

North West  
Hospice

Annual Report and  
Financial Statements  
2018

Specialist care with compassion

## 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 Financial Services, 25 Stephen Street, Sligo

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## Chairperson's Statement

In the 2017 Annual Report I focused on the work of the Board in pursuit of a number of key Objectives set out in our North West Hospice Strategy 2016-2020. The Board has continued to oversee and work in close collaboration with Hospice Management in pursuit of achieving the objectives as set out in 2018. Our work is at all times guided by our vision and mission statements which include; providing specialist care with compassion for those living with life-limiting illness in our community and being at the centre of palliative care services in the North West, working to ensure that everyone who needs palliative care can access services free of charge.

In our report of twelve months ago, I referred to our Capital Development Plan, the objective of working towards the provision of an-up-to date hospice building with modern facilities to bring our inpatient unit up to the standard required to deliver the highest possible quality of palliative care. HSE Estates personnel have been of exceptional assistance to Hospice Management and the Board in moving this objective forward. The Board wish to acknowledge and thank those involved for their expertise given to us so willingly in this endeavour. They have helped us turn our ambitious desire of a strategic objective to the reality of preliminary drawings. Ensuring the financial sustainability of North West Hospice as an organisation in the provision of palliative care while continuing to develop the service to achieve the highest quality of care is challenging. In meeting this challenge in addition to the established corporate fundraising events supported by the sterling contribution from volunteers, support groups and individuals from our community and beyond, North West Hospice management have been proactive in insuring that fundraising income levels remain at the current level or above. To this end two of the more important fundraising initiatives entered into in 2018 are; reaching out to the Diaspora in a more targeted manner than previous, and the setting up of a second Hospice shop. In relation to the former, the hospice Manager and a fundraiser in conjunction with a number of local supporters availed of an invitation from Sligo/Leitrim exiles in New York to travel to New York for St Patrick's Day festivities to meet and appeal to our Diaspora for financial support. An emphasis on the need to increase the size of our inpatient unit to twelve beds (single room accommodation) and redevelop the physical infrastructure of the hospice in line with best practice in Palliative Care was the theme used to engage the various captive audiences approached. It is hoped that this initial contact and network formation will yield fruitful results over time. The other fundraising venture was the opening of a second Hospice Charity Shop, located in Sligo. The main retail focus is on furniture as well as clothing. Early indications leading up to the Christmas period is that 'foot-fall' is good with much browsing and initial steady sales.

Organisation Governance is always to the fore of the Board agenda, especially in this period of rapid change with increased emphasis on compliance with regulatory and statutory requirements. The Governance Options Review commissioned in 2017 produced a report which was presented to the Board in December 2018. The Board are now in possession of tangible information on which to base their decision on the future governance requirement of North West Hospice. All of the above initiatives and developments do not happen without a great effort from many people to whom I wish to acknowledge and express a sincere 'thank you' on behalf of the Board of Directors. Our Operational Management Group comprising the Hospice Manager, Medical Director and Nursing Management have shown tremendous adaptability and commitment by embracing our strategy and working with the Board in the achievement of progressing the forewent objectives. This is done in addition to managing the day to day demands of an ever increasing and demanding specialist palliative care service. We greatly appreciate their efforts.

We equally acknowledge and appreciate the valiant efforts of our medical, nursing, administration and the numerous support staff who on a day to day basis provide the highest quality care to the users of our service. If it were not for the generosity and support of our very unselfish community as well as our Diaspora who give tirelessly of their time through volunteerism, organisation of numerous events, and consistent big-hearted donations in addition to bequests and one-off contributions, the efforts of Management and the Board would be very limited. Our Diaspora has never forgotten their homeland and continues to make a significant contribution. A special word of thanks to the many HSE administrative and service staff for their continued cooperation and valued contribution to our service.

Finally, the Board wish to acknowledge the harmonious working relationship which exists between the Hospice Board/Hospice Management and CHO1, HSE Management and their Community Care Management Team who have been so facilitative and supportive in this period of rapid change for North West Hospice.

