

Annual Report and Financial Statements 2019

Company Information

North West Hospice:

Registered Office: The Mall, Sligo

Company Registered Number: 119501

Registered Charity Number: CHY 7983

Charity Regulator Number: 20018863

Solicitors:

Michael J Horan Solicitors, Millennium House, St. Stephen St, Co. Sligo

Bankers:

Ulster Bank LTD, 25 Stephen Street, Sligo

Permanent TSB, 22 O'Connell Street, Sligo

Auditors:

Gilroy Gannon Chartered Accountants and Statutory Audit Firm







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Chairperson's Statement

I have been a Board Director of North West Hospice since 2012, and was very happy to assume the role of Chairperson in June 2019. I wish to acknowledge in writing, the tremendous work undertaken by my predecessor Mr Jim Callaghan. His leadership of the Board led to the advancement of the Capital Project towards the build of a New Hospice, advancing Strands of the Strategy (2016-2020) and implementing new subcommittees to improve governance and organisational structures to meet regulatory requirements.



Context

it is important to document the role of the North West Hospice "Providing specialist care with compassion for those with life -Limiting illness in our Community" and being at the centre of Palliative Care services in the North West. There are many stakeholders involved in meeting these objectives; Board of Directors, Management team, Medical, Nursing, Allied Health Professional, Pastoral Care, Fund Raising team and the many local Fundraising Groups throughout South Donegal, Sligo, Leitrim and West Cavan area.

In relation to the Board, I am very pleased to say that we have a very committed and experienced group of members. You will note from the "overview of members" that we have expertise in Finance, Legal, Healthcare Management, Business experience, Strategic Planning and compliance with regulatory requirements.

Progress in 2019.

I am pleased to report progress on a number of fronts:

- The design of the New Hospice was completed and submitted for Planning Permission to Sligo County Council in December 2019. I wish to record our appreciation to the staff of HSE Estates in meeting this deadline.
 - The anticipated cost of the new build is €9 million and we will be actively engaging with HSE Estates locally and nationally to ensure we are a funded project in 2021.
- I can also confirm that income from Fundraising exceeded the level of funding in any of the previous years. The Hospice Shop in Sligo and Carrick on Shannon had a very successful year and we are indebted to the Shop Management and Volunteers but I would like to record our appreciation to all the Groups throughout the Region who raised funds for the Hospice.
- The Hospice further strengthened the Governance and Organisational structures to continue to meet our legal and regulatory requirements with a number of Board sub committees now in place to ensure oversight and accountability. Further reference to these committees is available in the report.

In relation to 2020, our priority will be to engage with the HSE to agree a funding framework to reduce the dependency on fundraising income to cover core cost and agree a Capital framework to ensure the New Build is progressed to construction tender.

Finally, the Board wishes to acknowledge the good working relationship which exists between the Hospice Board / Hospice Management and CHO1, HSE Management and the Community Care Management Team who have been very supportive in helping us reach our goals!

Mr. Pat Dolan, Chairman



Hospice Manager's Statement

"For time and the world do not stand still. Change is the law of life. And those who look only to the past or the present are certain to miss the future" (John F. Kennedy). North West Hospice does not stand still and 2019 was another significant year of change and progress and further realisation of our strategic plan 2016-2020 key objectives as detailed in page 22 of this report. Our increase in clinical activity was mirrored with a further increase in our fundraising income. The design of our new Hospice



was further advanced and a continued focus on strengthening the governance and organisational structures was also very evident in 2019.

In July 2019, North West Hospice secured the permanent appointment of a second Consultant in Palliative Medicine Dr. Anna Cleminson. Dr. Anna had worked in the hospice as a locum Consultant prior to this appointment and in other Specialist Palliative care settings. The Hospice was very fortunate to secure such an excellent appointment. Dr. Anna has also been very influential and supportive to the excellent work of our other Consultant in Palliative Medicine and Clinical Lead Dr. Cathryn Bogan. Our service has seen a substantial increase in activity with a further increase recorded in 2019. This increase in activity has been driven predominantly by the type of referrals to our service. A quarter of our patients today present with a non- cancer diagnosis compared with 20 years ago where over 95% presented with a cancer diagnosis. Further detail on our activity is on page 8 of this report.

The hospice Board of Directors and management team recognised the changes in our service over these years and the need to build a new Inpatient Unit to meet the growing needs of our community. Our current facilities are dated with a lack of privacy and space and insufficient number of single rooms. The process commenced in 2017, with the appointment of a design team. They have worked closely with the Hospice management team, the frontline staff and the Board of Management and finalised the design of the new hospice unit in late December 2019, ready for planning permission submission in early 2020. I would like to acknowledge the support of HSE Estates in supporting the Hospice in this process to date . There is a substantial funding requirement needed to build the new inpatient unit with on-going HSE engagement to support the funding.

Our Annual General meeting on 13th June 2019 elected a new Chair and Vice- Chair with the resignation of three Board Directors. Jim Callaghan was Chair for 5 years and with his strong leadership skills led the Hospice through great periods of change and success during his tenure. Ms. Mary Curran resigned from her Vice- Chair position after 5 years and also demonstrated great skill and leadership in supporting Jim and the Hospice during this time. I would like to acknowledge their great work and glad to report that both have remained on as Board Directors. Three other influential and very committed Board Directors also resigned after 9 years Mr. Noel Walsh, Ms. Winifred Mc Dermott and Ms. Dyympna Gorman. I would like to thank them for their huge generosity in the giving of their time and skills so freely over these years.



North West Hospice is fortunate to have a Board of Directors with such a wealth of knowledge, and life experience. All our Board Directors bring unique skills and expertise and give their time voluntarily. The Board are very aware of their responsibilities and will not shy away from a challenge instead they embrace the opportunities that come with each challenge as it presents. So when Jim stepped down as Chair and Mary as Vice- Chair in June 2019, we were very fortunate to have two Board Directors Mr. Pat Dolan and Ms. Siobhan O Dowd who embraced the challenge and was elected new Chair and Vice chair respectively. Pat has extensive experience in management and worked at a senior management level in the HSE. Siobhan joined the Board in 2018 and works as a Senior Manager with Accenture. I would like to thank Pat, Siobhan and all the Board of Directors for their on-going hard work, expertise, compassion and support to the North West Hospice Operational Management team. It is truly a privilege to work with this expert team that not only support me in my work but also are role models with one shared goal to do their best with honesty and integrity for North West Hospice and to serve the local community who may require our services now and into the future. The Board has worked very closely and successfully with local HSE management in 2019 to continue to build on strengthening our governance and organisational structure. As a significant funding provider to North West Hospice, I would like to acknowledge the open engagement and support of the HSE especially CHO1 Primary Care and Palliative Care management, Mr. John Hayes, Mr. Dermot Monaghan and Ms. Edel Quinn. They equally share our goals and objectives and I would like to thank them and look forward to our continued work together in 2020.

While your support over many years has directly influenced the success of North West Hospice, it remains an on-going challenge each year to fundraise in excess of €1 million to meet the running costs of the service. In 2019 with your support, we recorded the most successful year in fundraising to date contributed by the success of our two charity shops. In recognising the need for additional funding to cover additional staff costs due to increase in service activity and the absolute need to build a new inpatient unit on our current site, we embarked on developing Charity shops. Our first charity shop in Carrick on Shannon in July 2017, and a second charity shop in Sligo in October 2018. This venture to date is proving to be very successful. I acknowledge the support of our many volunteers that work in the shop and give their time so generously and also the community for their very generous donations and support. To further inform our loyal community both at home and away, the North West Hospice published an annual newsletter in 2018 and a further newsletter in 2019. We hope this annual publication will complement our other communication platforms i.e. social media, our website and attendance at community events.

The North West Hospice recognises the importance of transparency and compliance with all legal and regulatory requirements and established a number of dedicated Board sub committees over the years. The Board Quality and Safety subcommittee chaired by Board Director Mr. John Mc Elhinney, the Board Finance subcommittee chaired by Board Director Ms. Aisling Barry, the HR subcommittee chaired by Board director Ms. Mary Curran and Board Development subcommittee chaired by Board Director Noel Scott. The subcommittees oversee all aspects of compliance. These committees are made up of Board Directors with expertise in this area and also representation from the North West Hospice operational management committee. Each Chair from the sub committees reports back to the Board of Directors at each Board meeting. This robust level of engagement between the board



and the operational management team with agreed terms of reference ensures a very high level of accountability and assurance to our patients, families, staff, volunteers, HSE, regulatory authorities, local community and the general public in general.

Notwithstanding the significant challenges ahead, the Board remains fully committed to fulfilling all our objectives as outlined in our strategic plan. In 2020, the Board will embark on developing another strategic plan continuing on the work to date. By fulfilling these objectives, we are best positioned to meet the growing needs of our community and can continue to deliver the highest quality of specialist palliative care service in our communities of Sligo, Leitrim, South Donegal and West Cavan. We remain very confident going forward because of you and your continued support to North West Hospice.

In presenting this report, I wish to acknowledge all that contribute to North West Hospice, the dedicated Board of Management, staff and volunteers, the HSE and local community groups i.e. Sligo Leader, local County Council, Sligo Social Services, the local community and each patient and family that we have the privilege to care for.

