasonable under the circumstances. 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 financial period in which the estimate is revised if the revision affects only that financial period or in the financial period of the revision and future financial periods if the revision affects both current and future financial periods. Information about critical judgements in applying accounting policies that have the most significant effect on the amounts recognised in the financial statements is included in the accounting policies and the notes to the financial statements.

Critical judgements in applying the Company's accounting policies

In the opinion of the directors, there were no critical judgements apart from those involving estimations (which are dealt with separately below), made in the process of applying the company's accounting policies.

Critical accounting estimates and assumptions

The directors make estimates and assumptions concerning the future in the process of preparing the company's financial statements. The resulting accounting estimates will, by definition, seldom equal the related actual results, the estimates and assumptions that have a significant risk of causing a material adjustment to the carrying amount of assets and liabilities within the next financial year are addressed below.

Critical accounting estimates and assumptions

(i) Useful economic lives of tangible fixed assets

The annual depreciation on tangible fixed assets is sensitive to changes in the estimated useful lives and residual values of the assets. The useful economic lives and residual values are reviewed annually. They are amended when necessary to reflect current estimates, based on economic utilisation, technological advancements and the physical condition of the assets. The amortisation rate for capital grants is also reviewed in conjunction with the asset lives review and these are adjusted if appropriate.

3. Donations and legacies

	Restricted €	Unrestricted €	2019 Total €	2018 Total €
Donations	299,168	1,991,593	2,290,761	1,706,599
Legacies	-	380,169	380,169	1,060,547
	<u>299,168</u>	<u>2,371,762</u>	<u>2,670,930</u>	<u>2,767,146</u>

4. Charitable activities

	Restricted €	Unrestricted €	2019 Total €	2018 Total €
Health Service Executive				
- Revenue Grants	11,894,626	-	11,894,626	10,853,636
- Capital Grants	450,000	-	450,000	150,000
Other Grants	179,694	-	179,694	70,833
Conferences, seminars and research income	11,100	3,589	14,689	59,324
	<u>12,535,420</u>	<u>3,589</u>	<u>12,539,009</u>	<u>11,133,793</u>

5. Other activities

	Restricted €	Unrestricted €	2019 Total €	2018 Total €
Lotteries and Raffles	-	458,068	458,068	436,512
Campaigns and Appeals	-	292,925	292,925	250,287
Fundraising Events	46,053	747,766	793,819	1,396,003
	<u>46,053</u>	<u>1,498,759</u>	<u>1,544,812</u>	<u>2,082,802</u>

6. Investment Income

	Restricted €	Unrestricted €	2019 Total €	2018 Total €
Deposit Interest	-	-	-	-
Rental Income	-	37,500	37,500	37,200
	<u>-</u>	<u>37,500</u>	<u>37,500</u>	<u>37,200</u>

7. Other Income

	Restricted €	Unrestricted €	2019 Total €	2018 Total €
Other Income	67,832	62,699	130,531	101,088
	<u>67,832</u>	<u>62,699</u>	<u>130,531</u>	<u>101,088</u>

8. Expenditure on raising funds

	Restricted €	Unrestricted €	2019 Total €	2018 Total €
Raising donations, legacies, corporate donations and regular giving	-	11,053	11,053	9,780
Fundraising activities- campaigns, appeals and events	-	378,047	378,047	351,990
Support costs (Note 10)	-	256,350	256,350	249,019
	<u>-</u>	<u>645,450</u>	<u>645,450</u>	<u>610,789</u>

9. Expenditure on charitable activities

	Activities Undertaken Directly €	Support Costs (Note 10) €	Total 2019 €	Total 2018 €
Raheny and Blanchardstown Homecare, Raheny Day Care In-Patient Unit Raheny Blanchardstown Day Care and Outpatients	558,351	3,170,684	3,729,035	3,504,049
In-Patient Unit Blanchardstown	1,999,362	3,835,741	5,835,103	6,057,473
	772,095	620,023	1,392,118	1,332,809
	1,858,948	4,436,898	6,295,846	5,743,511
	<u>5,188,756</u>	<u>12,063,345</u>	<u>17,252,102</u>	<u>16,637,842</u>

10. Analysis of support costs

	2019 €	2018 €	Basis of allocation
<u>Fundraising activities (Note 8)</u>	<u>256,350</u>	249,019	<i>Fundraising team % time spent on activities</i>
<u>Charitable activities:</u>			
Raheny and Blanchardstown Homecare, Raheny Day Care	3,170,684	2,946,136	<i>Salary Costs-% time spent on activities</i>
In-Patient Unit Raheny Blanchardstown Day Care and Outpatients	3,835,741	4,078,521	
In-Patient Unit Blanchardstown	620,023	561,323	
	4,436,899	3,893,842	
Total	<u>12,319,697</u>	<u>11,728,841</u>	

11. Staff numbers and costs

The average monthly number of persons employed by the company during the financial year was as set out below:

	2019	2018
Clinical/Nursing	192	185
Other support services	21	18
Administrative and fundraising staff	47	48
	<u>260</u>	<u>251</u>