I am very pleased to present this 2018 Report on behalf of the Board of Directors, North West Hospice.

Mr Jim Callaghan, Chairperson, Board of Directors

## Hospice Manager's Statement

There were a number of key moments in 2018 for the North West Hospice. The 20<sup>th</sup> anniversary of our current In-patient Unit, progressing the design of our new Hospice inpatient unit, the opening of our 2<sup>nd</sup> Charity shop, the publishing of our annual newsletter, engaging with our committed diaspora in America and further strengthening of our current operational and governance structures. The eight key objectives identified in our strategic plan 2016-2020 has progressed further in 2018 as outlined in detail on page 22. The strong commitment and working relationship of the Board of Directors, staff, volunteers and our community has been the catalyst to our success to date.

The 20<sup>th</sup> anniversary of our current inpatient unit was celebrated in 2018. We are very proud of the in-patient unit and are very fortunate to have a very dedicated, experienced and expert team working in the unit. However the hospice recognises the changes in our service over these years with quite a considerable increase in patient referrals and also the requirement to meet best design practice in the physical environment where we care for our patients and families. Our service has seen a substantial increase in admissions to the unit where particularly in the winter months we simply do not have enough beds to meet demand. 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. Our current facilities are dated with a lack of privacy and space and insufficient number of single rooms. In 2018, a design team has worked with the staff and the Board of Management in designing the new hospice unit as committed to in our strategic plan. I would like to acknowledge the support of HSE Estates in supporting the Hospice in this process. Great progress has been made to date however the design is not ready for submission in 2018. Work is progressing well to have the plan submitted in 2019. There is a substantial funding requirement needed to build the new inpatient unit with on-going HSE engagement to support the funding. The Community Palliative Care and the Hospital Palliative Care Service continues to have increases in activity year on year. In 2018 the Community team cared for nearly 400 patients and made over 2200 visits to patients' place of residence i.e. their home or nursing home. The Hospital Palliative Care team cared for over 750 patients in Sligo University Hospital.

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. The absolute need to build a new inpatient unit on our current site brings an additional financial challenge. Recognising the need for additional funding and learning from our success of our first charity shop in Carrick on Shannon in July 2017, the Board and staff agreed to open 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 advance our funding streams and to acknowledge the dedicated diaspora community that has supported the hospice over our 32 years history, the North West Hospice was represented at the Sligo and Leitrim annual dinner dances over the St. Patrick's Day weekend celebrations in New York in March 2018. I would like to thank the respective Sligo and Leitrim diaspora communities for this



opportunity and look forward to continuing to work with them. To further inform our loyal community both at home and away, the North West Hospice published an annual newsletter in 2018. Due to the success of this publication and the very positive feedback from the general public, the North West Hospice is committed to publishing a newsletter annually. 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. The Hospice most recently undertook an extensive review of all our data collection and storage in preparation of and in compliance with the new General Data Protection legislation (GDPR) that came into law on the 18<sup>th</sup> May 2018. The Board also recognised the importance of strengthening the governance and organisational structures to meet the growing regulatory requirements and established a dedicated Board Quality and Safety subcommittee chaired by a Board Director with expertise in this area. The subcommittee oversees all quality and safety on behalf of the Board and then reports back through the chair to the Board of Directors at each Board meeting.

Notwithstanding the significant challenges ahead, the Board remains fully committed to progressing all the eight objectives further in 2019 as outlined in our strategic plan. 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.