"A bright future beckons. The onus is on us, through hard work, honesty and integrity, to reach for the stars". (Nelson Mandela).

Ms Nuala Ginnelly, Hospice Manager

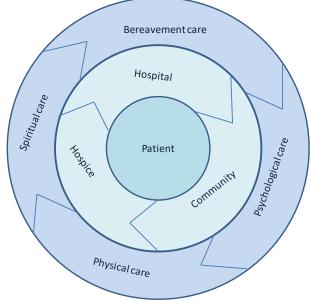


Our Services

We provide specialist palliative care with compassion for those living with life-limiting illness in our communities in Sligo, Leitrim, South Donegal and West Cavan – a catchment area of approximately 110,000 persons. All our care is provided free of charge to patients and their families.

Our Integrated services is provided through

- Our **8-bed Inpatient Unit** this Unit has eight beds (three single rooms and a five-bed area) where people are cared for by a multi-disciplinary team for a range of reasons such as symptom control, respite, as well as end-of-life care. Our team includes specialist palliative consultants, medical, nursing, social work, occupational therapy and physiotherapy staff. We also provide pastoral care, complimentary therapies, and a wide range of volunteer services.
- Our **Community Palliative Care Team** working across the North-West we visit patients in their own homes or other care settings such as nursing homes or community hospitals. This team of Clinical Nurse Specialists, a social worker and a doctor work very closely with the patient's GP and Public Health Nurse to provide care to the patient.
- Our **Hospital Palliative Care Team** based in Sligo University Hospital provides palliative care to patients at Sligo University Hospital and their families, and provides support to the hospital's medical and nursing teams. The Team provides a seamless link in the flow of care between the hospital, the hospice In-Patient Unit and Community Palliative Care, assisting patients and their families to make the most appropriate decisions according to their individual care needs.
- Our **Social Work** service Social workers are an integral part of the palliative care multidisciplinary team. The team provides psychosocial and emotional support to patients and their families who are receiving palliative care service at home or in the Inpatient unit. The social work team also provides a bereavement support and advice to those whose loved one died under the care of North West Hospice
- Our **Specialist Education Support** service we recognise the importance of ensuring the continuous professional development of our staff, and our activities include monthly education sessions for staff, learning and sharing from practical examples of clinical practice, and the development of policies, procedures and guidelines related to service quality.
- Our Volunteer Programme our volunteers provide essential support in areas such as reception cover, holistic care (massage, music, reflexology, etc.), and driving, fundraising, charity shop assistants other activities.





The services provided by North West Hospice are highly integrated, and our Bereavement, Education, Spiritual and Volunteer supports are integral to our specialist palliative care service. The diagram (pictured right) illustrates the integrated nature of what we do, all of it centred on the needs of our patients and their families:

Mission, Vision & Values

Mission

The mission of North West Hospice is to provide specialist care with compassion for those living with life-limiting illness in our community.

Vision

Our vision is to be at the centre of palliative care services in the North West, working to ensure that everyone who needs palliative care can access services.

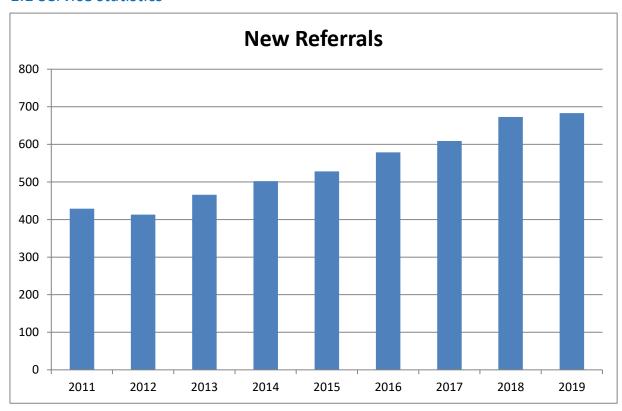






Service Statistics and Staffing

1.1 Service statistics



Referrals

Year	2011	2012	2013	2014	2015	2016	2017	2018	2019
New	429	413	466	502	528	579	609	673	682

Total new patients and re-referrals for 2019 = 776 increased from 728 in 2018

Community Palliative Care Service

Year	New	Re-	Discharges	Deaths	CNS	Total Visits
	referrals	referrals			visits	
2015	324	38	79	235	2537	2883
2016	303	41	64	227	2256	2424
2017	335	37	66	275	2210	2361
2018	327	55	78	274	2034	2218
2019	313	94	107	274	2166	2298



Hospital Palliative Care Service

	New	Re-	Discharges	Deaths	CNS	Total Visits
	referrals	referrals			visits	
2015	372	189	456	136	5310	5343
2016	391	166	377	150	3935	4719
2017	474	211	537	165	2150	2829
2018	479	279	579	162	3079	5596
2019	503	296	620	124	2589	3832

Innatient Unit Palliative Care Service

	New	Re-	Discharges	Deaths
	referrals	referrals		
2015	133	92	117	120
2016	158	55	66	129
2017	146	30	50	132
2018	174	22	43	161
2019	178	25	30	172

Bereavement_(1 Social worker down for 11months in 2019, replacement in Jan 2020)

	Referrals	s Discharges Bereavement		Bereavement
			visits	Phone calls
2015	104	122	231	337
2016	130	35	160	299
2017	146	48	126	321
2018	43	32	142	624
2019	92	27	144	423

1.2 Total Staffing in North West Hospice

Positions	WTE
Administration	11
Community Relations	3
Charity Shop	2
Volunteer Coordinator	0.5
Medical Staff	6
Nursing Staff	38
Social Work	2
Cleaning/ Catering	2
Total	64.5
Note *Not all staff work full time hours	



Structures and Governance

North West Hospice is a registered charity and a company limited by guarantee. It is governed by a Board of Directors. Our Board is responsible for corporate governance and works closely with our management team to deliver our vision, mission and strategic objectives. All our Directors are volunteer members who generously contribute their experience, knowledge, and resources to ensure that North West Hospice is effectively run.

The Board of Directors of North West Hospice is:

Chairperson	Mr Pat Dolan	
	Retired Senior HSE Manager	
Vice Chair person	Ms Siobhan O Dowd	
	Senior Manager, Accenture	
Other Directors	Ms. Aisling Barry	
	Digital Consultant	
	Mr. Declan Hegarty	
	Solicitor	
	Dr. Jim Callaghan	
	Retired HSE Nurse Tutor	
	Mr. George Chadda	
	Communications & Chartered Engineer	
	Mr. Daniel Browne	
	Commercial Manager	
	Ms. Mary Curran	
	Retired Director of Public Health Nursing, HSE	
	Mr. Noel Scott	
	Retired HSE Manager	
	Dr. Fiona Quinn	
	General Practitioner	
	Mr. John Mc Elhinney	
	Quality & Safety Manager, HSE	
	Mr. Shane Ward	
	Chartered Accountant	
	Chartered Accountant	



Resignations from the Board in 2019

Mr. Noel Walsh – 18th June

Ms. Dympna Gorman- 18th June

Ms. Winifred Mc Dermott- 18th June

New appointment to Board in 2019

Ms. Siobhan O Dowd- 18th February

Mr. Shane Ward- 16th September

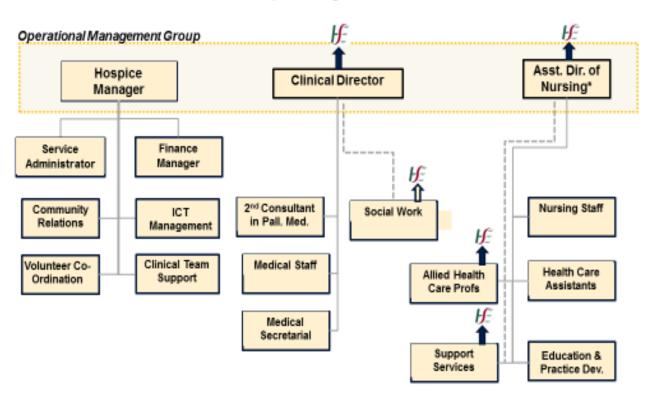
The Governance and oversight of the Board is supported by the following sub-committees:

he Governance and oversight of the Board is supported by the following sub-committees:							
Board Development	Human Resource subcommittee	Finance and Audit subcommittee	Quality and Safety subcommittee				
Subcommittee Chairperson: Mr. Noel Scott Siobhan O Dowd Jim Callaghan Declan Hegarty	Chairperson: Ms Mary Curran Daniel Browne Jim Callaghan Noel Scott Nuala Ginnelly (Hospice Manager)	Chairperson: Ms Aisling Barry Shane Ward Pat Dolan George Chadda Nuala Ginnelly (Hospice Manager) Georgina Meehan (Finance Manager)	Chairperson Mr. John Mc Elhinney John McElhinney Dr Fiona Quinn Mary Curran Operational Management Committee: Director of Nursing Marion Ryder Assistant Director of Nursing Catherine Regan Consultant in Palliative Medicine and Clinical Lead Dr. Cathryn Bogan Nuala Ginnelly (Hospice Manager) HSE Representation: Ms Siobhan O Neill (Quality and Safety Risk Manager CHO1 HSE)				



Our current Organisational Structure (as below)

North West Hospice - Organisation Structure



'Assistant Director of Nursing reports to the Director of Nursing/Midwifery, Sligo University Hospital.