The aggregate payroll costs of these were as follows:

	2019 €	2018 €
Wages and salaries	10,842,891	10,305,439
Social welfare costs	1,145,899	1,097,269
Pension costs	330,907	326,133
	<u>12,319,697</u>	<u>11,728,841</u>

Employee remuneration exceeding €60,000:

	2019 Number	2018 Number
€60,000- €70,000	20	13
€70,001- €80,000	4	6
€80,001- €90,000	3	1
€90,001- €100,000	1	1
€100,001- €160,000	2	1
€160,001- €170,000	1	1
€170,001- €180,000	-	-
€180,001- €190,000	-	-
	<u>31</u>	<u>23</u>

12. Net Expenditure

	2019 €	2018 €
The net expenditure for the financial year is arrived at after charging/(crediting):		
Depreciation	1,258,272	1,456,581
Directors' remuneration (b)	-	-
Auditors' remuneration (a)	13,750	13,750
	<u>1,272,022</u>	<u>1,470,331</u>
(a) Auditors' remuneration disclosures (net of VAT and outlays):		
Audit	13,750	13,750
Tax advisory	-	-
Other assurance services	-	-
Other non- audit services	-	-
	<u>13,750</u>	<u>13,750</u>

(b) No salaries for fees are payable to the directors of the company for their services as directors.

13. Taxation

No taxation arises in the current year or prior financial year due to the charitable status of the company.

14. Tangible fixed assets

	Buildings €	Office Equipment €	Medical Equipment €	Computers €	Motor Vehicles €	Furniture Fixtures & Fittings €	Total €
Cost:							
At 1 January 2019	39,639,800	574,313	527,765	504,645	119,946	4,073,637	45,440,106
Additions	148,786	3,667	49,249	10,734	192,000	90,722	495,158
At 31 December 2019	39,788,586	577,980	577,014	515,379	311,946	4,164,359	45,935,264
Accumulated depreciation							
At 1 January 2019	9,721,015	554,259	479,579	403,034	119,946	2,996,607	14,274,440
Charge for the year	792,796	17,618	13,325	82,199	8,986	343,348	1,258,272
At 31 December 2019	10,513,811	571,877	492,904	485,233	128,932	3,339,955	15,532,712
Net book value:							
At 31 December 2019	29,274,775	6,103	84,110	30,146	183,014	824,404	30,402,552
At 31 December 2018	29,918,785	20,054	48,186	101,611	-	1,077,030	31,165,667

15. Financial fixed assets

	2019 €	2018 €
Shares in subsidiary undertaking	100	100

Subsidiary undertaking

	Registered Office	Country of Incorporation	% held	Principal Activity
S.F.H Property Services Limited	Raheny, Dublin 5	Ireland	100%	Non-trading

The capital and reserves at 31 December 2019 were €100 (2018: €100) and the result for the financial year ended 31 December 2019 was €Nil (2018:€Nil).

16. Debtors: (Amounts falling due with one financial year)

	2019	2018
	€	€
Sundry debtors	249,303	266,907
	<u>249,303</u>	<u>266,907</u>

17. Creditors: (Amounts falling due within one financial year)

	2019	2018
	€	€
Trade creditors	707,848	732,195
Taxation and social welfare	352,213	318,557
Accruals	388,322	355,610
Bank loans (Note 18)	553,555	533,394
	<u>2,001,938</u>	<u>1,939,756</u>

The amounts due in respect of taxation and social welfare is comprised as follows:

	2019	2018
	€	€
PAYE/PRSI	352,213	318,557

18. Creditors: Amounts falling due after more than one financial year

	2019	2018
	€	€
Bank loans	3,914,849	4,488,565

Bank loans are comprised of the amounts payable as follows:

	2019	2018
	€	€
Within one financial year (Note 17)	553,555	533,394
Between one and two financial years	1,107,110	1,066,788
Between two and five financial years	1,660,665	1,600,182
After five financial years	1,147,074	1,821,595
	<u>4,468,404</u>	<u>5,021,959</u>

Security:

The company's borrowings have been secured by a first mortgage/charge over the company's property at Raheny, Dublin 5, a deed of mortgage/charge and assignment of certain rights, title and interest in property of the company at Blanchardstown, Dublin 15 and a Letter of Comfort held. The company's borrowings consist of three interest bearing loans with two fixed interest loans with interest rates of 2.97% and 2.76%, and one variable rate of 5.428%.

19. Financial Instruments

The carrying values of the company's financial assets and liabilities are summarised by category below:

	2019	2018
	€	€
Financial assets		
· Investment in subsidiary (Note 15)	100	100
Measured at undiscounted amount receivable		
· Sundry debtors (Note 16)	249,303	266,907

Financial liabilities

Measured at amortised cost		
· Bank loans and other loans (Note 18)	4,468,404	5,021,959
Measured at undiscounted amount payable		
· Trade creditors (Note 17)	707,848	732,195

20. Contingent liabilities

Under an agreement between the company and the Health Service Executive, which is dated 1 December 2005, the company has a contingent liability of €180,000 at 31 December 2019 (2018: €210,000) to repay a capital grant received of €600,000 if certain circumstances set out in that agreement occur within 20 years of the date of the agreement. The amount which may be repayable is reduced by an amount equal to 1/20th of the received amount each financial year.