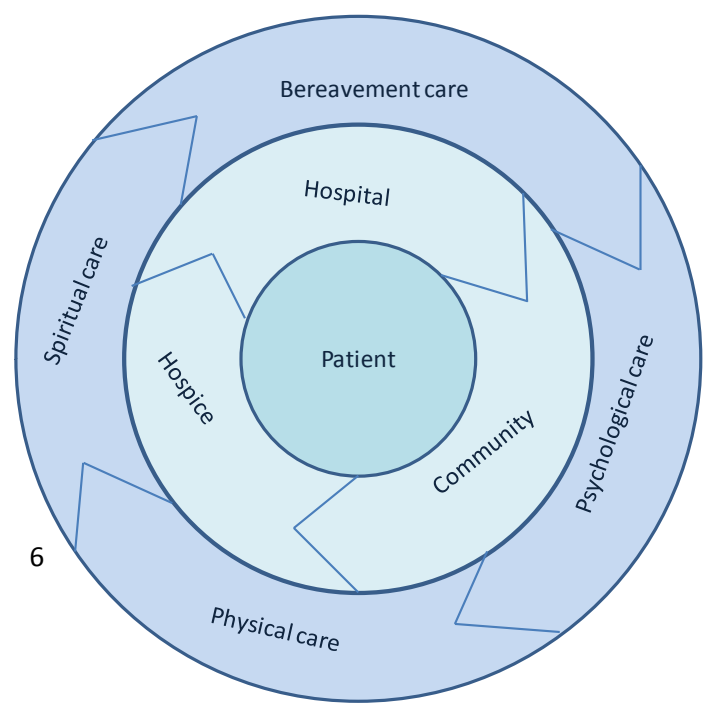
Ms Nuala Ginnelly, Hospice Manager

## 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 multi-disciplinary 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 and 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

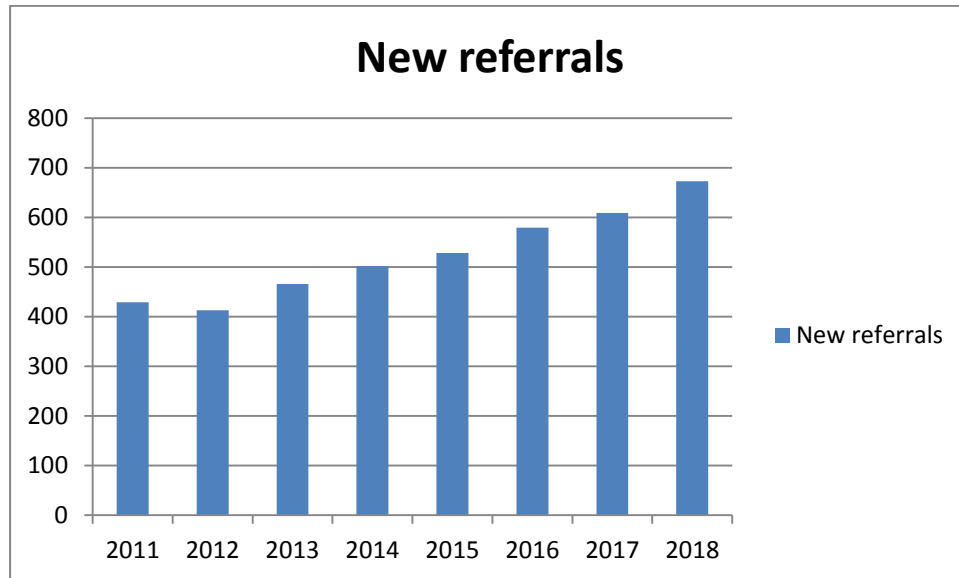
<b>Mission</b>	The mission of North West Hospice is to provide specialist care with compassion for those living with life-limiting illness in our community.
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<b>Vision</b>	Our vision is to be at the centre of palliative care services in the North West, working to ensure that everyone who needs palliative care can access services.
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<b>Values</b>	 <p><b>Compassion:</b> we demonstrate the utmost care and compassion</p> <p><b>Accountability:</b> we aim to achieve the highest standards of governance and integrity</p> <p><b>Excellence:</b> we invest in learning and development, striving for excellence in all we do</p> <p><b>Respect:</b> we cherish the dignity of our patients and we provide a haven for those for whom we care</p>
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## Service Statistics and Staffing