Medical Statement

2019 was yet again a very busy year for all here at the North West Hospice. We cared for a total of 776 patients throughout the year.

The Community Team saw a total of 407 referrals during 2019 of these referrals a certain number were facilitated to die at home 124 in 2019. These patients are able to die at home through the support of the Community Palliative Care Service however they are largely reliant on a larger multidisciplinary team including the Public Health Nurse, General Practitioners and Home Help Services. We are also hugely reliant on the availability of Night Nurses which are available through the Irish Cancer Society and Irish Hospice Foundation.



Our Hospital Team were increasingly called upon to help Medical Teams with the specialist palliative care needs of patients in Sligo University Hospital and we had a total of 503 new referrals throughout the year.

Our in-patient unit had a total of 203 admissions throughout the year and 172 patients died in the in-patient unit. The in-patient unit has a total of 8 beds, 3 single beds and a 5 bedded mixed male/female ward area. The lack of single rooms is a huge disadvantage. We aspire to being able to offer every single patient the opportunity to have their own single room. Plans are afoot for a 12 bedded single room inpatient unit on the current site. This would expand our bed numbers but also allow greater flexibility for admission as we would not be restricted regarding infection control issues.

I would like to take the opportunity to thank the population of the North West for their continued support over the past 34 years. This is an organisation which was born from the community to provide essential palliative care services for the North West and without your support we simply would not be able to continue.

Many thanks.

Yours sincerely,

Dr. Cathryn Bogan, IMC No. 20999,

Consultant in Palliative Medicine,

Sligo University Hospital/North West Hospice.



Nursing Statement

In 1986, Claire Campbell, a social worker in the North West of Ireland, identified the need for specialist care to support people with cancer and their families. She set up a number of volunteer support groups in the community and North West Hospice service was founded. Over time, the need for this specialist approach, called palliative care, increased, leading to a very busy service that delivers care to a population of approx. 110,000.



The North West Hospice has been in operation since then, and this need has continued to grow over the years. We work with patients and their Families to improve the quality of life of someone living with a life limiting condition. We also work with patients and families who are struggling with symptom control, those coming to the end of their life limiting illness, or cancer journey, and who need holistic and supportive care. This is the ethos of palliative care; to help people live a good life for as long as they can, in the place that they choose, so that care that is delivered at the end of life is focused, and is delivered in a person centred way.

There are many members that make up the palliative care team who work in unison with each other. The Unique location of our inpatient unit of North West Hospice, based on site of Sligo University Hospital (SUH), is a model which provides many advantages for our patient's family and staff. We have in total a nursing team of 38 staff. Some of the members of this team include Staff Nurse's, Nurse Managers, Nurse Specialists, Health care assistants, who work alongside our Medical team, Practice development, Social work team, Allied health professionals, pharmacy and Chaplaincy colleagues.

We have close links with nursing office in SUH and support from Practice development. This link allows for us to facilitate General Student Nurse's clinical placements on site. We also work with the third level institutions in Ireland to provide clinical placements for future Nurse Specialist Nurses in palliative care.

Our Community Palliative care team are also based on this site and this team comprises of 6 Clinical Nurse Specialists, and a Clinical Nurse Manager. They play a role too in supporting these students who are completing their post graduate diploma in palliative care. These students shadow our clinical nurse specialists on home/community nursing home visits to learn and see first-hand the care and holistic management of our palliative care patients in the community.

Our Hospital Support team consist of 3 Clinical Nurse Specialists and they work with our Palliative Care Consultants and Consultants in SUH to deliver specialist care within the acute Hospital setting. Educating others is an important way of extending the palliative care philosophy and the value those other members of the wider nursing and medical teams bring recognised and respected. There are there to assist patient in managing symptoms and ensuring a smooth transition for those who are going home, moving to another palace of care or moving over to our inpatient unit. They provide information to and share their knowledge & expertise with patients and their families. All of our clinical nurse specialists embrace their education role providing support to nurses in SUH and in Community Hospitals and Nursing homes, for those living with life limiting illnesses or approaching end of life.



We in North West Hospice have a very active education team and attendance at and participation in training days & seminars, assures us we are delivering care that is as encompassing and diverse as it is kind and respectful. The North West Hospice works in a leadership role in partnership with teams nationally to ensure best practice is followed and that up-to-date policy, education and research is guiding the care we deliver, in essence to ensure the palliative care we deliver represents best practice.

While we are proud of our Hospice we acknowledged in recent times that the care we deliver is so vital and important that we needed to address the site itself. We have worked hard over the last few years to share a new vision we see going forward for our Hospice and are delighted that things are progressing and our hopes for a new Hospice building are in sight. To echo the words of our hospice manager having these enhanced facilities will provide our patients from the vast geographical area we cover (Sligo, Leitrim, South Donegal, & West Cavan) with greater comfort and privacy. This will also enable us to best accommodate the increasing numbers of receive yearly.

With one eye on the future and one on the past, I am proud of the entire nursing team for the quality of palliative care we deliver in our region. I acknowledge the commitment of staff in all circumstances to delivering care of the highest standard to those who need it most. I would like to thank the wider palliative care team for all they do daily for the patients under our care.

I wish to thank the Director of Nursing in SUH who is a tremendous support for me and the entire nursing team. The links with SUH are invaluable to the daily operation of North West Hospice. I would also like to thank the Board who strive to ensure the demands placed on them are met, and to the Chairperson who works tirelessly on behalf of the staff and patients of the North West Hospice. Finally I wish to commend and acknowledge the Consultants and the medical team of North West Hospice, their commitment, and dedication to their work in the field of Palliative care is exceptional.

Catherine Regan
Assistant Director of Nursing.



Social Work & Bereavement Statement

Social Workers are an integral part of the multi-disciplinary Specialist Palliative Care team at North West Hospice. In March 2019, a social worker resigned from her post and this post is currently vacant. We offer a service to those receiving palliative care in their own home and also in the In Patient unit. We provide supportive counselling, emotional support and practical advice to families. We support patients and families living with illness and its impact on their psychological and emotional wellbeing. The social work team work in



partnership with parents, guardians and other family members to offer support, advice and guidance as to how to prepare and support children and vulnerable adults when a family member is ill. Social Workers offer bereavement support, information and advice as appropriate to families whose loved one died under the care of North West Hospice. In 2019 the social work service supported/worked with 105 families referred by the multi-disciplinary team.

Social workers are registered with CORU professional body and actively participate in service development initiatives. We played a key role in the implementation of the Children First guidelines and legislation in North West Hospice. We are committed to enhancing social work practice through continuous professional development in the area of social work in specialist palliative care.

Ms Michelle O Reilly, Senior Social Worker



Quality/ Safety/ Practice Development Report

The commitment of North West Hospice to Quality and Patient Safety is driven by Dame Cicely's Saunders' promise that because people matter, because the person matters and those they care for matter, we will do all we can to provide everyone with the best possible care during the challenging periods occurring as a result of life-limiting illness. This is re-iterated in our own values of compassion, accountability, dignity and respect enshrined in our mission statement.



Our programme of clinical audit, nursing metrics, and tissue viability audit etc. guides policy review and development. This is also driven by external influences such as changes in national policy, societal, environmental and legislative factors, so that work is ever dynamic and evolving. We have undertaken a baseline HSE Health and Safety Audit in last quarter of 2019 and that has also given direction to the on-going review and development of appropriate risk assessments and site specific Health and Safety Statements across the organisation.

All incidents are managed following guidance of the HSE Incident Management Framework. They are reviewed quarterly by the Integrated Quality and Safety Group and any trends in incidents noted. There were no serious incidents reported for 2019. Incidents fall within the negligible to minor category under the same four main areas as noted in previous years:

- pressure ulcers,
- slips/trips/falls,
- medication (equipment related)
- Small number of incidents related to violence/aggression/harassment towards staff.

Oversight of the work of the Integrated Quality and Safety Group is provided by the Board Quality and Safety Sub-Committee who meet quarterly and report directly to the Board of Directors, North West Hospice.

Comments and complaints are managed under NWH Management of Feedback Policy with strong reference to HSE "Your Service, Your Say" feedback policy. Some are resolved locally while a small number are referred to North West Hospice Complaints Officer.

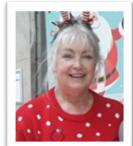
North West Hospice continues to work with Centre for Nursing and Midwifery Education (CNME) in implementation of Palliative Care Needs Assessment Guidance programme. Clinical Nurse Specialists in Palliative Care continue to provide education in relation to syringe pump management and care in the last 24 hours both in CNME and on request in Community Hospitals and Nursing Homes.

Ms Hazel Smullen
Quality/ Safety/ Practice Development Coordinator for North West Hospice



Volunteer Service Report

The North West Hospice Volunteer Programme is now in its seventh year. Our volunteers remain an integral part of the services offered by the Hospice. They bring with them a passion to be of service to the patients and families who utilise the North West Hospice and to the staff who are providing them on a daily basis.