Under a similar agreement the company has a contingent liability of €900,000 on 31 December 2019 (2018: €975,000) to repay a capital grant received of €1,500,000 if certain circumstances occur within 20 years of the date of that agreement. The amount which may be repayable is reduced by an amount equal to 1/20th of the amount received each financial year.

Under a similar agreement the company has a contingent liability of €675,000 on 31 December 2019 (2018: €720,000) to repay a capital grant received of €900,000 if certain circumstances occur within 20 years of the date of that agreement. The amount which may be repayable is reduced by an amount equal to 1/20th of the amount received each financial year.

In December 2019, a capital grant was received from the Health Service for minor capital expenditure items. No contingent liabilities exist on this minor capital expenditure grant at the statement of financial position date.

In December 2018, a capital grant was received from the Health Service for minor capital expenditure items. No contingent liabilities exist on this minor capital expenditure grant at the statement of financial position date.

In December 2017, a capital grant was received from the Health Service for minor capital expenditure items. No contingent liabilities exist on this minor capital expenditure grant at the statement of financial position date.

The government grants are secured over the premises known as "Walmer Villa", Station Road, Raheny, Dublin 5.

21. Funds of the charity

	Restricted Funds	Unrestricted Funds	Total
	€	€	€
Opening balance 1 January 2019	1,614,369	25,157,951	26,772,320
Net expenditure for financial year	166,843	1,141,613	(974,770)
Closing balance 31 December 2019	<u>1,781,212</u>	<u>24,016,338</u>	<u>25,797,550</u>

22. Reconciliation of net expenditure to Net cash outflow during the financial period

	2019	2018
	€	€
Net expenditure for the reporting period	(974,770)	(1,126,601)
Adjustment for:		
Loss on disposal of tangible fixed assets	-	8,173
Interest payable and similar charges	180,301	201,989
Depreciation	1,258,272	1,456,581
Decrease in debtors	17,604	35,888
Increase/(decrease) in creditors	42,021	(103,728)
Net Cash generated during the financial period	<u>523,428</u>	<u>472,302</u>

23. Analysis of changes in net debt

	1 January 2019 €	Cash flows €	31 December 2019 €
Cash at bank and in hand	1,767,967	(705,585)	1,062,382
Borrowings excluding overdrafts	(5,021,959)	553,555	(4,468,404)
	(3,253,992)	(152,030)	(3,406,022)

24. Financial risk management, objectives and policies

The company's activities expose it to a number of financial risks including credit risk, cash flow risk and liquidity risk. The company does not use derivative financial instruments

Credit risk

The company's principal financial assets are bank balances, cash and other receivables. The company's credit risk is primarily attributable to its other receivables. The amounts presented in the statement of financial position are net of allowances for doubtful other receivables. An allowance for impairment is made where there is an identified loss event which, based on previous experience, is evidence of a reduction in the recoverability of the cash flows. The credit risk on cash at bank is limited because the counterparties are banks with high credit-ratings assigned by international credit-rating agencies. The company has no significant concentration of credit risk, with exposure spread over a number of counterparties.

Cash flow risk

The company's activities expose it primarily to the financial risks of changes in interest rates. Interest bearing assets and liabilities are held at fixed rates to ensure certainty of cash flows.

Liquidity risk

In order to maintain liquidity to ensure that sufficient funds are available for ongoing operations and future activities, the company uses a mixture of long-term and short-term debt finance.

25. Pensions

The company operates an externally funded defined contribution scheme that covers substantially all the employees of the company. The assets of the scheme are vested in trustees in accordance with the Trust Deed for the sole benefit of these employees. There were no liabilities in respect of pension contributions outstanding at 31 December 2019.

26. Financial commitments

There are no capital commitments which have been contracted for but not provided in the financial statements as at 31 December 2019 (2018: €Nil). There are no contracted future minimum lease payments under non-cancellable operating leases as at 31 December 2019 (2018: €Nil).

27. Subsequent Events

There have been no significant events affecting the company since the statement of financial position date.

28. Consolidated group financial statements

Consolidated group financial statements have not been prepared, as the company has availed of the exemption under Section 293 of the Companies Act 2014 not to prepare consolidated financial statements.

29. Related Party Transactions

The total remuneration for key management personnel for the financial year amounted to €770,380 (2018: €800,148). Remuneration included salaries, employer PRSI and pension contributions.

30. Approval of financial statements

The directors approved the financial statements on 27th May 2020.





“I will be forever grateful for the advice of the home care team, as without them my mum would have died in hospital instead of at home with her family.”

“The palliative care team that looked after my mother went above and beyond to make sure she was comfortable both physically and emotionally in her last few weeks. The team always made sure we were coping OK and suggested ways we could help ourselves also. A brilliant team of professionals who gave my mother the utmost dignity in her last weeks.”

2019

St Francis Hospice Dublin
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