### 1.1 Service statistics



#### Referrals

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

Total new patients and re-referrals for 2018 = 728

#### Community Palliative Care Service

	New referrals	Re-referrals	Discharges	Deaths	CNS visits	Total Visits	Phone calls
2015	324	38	79	235	2537	2883	12846
2016	303	41	64	227	2256	2424	11870
2017	335	37	66	275	2210	2361	13445
2018	327	55	78	274	2034	2218	11989

#### Hospital Palliative Care Service

	New referrals	Re-referrals	Discharges	Deaths	CNS visits	Total 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

**Inpatient Unit Palliative Care Service**

	<b>New referrals</b>	<b>Re-referrals</b>	<b>Discharges</b>	<b>Deaths</b>
<b>2015</b>	133	92	117	120
<b>2016</b>	158	55	66	129
<b>2017</b>	146	30	50	132
<b>2018</b>	174	22	43	161

**Social work / Bereavement –****2018- 156 families****1.2 Total Staffing in North West Hospice**

<b>Positions</b>	<b>WTE</b>
Administration	11
Community Relations	2
Volunteer Coordinator	0.5
Medical Staff	5
Nursing Staff	38
Social Work	2.00
Cleaning/ Catering	2.00
<b>Total</b>	<b>60.5</b>
<b>Note *All staff are not working full time hours</b>	

## 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. Jim Callaghan

**Vice- Chairperson** – Ms. Mary Curran

**Other Directors-** Ms. Aisling Barry, Mr. Declan Hegarty, Mr. Pat Dolan, Ms. Dymphna Gorman, Mr. Noel Scott, Ms. Winifred McDermott, Dr. Fiona Quinn, Mr. Noel Walsh, Mr. George Chadda,

### **Resignations from the Board in 2018**

No resignations

### **New appointment to Board in 2018**

Mr. John Mc Elhinney – 7<sup>th</sup> March 2018

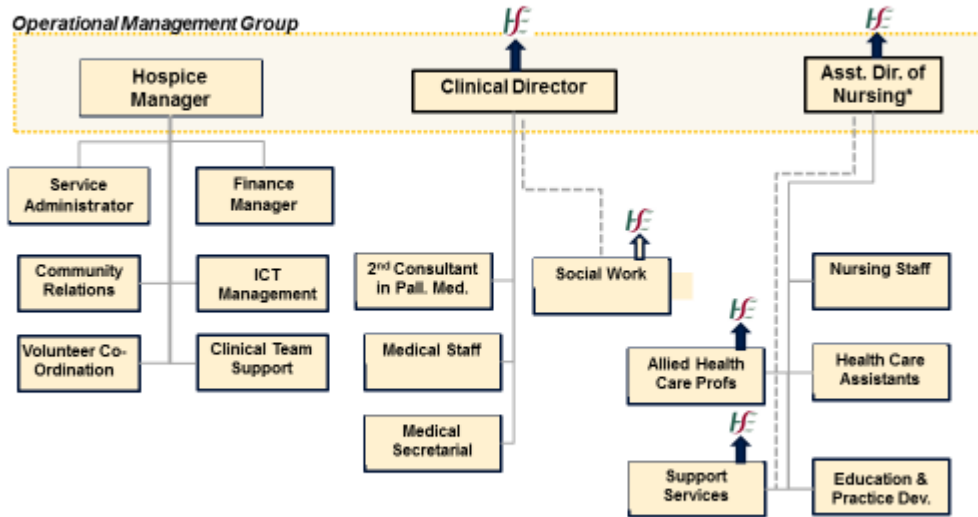
Mr. Daniel Browne- 9<sup>th</sup> August 2018

### **The business of the Board is supported by the following sub- committees:**

- Board Development Committee
- Human Resource Committee
- Finance and Audit Committee
- Quality and Safety Committee
- Board representation on Capital Plan committee

**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

2018 continued to be a busy year for all parts of the service. We saw over 670 patients during the year. Our service comprises of a Community Team (covering counties Sligo/Leitrim/South Donegal and West Cavan), a Hospital Team reviewing patients in Sligo University Hospital and an In-patient Unit with a total of 8 beds – 3 single rooms and a 5 bedded (mixed male/female) ward area.