Many different reasons bring people to offer their time to the North West

Hospice. For some it is a wish to 'give something back' having had a relative or
friend being cared for by the Hospice. Others simply wish to be involved in some way in their
community and for some it is the wish to make new friendships and be part of something good. We
have many professional people who bring their skills and talents to the Hospice free of charge such
as chiropodists, florists, hairdressers etc. This enables us to provide these services to our service
users free of charge which enhances their experience of the hospice and can sometimes ease a
burden on families and friends.

We are always working to enhance the experience of our Volunteers by providing continuous support, training and interaction so that they always feel part of the team. This year Mindfulness workshops were provided to those who wished to partake. We continue to meet with our volunteers on a regular basis so as that they have time and a platform to discuss anything that may have arisen during their volunteering. We remain in touch with other organisations across the country to garner knowledge and ideas about how we might encourage our volunteers and keep them engaged and rewarded in their work.

We have many different aspects to volunteering. The different roles include reception cover, driving, hairdressing, collecting mite boxes, reflexology, hospitality, gardening, home baking, beauty therapy and many more. We also have our two charity shops which rely heavily on volunteers to help staff these shops and to collect and sort the donations. The shops have proved to be a great source of income to the hospice and a way for many people to be involved in raising funds, from the people who generously donate items to those who sort, price and sell in the shops.

The age profile of our volunteers vary from the 15- 16 year old transition student who might help with bag packing or sunflower days collections with direction from the Transition Year Co-ordinators, to those who provide reception cover, some of whom are in their 80's. The wealth of knowledge and life experience, skills and enthusiasm that each of these volunteers bring could not be replicated in any other way.

With patient care remaining our focus we are still looking to expand our volunteer services with roles such as Home Visitor, Bio Energy Therapist, Reiki Therapist etc. We are continuously looking for ways to improve the experience for everyone who has need of hospice services. Volunteers can often provide a very important aspect of the care we bring both in the services they provide and the very act of giving of themselves so selflessly can inspire and comfort people.



I would like to take the opportunity as the Volunteer Coordinator to thank and acknowledge the invaluable contribution of each and every volunteer.

Paula Cooney

Volunteer Co-ordinator

Volunteer Role	No. of Volunteers	No. of
		hours/annum
Receptionist	49	3555.50
		(approx.)
Hospitality	3	384 (approx.)
Musician	4	192 (approx.)
Hairdresser		Flexible
Graphic Designer	1	Flexible
Home Baker	3	268 (approx.)
Gardener	2	96 (approx.)
Flower Arranger	1	96 (approx.)
Dog Therapist	1	96 (approx.)
Box Collector	5	Flexible
Reflexologist	2	384(approx.)
Driver	2	Flexible
Photographer	1	Flexible
Massage Therapist	2	Flexible
Podiatrist	1	Flexible
Chiropodist	1	Flexible
Barber	1	Flexible
Charity Shop	39	Flexible



Fundraising Report

To maintain our current level of service, we must raise in excess of €1.3 million every year from fundraising events, voluntary contributions, donations and bequests. Given the fact that our catchment area has a relatively small population of 110,000 people, this is a huge challenge and one which we can only meet through the generosity and goodwill of individuals and groups in the community. In 2017, to meet this growing challenge we decided to embark on another source of income and opened our first charity shop in 2017 and a second in 2018. For the purpose of this report, there are two updates:

- 1. Fundraising & Communication
- Charity shops

1 Fundraising & Communication update

2019 was an incredibly busy year for the Fundraising and Communications team at North West Hospice. The work of the team is to organise North West Hospice led events and also to support North West Hospice supporters in the community to run their own events. During 2019, the team supported well over 200 community initiated events. Typically, each of these events require the following support to be provided: letters of support, Garda permits, PR, Social Media, posters, attendance at events and cheque presentation.



We had 54 participants in the 2019 VHI Women's Mini Marathon which raised €21,857 for North West Hospice. This was an increase of 33% on the funds raised in 2018. This annual event garners great support and commitment from many ladies in our local community.

Sunflower Days, our annual national Hospice street collection day, raised €34,280 in 2019. This was a 15% decrease on the 2018 figure but adverse weather conditions most likely caused this decrease.

Ireland's Biggest Coffee Morning together with Bewley's is our biggest annual fundraiser held annually in September. The 2019 North West Hospice Coffee Morning brought in €130,639.25 an increase of €15,000 on 2018. The success of last year's Coffee Morning is testament to the number of loyal supporters we have in our community and the registration of many new Coffee Hosts who came on board as a result of our 'Host the Host, Coffee Morning' held at the Glasshouse Hotel, Sligo, in April 2019. This event was designed to thank our long-term coffee hosts and the subsequent publicity helped us to recruit many new hosts.

In October 2019, our Hospice Memorial Walk raised €23,632. This is an event where many bereaved families come together and walk in memory of their loves ones lost. Participants gratefully fundraise for us as part of this event but also report that the day means a lot to them as they remember their loved ones. We hope to continue to develop this special event into one of our biggest annual events to provide the opportunity for all in our community to benefit from the positive spirit on the day.

Our Christmas events are a vital part of our annual fundraising and 2019 saw an increase in funds generated from some of our key activities. Our Memorial Tree event raised €5,539 a 50% increase on 2018. Our Christmas cards raised €22,581 a 60% increase on 2018, due in part to us selling them earlier in the year.



We are incredibly grateful to all our donors, supporters and volunteers.

Operating our Fundraising and Communications Department from our Hospice Centre in Wine Street is continuing to have a positive impact on our operations. The community feel that we are much more accessible now and they frequently 'drop in' to make donations or volunteer their support for our events. The plan is to remain here until our new hospice In-Patient Unit is built in the coming years.

On behalf of all those who use North West Hospice services, their families and friends, we would like to extend our most heartfelt thanks to all our supporters. Our generous local community continue to be at the heart of all that we do at North West Hospice.

Thanks to their continued commitment, we can continue to provide palliative care with compassion to all in our community who need us.

Ms. Bernadette Mc Garvey,

Head of Communications & Fundraising

2 Charity Shops Update

We opened our Sligo charity shop in late 2018, following the opening of our Carrick on Shannon shop in 2017. Both shops has continued to grow making 2019 a phenomenal year.

The combined revenue of both shops exceeded_over €300,000.00

All this was achieved through having an excellent team of volunteers covering six days a week, a combined total of 62 volunteers in the Sligo and Carrick on Shannon shops.



Our volunteers are dedicated to the cause of North West Hospice and we would simply not manage without them.

Another huge support is our local Sligo Leader Partnership who gives us the support of an additional 6 staff members working with us throughout the year.

We are gaining a reputation of having quirky stock; you might come in with the intention of buying a pair of jeans and end up leaving with a vintage bedside table.

We have been hugely supported by our wonderful community who continue to donate excellent quality furniture, clothes, brick o' brack and jewellery.

Another support is the advertising we receive through Ocean FM who broadcasted live from the Sligo shop on two occasions in the year to announce the North West Hospice Radio Bingo jackpot winners. This was a great source of advertisement and at no cost to us.

Due to the demand for furniture and request for "collections and delivery", we took on a part time van driver in the latter part of the year and this has proved very successful in ensuring a fast turnover of stock and delivery to the customer promptly.



Our Carrick on Shannon shop continues to trade well with a great team of volunteers. It had challenges this year in that the whole of the Market Yard was covered in by an amazing suspended roof which has totally enhanced the whole area. However this took some time and caused disruption to trade over a number of months while under construction. Notwithstanding this our volunteers persevered and had a good financial year.

Last but not least a big thank you to our customers who come through our doors to make their purchases.

With the huge success of 2019 we are confident that sales figures will continue to grow in 2020.

Ms. Mary Forte

Commercial Manager



Strategic Plan 2016-2020 - Progress in 2019

Mr. John Hennessey, HSE National Director for Primary Care officially launched the North West Hospice 5 years Strategic Plan 2016-2020 on the 18th August 2016. Eight objectives were identified. The progress to date on all eight objectives is outlined in below table.

1	To reaffirm our commitment to our ensuring that our standards of spec associated holistic support are deliv	ialist palliative care and	Progress in 2019
Objectives and Activities	S Output	Time Scale	Progress in 2019
Regularly review and evaluate the provision patient care, incorporating the view of patients, families healthcare profession to ensure its quality appropriateness	ews ews and enals, Results of evaluations	 Review/evaluation of services each year Results included in annual report 	 Establishment of Board Quality and Patient Safety subcommittee Incidents /complaints/ comments/ feedback reviewed and standing item on operational Integrated Quality and Safety committee meeting and overseen by the Board Quality and Patient Safety subcommittee. Policy/Procedure and audit report presented to Board Quality and Patient Safety committee as standing agenda item.
We will run an annusurvey of our stakeholders (patien families, carers, staff healthcare profession and people in our wicommunity) to help understand people's views on the work of Hospice and our futurities	reported on our website and within our f, published annual report ider us ff the	 Annual survey and reporting 	 Facilities for feedback on Hospice site i.e. comment boxes Complaints / feedback log form updated to record written and verbal complaints/ feedback Exploring further methods to receive feedback from service users.
■ We will engage with patients and their families in order to understand the perspectives of thos who use our services to discuss future priorities for North Mospice	implement a mechanism for engagement se s and	■ Engagement to commence by early 2016	■ Facilities in place to receive feedback from patients and families.
■ We will review the roof spiritual support provided within Nor West Hospice on an inclusive basis, recognising the dive	recommendations will th be brought to the Board and an appropriate	Review and recommendations by early 2016	 2nd Social Worker in post Hospice linked with chaplaincy in Sligo University Hospital All religious denominations accessible for patients and families.



of those who use our	implementation	■ Implementation	
services, and make	process commenced	from early 2016	
enhancements or		onwards	
changes as necessary			

2	physica	ease the size of our inpatient un al infrastructure of the Hospice i ve care		Progress in 2019
Objectives and Activi	ities	Output	Time Scale	Progress in 2019
■ We will examine demand for in-papalliative care se within our region order to inform analysis of the optimum size of North West Hosp patient unit	atient ervices n, in our the	Analysis to be included in formal Business Case to the HSE	Business case submitted to HSE Q1 2016 Formal response from HSE by Q2 of 2016 If approved (tentative timescales only): Development control plan 2016 Detailed design / planning 2017 Construction 2018-19 Opening of new North West Hospice 2019-2020	 Final design and application submitted for planning permission Working with HSE Estates to agree a plan to fund the construction costs of project. Board "New Build" subcommittee with Terms of Reference being considered.
We will submit a formal business the HSE in respect the capital funding required for our proposed redevelopment, options	case to ct of ng	Submission of formal Business Case to the HSE	■ Board sign-off of Business Case and submission to HSE during Q2 of 2016	 Capital plan approved on HSE National Development plan fo 2021. Discussions on going to escalate to earlier timeframe. Planning permission submitted in Dec 2019



To pr withi withi intern	Progress in 2019		
Objectives and Activities	Output	Time Scale	Progress in 2019
■ We will deliver palliative care services in line with the annual Service Plan agreed with the HSE	Service Plan to be agreed with the HSE and signed off by both parties	■ Final sign-off by end of Q2 annually	As per Service level agreement with the HSE and signed by Board of management in Feb 2019.
■ We will ensure that we are appropriately resourced with senior clinical staff, to reflect our growing caseload and complexity of work	 We will aim to recruit a second full-time Consultant in Palliative Medicine We will aim to have a dedicated Assistant Director of Nursing in position on a full-time, dedicated basis 	 Confirmed by end of Q2 2016 Confirmed by end of Q2 2016 	 Permanent contract for 2nd Consultant in Palliative Medicine approved in July 2019 Proposal to convert Assistant Director of nursing position to Director of Nursing position dedicated to Hospice only. For further review in 2019 in context to plans to extend bed compliment in New build.
We will examine best practice in palliative care within each of our care settings as part of on-going Quality and Safety / Training and Education initiatives	■ We will implement "Towards Excellence in Palliative Care Self- Assessment tool" against the "National Standards for Safer Better Healthcare", 2014 ■ Agreed Quality Improvement recommendations from self-assessment brought to the North West Hospice executive and Board, and prioritised as appropriate ■ Service improvements will be reported in our Annual Report	 Self-assessment complete by end of Q2, 2016 Quality Improvement plans for all three care settings will be progressed and completed Q2 2016 On-going self-assessment to continue to monitor progress Annual: Included in Annual Report Q2 2016 	 On-going self-assessment in collaboration with National collaborative Committee Quality Improvement plans agreed with Operational Management team and reviewed at integrated Quality and Safety and Board Quality and Safety subcommittee. Included in Annual Report under Quality/ Safety Report
We will continue to work in close partnership with our colleagues in Sligo University Hospital, and with GPs, nurses and other health professionals across the North West, to ensure that we provide a highly integrated	■ Partnership working and service integration will be specifically reported in our Annual Report	■ Annual: Included in Annual Report Q2 2016	■ Included in annual report under "Quality/ Safety " Report



service across all aspects of care and all care pathways			
--	--	--	--

4	to fulfil our	new opportunities to develop mission and vision, either indiv rganisations	Progress in 2019	
Objectives and Ac	tivities	Output	Time Scale	Progress in 2019
■ We will continue to engage with Co-Operation and Working Together (CAWT) in respect of possible crossborder initiatives		 On-going contact and reporting to the North West Hospice Board on progress 	Annual report to the Board	 On-going engagement with HSE projects relevant to palliative care
■ We will liaise with other organisations providing services which are relevant or complementary to palliative care		■ Engagement with other service providers, and signing of Memoranda of Understanding in relation to complementary work / joint projects	 On-going over life of strategy 	 On-going engagement with Centre for Nurse / Midwifery Education and St. Angela's College to support on-going education for nursing staff
■ We will further relationships decision-maker relation to see North West Hoffer	with key ers in rvices which	Regular engagement and six-monthly "strategic contact" report by the Hospice Manager to the North West Hospice Board	Six-monthly report to the Board	■ North West Hospice provides education/ training to clinical staff providing palliative care in level 2 facilities and staff in the community services i.e. PHNs, GPs, Home help providers.

	To cherish and develop our staff and volunteers so that they can continue to provide the highest levels of compassionate care to patients and their families		Progress in 2019
Objectives and Activities	Output	Time Scale	Progress in 2019
 Organisational development plan approved by North West Hospice Board 	■ Development and implementation of an organisational development plan for North West Hospice	 End of Q2 2016 – development of plan On-going during 2016 implementation of plan Governance Appraisal Report 2018 	 Extensive engagement with CHO1, HSE and Board of Directors in 2019 following up on Governance Report 2018. Agreement and new organisational structure agreed to accompany 2020 Service Level Agreement.
■ Training and Development Plan	■ We will enhance the training and development of Board directors, management, staff and volunteers	 Annual submission to North West Hospice 	 Training and development for Board of Directors on going with training attended in 2019. Training/ Education policy for staff / Volunteers Implemented Professional Development plans continues in 2019
■ Improved data collection mechanisms identified and developed that can improve delivery or affect services	 Develop management information system for strategic decision-making 	■ Compliance with GDPR legislation introduced on 18 th May 2018	 Extensive work completed of data collection mechanisms to comply with General Data Protection legislation introduced on 18th May 2018 GDPR internal audits introduced in 2019
Staff feedback mechanism	■ Safe and supportive working environment for North West Hospice staff	■ To be implemented by end Q1 2016 and ongoing over life of plan	 Staff Support/ Training / Education Policy agreed and approved Access to Occupational Health for all staff



		ial sustainability of North West Ho ts services to people with life-limi		Progress in 2019
Obj	jectives and Activities	Output	Time Scale	Progress in 2019
•	In order to focus on the sustainability of North West Hospice as a whole, we will assess the breakeven position of each of our main activities on an annual basis	Annual breakeven review of each activity area, and reports to the North West Hospice Board	Q3 / Q4 of each year, in line with annual business planning process	 Finance Manager attends each Board meeting. Board Finance subcommittee in place where Detailed Financial reports is provided and then fed back to the other Board Directors by Chair at each Board meeting.
	So that we may ensure our future financial sustainability, diversify our income streams and establish new revenue sources, we will develop an Income Generation Plan for approval by the Board	■ Income Generation Plan with clear revenue targets from each of our identified activity areas.	Sign-off of Income Generation Plan by North West Hospice Board no later than end of Q1 2016, and each succeeding year on an annual basis (ideally by end Q3 in succeeding years).	 Events and targets agreed with lead responsibilities assigned to Community Relations Coordinators New revenue streams Targeted.
•	We will engage with the HSE in respect of the capital funding required for our proposed redevelopment	Submission of formal Business Case to the HSE	Board sign-off of Business Case and submission to HSE during second half of 2016	 Request to increase funding in line with public sector pay awards and reduce need to fundraise for core costs. Capital plan approved on HSE National Capital Plan
	We will decentralise our premises to establish an accessible centre in Sligo Town, which can house our fund-raising and non-clinical office space	New town centre premises open	■ By end of Q1 2016	■ Progressed



7		organisation is governed and manag nd in compliance with all regulatory		Progress in 2019		
Objectiv Activitie		Output	Time Scale	Progress in 2019		
the of a pla to o cor ma rep Boo rea of t	e will work on e development a succession in for the Board ensure intinuity and the enaged olacement of ard members eching the end their term of	Board succession plan to be drafted and discussed annually	■ Annual	■ In place		
to s Boo gov arr inc inti Boo wit	e will continue strengthen the ard and our vernance rangements, cluding roducing new ard members th skill sets and perience which n add real value	■ New Board members to be added as current members reach the end of their terms of office, and Board makeup to be kept under review	■ On-going	 Resignation of 3 Board Directors in 2019 in line with North West Hospice Board policy on maximum length of time as Board Directors New Board Director appointed to replace the financial skills of Board Director resigned. 		
full wit reg arr	e will move to I compliance th the new gulatory rangements for arities	 Quarterly compliance report to North West Hospice Board by Hospice Manager 	■ Quarterly	Governance update is standing item at each Board meeting. New mandatory governance code for charities launched in quarter 3 2018 with full compliance required by all charities in 2021. Board Directors commenced review with Operational Management Committee in 2019.		
tra ope hov spe	e will be insparent and en regarding w money is ent within North est Hospice	 Annual report detailing our income and expenditure, in line with best practice and regulatory standards for charities 	■ Annual	 Annual report detailing all audited accounts 		



■ We will engage with HIQA, the HSE and Department of Health as appropriate in respect of future licensing	 Report and recommendations to North West Hospice Board as necessary 	On-going; to be formally tabled for discussion at least annually	■ Self-assessment of " Towards Excellence in Palliative Care" standards on going and reported back to Board of Directors via Board Quality and safety sub committee
■ We will maintain our formal risk register and update it monthly	■ Formal Risk Register presented quarterly to NWH Board	Complete by end Q2 2016	 Quality and Safety standing item at Board meetings report Board Quality & Safety subcommittee established in quarter 1 2018 and on-going in 2019.