450 patients and families were cared for by our community team throughout the year. We help support the community services such as the Public Health Nurses, General Practitioners and the Home Help Services to support patients to remain in their homes/place of care. This close working relationship with the Community Services and also the Irish Cancer Society/Irish Hospice Foundation Night Nursing Service allowed us to help support 274 patients to die in their home or place of care (e.g. nursing home) during the year. This continues to be a challenge given the reducing budget to Community Services.

Our Hospital Team remains as busy as always with over 470 referrals to the service in 2018 and we cared for 162 patients who died in the Hospital.

The In-patient Unit remains busy with over 196 patients admitted in 2018. While we have the capacity to admit more patients our lack of single rooms is a huge disadvantage. Most patients will want the privacy of a single room or for others this is necessary because they have an infection however we would like to offer every patient the opportunity of a single room. Currently we have a 5 bedded ward area which is mixed male and female which lacks privacy and dignity. Over the next period of time we will start to fundraise for our new build. Our design, which is at the planning stage, is to build a new 12 bed in-patient unit with all single rooms. This new build would also have increased office space that would accommodate our Community Palliative Care Team. It will also accommodate our fundraising administration staffs who have had to move to a location down in Wine Street due to the lack of office space here on the Mall site.

I would like to take the opportunity to thank the population of the North West for their generosity over the last 32 years as without their donations we would not be able to provide the care that we do.

Dr Cathryn Bogan, Consultant in Palliative Medicine and Clinical Lead at North West Hospice



## Nursing Statement

North West Hospice Palliative Care Nursing Services extend across hospital, community and inpatient settings providing the delivery of palliative care. The nursing team continues to build on the existing working relationships with our medical and nursing colleagues in Sligo University Hospital and the Community services. This helps to make the transition of our patients from the acute hospital setting to the North West Hospice as seamless as possible.

Historically, palliative care services were established to improve the quality of life of people living with cancer, but this has extended now to the care of people with other life-limiting conditions and their families such as COPD, Motor Neuron Disease, and Heart Failure. The ethos of palliative care is to help people live a good quality of life for as long as they can and then care for them at end of life by focusing on the holistic care of the patient for example their psychological, social and spiritual needs and also for those that matter to them. We aim to provide a more encompassing and person-centered approach to care. Members of our nursing team include nurse managers, clinical nurse specialists, nurses and health care assistants work in partnership with our medical, social work, allied health professionals and chaplaincy to provide that care.

Our Community Palliative Care team are based in North West Hospice building on Sligo University Hospital campus. They continue to cover a large geographical area, namely Sligo, Leitrim, South Donegal and West Cavan and work closely with the GPs and Public Health nurses as well as supporting nurses in Community Hospitals and Nursing Homes. As Clinical Nurse Specialists (6 in total plus 1 Clinical Nurse Manager) they play a key role in advising, supporting and educating staff in all these areas in the delivery of a palliative approach to care. The continuous supporting of non-palliative specialist staff, who is working with syringe driver pumps and the review of any accompanying documentation, is on-going. Members of the team have attended national conferences as part of their commitment to professional development which enhances their ability to deliver evidence based care to the people that they are caring for. The total number of patients that receive Community Palliative care support is approximately 120 patients and their families each month.

The 8 bedded Inpatient Units has approximately 25 nursing team members, including 6 Health Care Assistants, a Clinical Nurse Manager 11 and a Clinical Nurse Manager 1. The Inpatient Unit, in particular supports clinical placements for student nurses and nurses undertaking the Post Graduate Diploma in Palliative Care. This is a placement that the Students feel they get a lot from due to the ethos of teaching from our Palliative team.