8	•	organisational structure, resources n West Hospice to deliver all aspects ve years		Progress in 2019		
Objectiv Activitie		Output Time Scale		Progress in 2019		
our stru con: stre exec adm stru resc mak chai add stru	ognising that organisational cture has eent capacity straints, we will ngthen our cutive and ninistrative cture / ources by king targeted nges and itions to our cture tinuous nitoring	 Report and recommendations to North West Hospice Board New positions in place via formal recruitment process 	 New positions in place by end Q2 2016 Further work in 2019 to regularise Hospice Manager and ADON post. 	Board of Directors and HSE approved Governance Option Appraisal Report in January 2018 with extensive progress on same in 2019.		
that app resc seni to ro grov and wor	will ensure twe are ropriately burced with or clinical staff, eflect our wing caseload complexity of k (in line with ective 3 above)	 We will aim to recruit a second full-time Consultant in Palliative Medicine We will aim to have a dedicated Assistant Director of Nursing in position on a full-time, dedicated basis 	Confirmed by end of Q3 2016Confirmed by end of Q3 2016	 2nd Consultant in Palliative Medicine in post, HSE permanent contract approved in July 2019. Proposal to convert Assistant Director of Nursing in post to a full time dedicated post is on-going with the HSE 		



•	We will ensure that our organisation has effective reporting, internal control and accounting systems	•	Review and reports on the systems of internal control, reporting and accounting to ensure that they are sufficient to support North West Hospice to the best standards	Initial report by end of Q2 2016 followed by a bi- annual review	 Policy/ Procedure/ Guidelines committee and audit committee in place. The committees oversees and reviews all policies/procedures and audits and reports progress to Board Quality and Safety sub committee Monthly activity and KPIs returned to HSE Audited accounts published in annual report yearly Internal financial audits continuing.
	Using the scorecard presented in this strategic plan, we will develop performance management arrangements to help us monitor and report progress and achievement against targets	•	Agree performance management targets and reporting mechanism Reporting of achievement against targets	Board agreement by end of Q1 2016 Monthly (internal); Annually (external reporting)	Detailed progress on all eight objectives reported in Annual Report



Financial Statement & Accounts

Company registration number: 119501

North West Hospice Company Limited by Guarantee The Mall Sligo

Reports and Financial Statements

for the financial year ended 31st December 2019

North West Hospice Company Limited by Guarantee

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Directors and other information at date of approval of financial statements

Directors Patrick Dolan (Chairperson)

Siobhan O'Dowd James Callaghan Aisling Barry Mary Curran Declan Hegarty Noel Scott Dr. Fiona Quinn George Chadda John McElhinney Shane Ward

Daniel Browne

(Vice Chairperson)

Secretary Noel Scott

Company number 119501

Registered charity number 20018863

Registered office The Mall

Sligo

Auditor Gilroy Gannon

Chartered Accountants and Statutory Audit Firm

Stephen Street

Sligo

Bankers Ulster Bank

Stephen Street

Sligo

Permanent TSB 22 O'Connell Street

Sligo

Solicitor Michael J Horan

Floor 1

Millennium House Stephen Street

Sligo

Directors Report

The directors present their annual report and the audited financial statements of the company for the financial year ended 31st December 2019.

North West Hospice Company Limited by Guarantee was incorporated on 16th January 1987 as a company limited by guarantee without a share capital. The company's Constitution limits the liability of each member to such amounts as maybe required but not exceeding €1.27 each.

Principal activities

North West Hospice Company Limited by Guarantee is a registered charity. Its purpose is to provide specialist care with compassion for those living with life-limiting illness in Sligo, Leitrim, South Donegal and West Cavan and offer a full range of consultant-led specialist palliative care services through it's In-Patient Unit, Community Palliative Care Team and Hospital Support Team. The company receives statutory funding and relies on voluntary contributions to fund the service.

The company has been granted charitable status by The Revenue Commissioners and is registered under number CHY7983.

Review of the business during the year ended 31st December 2019

The directors are truly grateful to the public for their generous donations; fundraising and sponsorship during the year. To provide the current level of service, fundraising in excess of €1m is required annually.

The company could not provide the level and care to patients and families without the support of staff and volunteers and the directors wish to acknowledge their appreciation to them for their work throughout the year.

During the year ended 31st December 2019, capital costs of €158,706 were incurred on the planning and design of a new In-Patient unit at The Mall, Sligo.

Results for the financial year

	2019	2018
	€	€
Surplus/(Deficit) from the provision of services	40,942	(24,191)
Interest	-	11,403
Other income	112,593	66,000
Transfer to capital contributions	(112,593)	(66,000)
	40,942	(12,788)
	The state of the s	

Likely future developments

The directors are committed to continue seeking funding to maintain the level of service and are eternally grateful to all supporters and donors for their ongoing support.

The company's strategic plan expires at the end of 2020 and the directors intend to complete a new 5 year plan effective from 2021.

The company is engaging with the HSE to develop a new 12 bed, single room In-Patient unit on the existing site at The Mall, Sligo in accordance with the objectives of its strategic plan 2016-2020. The directors acknowledge the approval of the HSE nationally for the advancement of this capital project.

Directors Report

Principal risks and uncertainties

The directors are aware of the key risks to which the charity is exposed, in particular those relating to the operations and finances of the company. One of the key operational risks is providing a consistent delivery of quality specialist care which is addressed through its qualified and trained staff and having appropriate policies and procedures in place. The company is dependent of the ongoing support of the HSE for funding of the service which is agreed annually through a Service Level Arrangement.

Assets and liabilities and financial position

Net assets of the company of €2,504,457 at 31st December 2019 (2018: €2,350,922) is required in accordance with a reserve policy and for the future development of the hospice facility and to maintain the current level of services for the foreseeable future.

Events after the end of the reporting period

Since the financial year end, a COVID-19 pandemic virus spread worldwide resulting in the introduction by Government of restriction measures for people and businesses. During this time, to adhere to these measures and in the protection of patients and staff, the hospice reviewed its practices to continue offering support to family and patients with life limiting illness. The COVID-19 virus has had a significant impact on fundraising efforts; its charity shops and volunteer groups.

The directors are also delighted to report that, since the year end, preliminary planning permission for the new In-Patient unit has been approved.

The Service Level Arrangement for the year ended 31st December 2020 between the HSE and the company has been signed.

Directors

The names of the persons who at any time during the financial year were directors of the company are as follows:

Patrick Dolan

Siobhan O'Dowd (Appointed 18th February 2019) James Callaghan

Aisling Barry
Mary Curran

Declan Hegarty

Noel Scott

Dr. Fiona Quinn

George Chadda John McElhinney

Daniel Browne

Shane Ward (Appointed 12th September 2019)

Noel Walsh (Resigned 18th June 2019)

Winifred McDermott (Resigned 18th June 2019)

Dymphna Gorman (Resigned 18th June 2019)

The following four sub-committees, with its own terms of reference, report directly to the Board:

- Board Quality and Safety
- Board Development
- Finance and audit
- H.R.

Secretary

The company secretary throughout the year was Noel Scott.

Directors Report

Political donations

During the year ended 31st December 2019 the company did not make any disclosable political donations.

Accounting records

The measures taken by the directors 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 implementation of necessary policies and procedures for recording transactions, the employment of competent accounting personnel with appropriate expertise and the provision of adequate resources to the financial function. The accounting records of the company are located at Hospice Centre, Adelaide Building, Wine Street Car Park, Sligo.

Relevant audit information

In the case of each of the persons who are directors at the time this report is approved in accordance with section 332 of Companies Act 2014:

- so far as each director is aware, there is no relevant audit information of which the company's statutory auditors are unaware, and
- each director has taken all the steps that he or she ought to have taken as a director in order to make himself or herself aware of any relevant audit information and to establish that the company's statutory auditors are aware of that information.

Auditors

In accordance with Section 383(2) of the Companies Act 2014, the auditors, Gilroy Gannon Chartered Accountants and Staturory Audit Firm, will continue in office.

This report was approved by the board of directors on 11th June 2020 and signed on behalf of the board by:

Pat Dolan	Slobhan O'Dowd	
Chairperson	Director	

Directors Responsibilities Statement

The directors are responsible for preparing the directors report and the Financial Statements in accordance with Irish law and regulations.

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 the Companies Act 2014 and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland", applying Section 1A of that Standard, which is issued by the Financial Reporting Council, ("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 company as at the financial year end date and of the surplus or deficit of the company for the financial year and otherwise comply with the Companies Act 2014.