A significant development for the Inpatient Unit commenced in 2017 with the approval of the Board to tender a design team to design a new hospice build. This has progressed further in 2018 and is included in the HSE Capital Plan and will ensure availability of single rooms for up to 12 patients. This will significantly improve provision of privacy, dignity and respect for all patients and their families into the future. These plans are still on course and we look forward to this work commencing in the near future.

The Hospital Palliative Care Team consists of 3 Clinical Nurse Specialists dedicated to Sligo University Hospital. Their role is to advise nursing staff caring for patients requiring palliative care on general wards and to also meet and support patients with life-limiting conditions and their families.

Continuous professional development for staff is on-going and supported by an Education/Practice Development Coordinator. This process will be strengthened by staff engaging in professional development planning in conjunction with their clinical nurse managers, this enables the North West Hospice to identify training needs and then plan programmes to meet those needs.

The nursing and medical teams are involved routinely in clinical audits to monitor practice to ensure delivery of safe and quality care. We encourage all staff to participate and encourage suggestions. Reports and minutes of all group meetings e.g. Policy Governance Group, Integrated Quality and Safety Group are available on the Shared Folder as are all policies for easy access for staff.

The North West Hospice is very privileged to have a team of nurses who demonstrate a high level of nursing expertise and skills throughout the service. Their commitment to their work and their flexibility ensures adequate provision of staff when we are challenged by unexpected or unplanned events.

We strive to do our best for those we care for by engaging and learning how we can always improve on the care that we give.

Ms 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. We provide a service to those receiving palliative care in their own home and also in the In Patient unit. In 2018 we worked with and supported 154 families referred by the multi-disciplinary team. Social Workers 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. We work collaboratively 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 has died under the care of North West Hospice.

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 Childcare Legislation for 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

**Quality and Patient Safety** is governed by the Board Quality and Safety Sub-Committee who meet quarterly and report directly to the Board of Directors, North West Hospice. They oversee the work of the Integrated Quality and Safety Committee who review all clinical incidents, analyse trends in all incidents and carry out preliminary assessment reports on all Category 2 (Moderate incidents) to determine whether further investigation is required.

A total of 42 clinical incidents in 2018 were managed following guidance of the HSE Incident Management Framework. All were in the negligible to minor category under four main areas of pressure ulcers, slips/trips/falls, medication (equipment related) and a small number of incidents related to violence/aggression/harassment towards staff. No serious incidents were recorded for 2018.

Comments and complaints totalled 8 for 2018, one of which was a formal complaint and was managed under North West Hospice Management of Complaints and Feedback Policy and referred to Complaints Officer.

We invite patients and visitors to complete "Feedback Forms" so that we can gather information on how the service is experienced by them. Some of the comments are noted below.

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- *"These people are amazing. Walking Angels on this earth. Thanks to all the staff."*
  - *"The kindness, respect and love shown to my dying mother-in-law, but also the respect, love, kindness, openness to me and her son. The reassurance and the care I got for my wellbeing. The tearoom amazing service and the bed I was given to stay with my mother-in-law in her last hours. Thanks a million."*
  - *"Excellent care by all staff... could not ask for better."*
  - *"Staff are so kind and caring. They explained everything and have been so kind to us all; it is like a home away from home. It has been great to be able to spend the night and not feel we are in the way."*
  - *"Attention to every little detail. Medical care excellent. All front line staff was so compassionate and caring."*
  - *"From the moment my father was moved into the Hospice, the care, love and respect shown to us as well as to him was amazing."*
  - *"Commenting on the rating of respect and caring, 'these two attributes were above and beyond what anyone could expect. The team just really put our family at ease at a time of upset and distress. We felt like we were at home with people who really care."*

The implementation of new General Data Protection Regulations (2018) has been a major work focus this year. This has entailed review of policies in relation to maintaining high standards in the collection, processing and storage of all personal information. The development of privacy statements for service users and for staff describes how we use personal information and the rights staff and service users have in relation to their personal information.

The Quality and Safety agenda is driven by a process of continuous self-assessment of compliance with the National Standards for Safer, Better Healthcare. Policy Governance Group has overseen the development and revision of 22 policies in 2018 including the Medication Management Policy for Community Palliative Care Team. This has been a major achievement in defining safe practice in the prescription, supply and administration of palliative care medication to those under the care of North West Hospice in community settings.

North West Hospice continues to work with Centre for Nursing and Midwifery Education in implementation of Palliative Care Needs Assessment Guidance programme. Community Palliative care Team have developed a short course for nurses working in the community in relation to syringe pump management and care in the last 24 hours. Staff members regularly attend weekly journal clubs and case reviews and demonstrate commitment to personal and professional development by completion of courses at post-graduate levels and higher. Annual staff support and well-being days are designed to help staff identify strategies for self-care to help sustain them in their work. We continue to support student nurses at undergraduate level and facilitate clinical placements for post graduate palliative care nursing students. This has proved an enriching experience for all involved.

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

## Volunteer Service Report

Initiated in January 2012 the North West Hospice Volunteer programme has since gone from strength to strength with an ever expanding range of services provided. Now an integral supportive part of our Service throughout the various disciplines within the North West Hospice, Volunteers main purpose is to 'support and enhance the existing North West Hospice services by providing a wide range of skills and resources which improve the quality of life of the People we care for and their families'.

Our Volunteers, who vary in age (from 15-16 year old transition year students who, with their Transition Year Co-ordinator, participate in bag packs and our eldest longest service reception volunteers currently in their 80's) bring with them a wide range of experience, knowledge, skills, energy and enthusiasm to provide support to our organisation in their free time.

While not an exhaustive list, some examples of current volunteering roles in the North West Hospice include Fundraising, Reception, Driving, Hairdressing, Aromatherapy, Massage Therapy, Reflexology, Hospitality, Music, Gardening, Flower arranging, Home Baking, Chiropody, Beauty Therapy, Dog Therapy, Podiatry, Photography, Painting, Collecting Mite Boxes, and working in our Hospice Shops both in Carrick-on-Shannon and Sligo Town. Accordingly Volunteers play a significant role in supporting the North West Hospice to accomplish our goal of providing services both in the most compassionate, but also importantly, in the most cost effective manner possible.

Many volunteers are retired people or people who, while living busy lives, have some time to spare and wish to contribute to the North West Hospice: professionals who wish to provide their skills to the organisation and to keep their skills honed, students, parents and family members who wish to 'give something back' after having been touched by the Hospice in their own personal lives or people with an interest in volunteering generally in order to support the North West Hospice Service in their communities.

Not to be overlooked the support and assistance of our Volunteer Programme participants and many others volunteers in preparing for and helping at both major and once-off events is of significant importance to the North West Hospice.

There continues to be opportunities to add to and expand our Volunteer Programme with new ideas presenting themselves on an on-going basis. As well as a second chiropodist already for 2019 we have a Bio-Energy and a Reiki therapist as well as an artist interested in volunteering with North West Hospice and ready to commence the induction course.

There are however many challenges too in ensuring that we can continue to not only provide and sustain the services outlined, to provide reception cover in our new office in Wine Street as well as in the Hospice itself, but also to ensure that any new services introduced are appropriate for the people we care for and their families, and that our Volunteers are trained and supported in their roles.



In the past year we have updated our records and applied the new Data Protection Regulations for our Volunteers. We continue to ensure that all appropriate role specific training and support is provided to our volunteers in addition to all mandatory training. Support and Governance meetings were held in accordance with agreed regularity.

‘No act of kindness, no matter how small, is ever wasted.’ These words by Aesop are the foundation of the North West Hospice Volunteer Programme. They reflect the spirit of generosity and support we have received from each of the many volunteers who have joined the Volunteer Programme to date.