In preparing these Financial Statements, the directors are required to:

- select suitable accounting policies and then apply them consistently;
- · make judgments and accounting estimates that are reasonable and prudent;
- state whether the Financial Statements have been prepared in accordance with 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 company will continue in business.

The directors are responsible for ensuring that the company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the company, enable at any time the assets, liabilities, financial position and surplus or deficit of the company 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 company 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 company's website. Legislation in Ireland governing the preparation and dissemination of financial statements may differ from legislation in other jurisdictions.



Independent Auditor's Report to the members of North West Hospice Company Limited by Guarantee

Report on the audit of the financial statements

Opinion

We have audited the Financial Statements of North West Hospice Company Limited by Guarantee for the year ended 31st December 2019, which comprise the Income and Expenditure Account, Balance Sheet, Statement of Changes in Equity and notes to the financial statements, including a summary of significant accounting policies set out in note 3. The financial reporting framework that has been applied in their preparation is Irish Law and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland".

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the company as at 31st December 2019 and of its results for the year then ended;
- have been properly prepared in accordance with FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland; and
- have been properly prepared in accordance with the requirements of the Companies Act 2014.

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 further described 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 ethical requirements that are relevant to our audit of financial statements in Ireland, including IAASA's Ethical Standard and the provisions available for small entities in the circumstances set out in note 18 to the financial statements 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 the 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 annual report other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

Independent Auditor's Report to the members of North West Hospice Company Limited by Guarantee (continued)

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

We have nothing to report in this regard.

Opinions on other matters prescribed by the Companies Act 2014

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

- in our opinion, the information given in the directors' report is consistent with the financial statements; and
- in our opinion, the directors' report has been prepared in accordance with the Companies Act 2014.

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, and financial statements are in agreement with the accounting records.

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 any material misstatements in the directors' report.

The Companies Act 2014 requires us to report to you if, in our opinion, the disclosures of directors' remuneration and transactions required by sections 305 to 312 of the Act are not made. We have nothing to report in this regard.

Respective responsibilities

Responsibilities of directors for the financial statements

As explained more fully in the directors' responsibilities statement set out on page 5, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view, and for such internal control as they 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.

Independent Auditor's Report to the members of North West Hospice Company Limited by Guarantee (continued)

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: http://www.iaasa.ie, under "Description of auditors responsibilities for audit". This description forms part of our auditor's report.

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

Our 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.

Sinead Mc Hugh
For and on behalf of
Gilroy Gannon
Chartered Accountant and Statutory Auditor
Stephen Street
Sligo

Date: 11th June 2020

Income and Expenditure Account Financial year ended 31st December 2019

	Note	2019 €	2018 €
State Grants and Service Income	4	2,386,528	2,364,725
Expenditure		(2,345,586)	(2,388,916)
Surplus/(deficit) on the provision of services	6	40,942	(24,191)
Interest		-	11,403
Other Income	5	112,593	66,000
Transfer to Capital Contributions		(112,593)	(66,000)
Surplus/(deficit) for the financial year		40,942	(12,788)

Balance Sheet As at 31st December 2019

		2019		2018	
	Note	€	€	€	€
Fixed assets Tangible assets	9	206,625		78,567	
Financial assets		1,657,676		1,657,676	
			1,864,301		1,736,243
Current assets					
Debtors	10	91,275		516,223	
Cash at bank		849,969		251,911	
		941,244		768,134	
Creditors: amounts falling due				(100 155)	
within one year	11	(301,088)		(138,455)	
Net current assets			640,156		629,679
Total assets less current liabilities			2,504,457		2,365,922
Deferred Income	12		-		(15,000)
					0.000
Net assets			2,504,457		2,350,922
Reserves					
Capital Contributions	14		178,593		66,000
Income and Expenditure Account			2,325,864		2,284,922
			2,504,457		2,350,922

These Financial Statements have been prepared in accordance with the Small Companies' Regime.

These Financial Statements were approved by the board of directors on 11th June 2020 and signed on behalf of the board by:

Patrick Dolan	Siobhan O'Dowd
Chairperson	Director

The notes on pages 12 to 21 form part of these Financial Statements.

Statement of Changes in Equity Financial year ended 31st December 2019

	Capital Contributions	Income and Expenditure Account	Total
	€	€	€
At 1st January 2018	-	2,297,710	2,297,710
(Deficit) for the financial year Increase in capital contributions	- 66,000	(12,788)	(12,788) 66,000
At 31st December 2018 and 1st January 2019	66,000	2,284,922	2,350,922
Surplus for the financial year Increase in capital contributions	- 112,593	40,942	40,942 112,593
At 31st December 2019	178,593	2,325,864	2,504,457

Notes to the Financial Statements Financial year ended 31st December 2019

1. General information

The financial statements comprising the Income and Expenditure Account, the Balance Sheet, the Statement of Changes in Equity and the related notes constitute the individual financial statements of North West Hospice Company Limited by Guarantee for the Financial year ended 31st December 2019.

North West Hospice Company Limited by Guarantee is a private company limited by guarantee, (registered under Part 18 of Companies Act 2014), incorporated and registered in the Republic of Ireland (CRO number 119501). The company is a charity and has been granted charitable tax exemption (CHY 7983). The registered office is The Mall, Sligo which is also the principal place of business of the company. The nature of the company's operations and its principal activities are set out in the Directors' Report.

2. Statement of compliance

These Financial Statements have been prepared in compliance with FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" (FRS 102), applying Section 1A of that standard.

3. Summary of significant accounting policies

The following accounting policies have been applied consistently in dealing with items which are considered material in relation to the company's financial statements.

Basis of preparation

The Financial Statements have been prepared on the going concern basis and in accordance with the historical cost convention modified to include certain items at fair value. The financial reporting framework that has been applied in their preparation is the Companies Act 2014 (the Act) and FRS 102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland issued by the Financial Reporting Council".

The company qualifies as a small company for the period, as defined by Section 280A of the Act, in respect of the financial year, and has applied the rules of the "Small Companies Regime" in accordance with Section 280C of the Act and Section 1A of FRS102.

The Financial Statements are prepared in Euro, which is the functional currency of the entity.

Notes to the Financial Statements Financial year ended 31st December 2019

Judgements and key sources of estimation uncertainty

The directors consider the accounting estimates and assumptions below to be its critical accounting estimates and judgements:

Going Concern

The directors have considered budgets and cash flows for a period of at least twelve months from the date of approval of the financial statements which demonstrate that there is no material uncertainty regarding the company's ability to meet its liabilities as they fall due, and to continue as a going concern. The company is dependent on the Health Service Execurtive (HSE) for funding and this economic dependancy is underpinned by a Service Level Arrangement (SLA) between the HSE and the company. The directors have also given consideration to the immediate and longer term impact of the COVID-19 pandemic and believe that the company has sufficient cash resources to sustain it for at least twelve months from the date of approval of the financial statements. On this basis the directors consider it appropriate to prepare the financial statements on a going concern basis. Accordingly, these financial statements do not include any adjustments to the carrying amounts and classification of assets and liabilities that may arise if the company was unable to continue as a going concern.

Useful Lives of Tangible Fixed Assets

Long-lived assets comprising primarily of Improvements to leasehold premises and Fixtures, fittings and equipment represent a significant portion of total assets. The annual depreciation charge depends primarily on the estimated lives of each type of asset and, in certain circumstances, estimates of residual values. The directors regularly review these useful lives and change them if necessary to reflect current conditions. In determining these useful lives management consider technological change, patterns of consumption, physical condition and expected economic utilisation of the assets. Changes in the useful lives can have a significant impact on the depreciation charge for the financial year. The net book value of Tangible Fixed Assets subject to depreciation at the financial year end date was €206.625.

Revenue recognition

Income from state grants is recognised in the year to which it relates, when the company has entitlement to the funds, it is receivable and can be measured reliably.

Income from donations, bequests and fundraising activities is recognised when received into the company's bank account. As with many similar charity organisations, independent groups from time to time organise fundraising activities. As amounts collected in this way are outside of the control of the company, they are not included in the financial statements until they are received into the company's bank account.

Income from radio bingo is recognised as receivable.

Proceeds from the sales of donated goods are recognised as received.

Taxation

No corporation tax liability arises as the company has charitable status. (Charity number: CHY 7983).

Tangible assets

Tangible assets are initially recorded at cost, and are subsequently stated at cost less any accumulated depreciation and impairment losses.

Any tangible assets carried at revalued amounts are recorded at the fair value at the date of revaluation less any subsequent accumulated depreciation and subsequent accumulated impairment losses.

Notes to the Financial Statements Financial year ended 31st December 2019

Depreciation

Depreciation is provided on all tangible fixed assets, other than Inpatient unit, at rates calculated to write off the cost or valuation, less estimated residual value, of each asset systematically over its expected useful life, on a straight-line basis, as follows:

Improvements to leasehold premises - 10/15% per annum Fittings fixtures and equipment - 15/20% per annum Motor vehicles - 20% per annum

The residual value and useful lives of tangible assets are considered annually for indicators that these may have changed. Where such indicators are present, a review will be carried out of the residual value, depreciation method and useful lives, and these will be amended if necessary. Changes in depreciation rates arising from this review are accounted for prospectively over the remaining useful lives of the assets.

No depreciation has been charged to the In-Patient unit as the asset is not yet in use.

Financial assets

The financial asset relates to a term deposit investment.

Impairment

A review for indicators of impairment is carried out at each reporting date, with the recoverable amount being estimated where such indicators exist. Where the carrying value exceeds the recoverable amount, the asset is impaired accordingly. Prior impairments are also reviewed for possible reversal at each reporting date.

When it is not possible to estimate the recoverable amount of an individual asset, an estimate is made of the recoverable amount of the cash-generating unit to which the asset belongs. The cash-generating unit is the smallest identifiable group of assets that includes the asset and generates cash inflows that are largely independent of the cash inflows from other assets or groups of assets.

Government grants

Government grants are recognised at fair value of the asset receivable using the accruals model when there is reasonable assurance that the grant will be received and all attaching conditions will be complied with. Grants towards capital expenditure are credited to deferred income and are released to the income and expenditure account over the expected useful life of the related assets, by equal annual instalments. Grants towards revenue expenditure are released to the income and expenditure account in the financial year to which they relate and on satisfaction of the grant conditions.

Defined contribution plans

Contributions to defined contribution plans are recognised as an expense in the period in which the related service is provided. Prepaid contributions are recognised as an asset to the extent that the prepayment will lead to a reduction in future payments or a cash refund.

When contributions are not expected to be settled wholly within 12 months of the end of the reporting date in which the employees render the related service, the liability is measured on a discounted present value basis. The unwinding of the discount is recognised in finance costs in income or expenditure in the period in which it arises.

Notes to the Financial Statements Financial year ended 31st December 2019

Financial instruments

Cash and cash equivalents

Cash consists of cash on hand and demand deposits. Cash equivalents consist of short term highly liquid investments that are readily convertible to known amounts of cash that are subject to an insignificant risk of change in value.

Other financial assets

Other financial assets including debtors and grants receivable are measured at amortised cost less impairment, where there is objective evidence of impairment.

Other financial liabilities

Other financial liabilities, including trade creditors, are initially measured at the undiscounted amount owed to the creditor, which is normally the invoice price. Liabilities that are settled within one year are not discounted. If payment is deferred beyond normal business terms or is financed at a rate of interest that is not a market rate, this constitutes a financing transaction, and the financial liability is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument. Subsequently, other financial liabilities are measured at amortised cost.

Capital contributions

Capital contributions are received for the new build capital project. In 2019, the directors approved that all bequests be directed to the new build capital project and accordingly, the bequests received in the year ended 31st December 2019 are included as capital contributions. Capital contributions are not amortised to the income and expenditure account in 2019.

Reserves policy

It is critical that the company has adequate reserves to continue providing a quality service, meet contractual obligations; cover day to day expenditure, future development of the facility, provide for any unexpected costs and funding for any winding up costs should they arise.

Notes to the Financial Statements Financial year ended 31st December 2019

4. State Grants and Service Income

State Grants and Service Income arises from:

	2019	2018
	€	€
Health Service Executive	1,066,780	1,143,780
Fundraising events	437,419	452,690
Supporters events	324,833	301,577
Charity shops	300,368	90,252
Donations	248,019	371,315
Tusla Family Support Agency	8,809	4,611
Other grants	300	500
	2,386,528	2,364,725

2010

2010

2010

Health Service Executive (HSE)

The HSE provides funding to North West Hospice Company Limited by Guarantee in line with Section 39 Service Level Agreement for palliative care services to those with life limiting illness in Sligo, Leitrim, South Donegal and West Cavan. The funding received from the HSE is towards the cost of services provided by North West Hospice Company Limited by Guarantee and is allocated to salary costs of its inpatient unit, community palliative care, hospital palliative care team, bereavement service and multi disciplinary team. Funds are recognised in the year to which the income relates. When funds are receivable at year end they are included in income and debtors at year end.

Funding awarded for the year ended 31st December was as follows:

2019	2018
€	€
966,780	966,780
100,000	177,000
1,066,780	1,143,780
	100,000

Funding recognised as income for the year ended 31st December 2019 was €1,066,780 (year ended 31st December 2018 was €1,143,780).

	2019	2018
	€	€
Funding received in the period - provision of palliative care services	1,345,190	1,123,587
Funding received in the period - schedule 10	100,000	
Funding due at year end	48,339	426,749
Funding received in year in relation to prior year	(426,749)	(406,556)
Income for the year	1,066,780	1,143,780

Notes to the Financial Statements Financial year ended 31st December 2019

Tusla Family Support Agency

Tusla Family Support Agenct provide funding allocated to the cost of employing a social worker. Funding received during the year amounted to €8,809.

5. Other Income

	2019	2018
	€	€
Bequests	35,789	-
Donations and fundraising events	76,804	66,000
	112,593	66,000

Other income relates to funds designated towards the new build capital project.

6. Surplus/(deficit) on the provision of services

Surplus/(deficit) on the provision of services is stated after (crediting)/charging:

	2019	2018
	€	€
Depreciation of tangible assets	40,727	39,999
Amortisation of capital grant	(15,000)	(15,000)

Notes to the Financial Statements Financial year ended 31st December 2019

7. Staff costs

The average monthly number of persons employed by the company during the financial year was 50 (2018: 45).

The aggregate payroll costs, net of recharges, during the financial year were:

	2019	2018
	€	€
Payroll costs	1,689,494	1,685,825
Social insurance costs	190,807	182,563
Other retirement benefit costs	113,270	116,672
	1,993,571	1,985,060

The key management are the board of directors and the hospice manager.

The directors did not receive any fees or remuneration in respect of their services during the year ended 31 December 2019. Services provided were on a voluntary basis. The hospice manager's remuneration for 2019 was paid by the HSE and reflected by the Service Level Arrangement.

The number of employees whose total employee benefits (excluding employer pension costs) for the reporting period fell within each band of €10,000 from €60,000 upwards are set out below.

	Employ	Employee numbers	
	2019	2018	
Bands			
€60,000 - €70,000	1	-	

8. Employee benefits

The amount recognised in the income and expenditure account in relation to defined contribution plans was €113,270 (2018: €116,672).

Notes to the Financial Statements Financial year ended 31st December 2019

9.	Tangible assets					
		Improvements to leasehold premises	Fixtures, fittings and equipment	Motor vehicles	In-Patient unit	Total
		. €	€	€	€	€
	Cost At 1st January 2019 Additions Disposals	793,515 - -	321,249 854 (15,876)	9,225 -	- 158,706 -	1,114,764 168,785 (15,876)
		702 515	306,227	9,225	158,706	1,267,673
	At 31st December 2019	793,515 ————	=====	=====	130,700	1,207,073
	Depreciation At 1st January 2019 Charge for the	765,947	270,250	-	-	1,036,197
	financial year	19,052	19,830	1,845	-	40,727
	Disposals		(15,876)			(15,876)
	At 31st December 2019	784,999	274,204	1,845		1,061,048
	Carrying amount At 31st December 2019	8,516	32,023	7,380	158,706	206,625
	At 31st December 2018	27,568	50,999	-		78,567
	The basis by which depreciation	n is calculated is s	stated in Note 3.			
10.	Debtors					
					2019	2018
	Debtors Grants receivable from HSE Prepayments				€ 18,705 48,339 24,231	€ 65,104 426,749 24,370
					91,275	516,223
					=======================================	
11.	Creditors: amounts falling du	ue within one yea	ır		2019	2018
					€	€
	Trade creditors Tax and social insurance:				35,371	10,039
	PAYE and social welfare				60,003	48,415
	Accruals				205,714	80,001
					301,088	138,455

Notes to the Financial Statements Financial year ended 31st December 2019

12. Deferred income

Government	grants
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	2019	2018
	€	€
At the start of the financial year	15,000	30,000
Released to income and expenditure	(15,000)	(15,000)
At the end of the financial year	-	15,000

13. Financial instruments

The carrying amount for each category of financial instruments is as follows:		
	2019	2018
	€	€
Financial assets that are debt instruments measured at amortised cost		
Financial assets	1,657,676	1,657,676
Debtors	18,705	65,104
Grants receivable from HSE	48,339	426,749
Cash at bank and in hand	849,969	251,911
	2,574,689	2,401,440
Financial liabilities measured at amortised cost		
Trade creditors	35,371	10,039

14. Capital contributions

During the year ended 31st December 2019, contributions totalling €112,593 were received through bequests and specific donations.

15. Capital committments

At the balance sheet date, the board had approved capital expenditure for the design and planning application for the new In-Patient unit.

Notes to the Financial Statements Financial year ended 31st December 2019

16. Events after the end of the reporting period

The directors are monitoring the effect of the COVID-19 virus on the company. The pandemic has had an impact on fundraising capabilities in 2020.

The Service Level Arrangement for 2020 between the company and the Health Service Executive has been signed.

The company applied for planning permission to Sligo County Council for construction of the new In-Patient unit and preliminary planning permission was granted in March 2020.

17. Related party transactions

The company did not enter into any related party transactions in the current or prior year.

18. Ethical standards

In common with many other businesses of similar size and nature the company's auditors assist with the preparation of the company's statutory financial statements.



Annual Report and Financial Statements 2019