As the current North West Hospice Volunteer Co-Ordinator I would like to take this opportunity to acknowledge and thank our many Volunteers for their continued and invaluable work and support for our Service.

**Table**

Volunteer Role	No. of Volunteers	No. of hours/annum
Receptionist	52	3555.50 (approx.)
Hospitality	3	384 (approx.)
Musician	3	192 (approx.)
Hairdresser	1	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	7	Flexible
Reflexologist	3	384(approx.)
Driver	3	Flexible
Photographer	2	Flexible
Massage Therapist	2	Flexible
Podiatrist	1	Flexible
Wood Turner	2	Flexible
Chiropodist	1	Flexible
Beauty Therapist	1	Flexible
Charity Shop Volunteers	71	Flexible

Ms Paula Cooney, Volunteer Co-Ordinator.

## Fundraising Report

To maintain our current level of service, we must raise in excess of €1million 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.

2018 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 2018, the team supported well over 200 supporter initiated events. Typically, each of these events require the following support to be provided: letters of support, Gardaí permits, PR, Social Media, posters, attendance at events and cheque presentation

The 2018 North West Hospice Coffee Morning brought in €114,657.87, a slight decrease on the previous year but still a very good result. The success of Coffee Morning as an event is testament to the amount of loyal supporters we have in our community and we are incredibly grateful to all our donors, supporters and volunteers.

In 2018, North West Hospice hugely developed one event, our Hospice Memorial Walk. Held last October, this event saw 400 people gather together in Sligo to walk in memory of those we have loved and lost. The event raised €32,500 for North West Hospice, pretty much maintaining the amount achieved last year despite last year receiving a single donation of €10,000. Again, these funds went directly towards funding our growing services in 2018.

To further advance our funding streams and to acknowledge the dedicated diaspora community that has supported the hospice over our 32 years history, the North West Hospice was represented at the Sligo and Leitrim annual dinner dances over the St. Patrick's Day weekend celebrations in New York in March 2018. I would like to thank the respective Sligo and Leitrim diaspora communities for this opportunity and look forward to continuing to work with them.

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 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. We will then re-locate to The Mall and re-join our clinical colleagues.

On behalf of all those who use North West Hospice services, their families and friends, we would like to extend our most grateful thanks to all our supporters. Our generous supporters and donors continue to be at the heart of all that we do at North West Hospice. Thanks to their continued compassion and commitment, we can continue to provide excellent, loving care to all our patients, residents and their families.

Ms Laura Comiskey, Fundraising and Events Coordinator

### **North West Hospice Charity shops**

North West Hospice opened its second charity shop at Lower Quay Street Sligo in October 2018. This is a large Charity Department Store specialising in furniture but also featuring the following Departments; Ladies fashion, Jewellery/Accessories, Gents fashion, Children's fashion, toys and shoes.

The very large Furniture Department features an array of house furnishings such as beds, couches, tables, cabinets etc. while also boasting a selection of prints and wall-paintings. We have a large sorting and recycling facility for clothing and nothing is wasted, so if an item cannot be sold in shop we sell by weight to a recycling company.

For larger pieces of furniture, we ask that the donor contact us before donating as our inspection and storage area is quite small. We inspect all our furniture to ensure only good quality items are accepted. We can deliver larger pieces of furniture for a nominal fee to cover the cost of running our charity shop van.

We opened this shop thanks to the support of 49 wonderful volunteers and people from Sligo LEADER. We could not have done it without the support of our wonderful local community. Our Charity Shop in The Market Yard, Carrick-on-Shannon which opened in July 2017 continues to do well thanks to local community support. It is run by a wonderful group of Volunteers who give so freely of their time.

Both shops are staffed predominantly by volunteers and participants of employment schemes from "LEADER". This structure keeps our costs to a minimum.

All funds raised from both Charity Shops go directly towards maintaining North West Hospice Services. As the demand for our Palliative Care Services continues to rise, so too do Service costs and these shops are providing vital income to help us fund our Services. Follow us on our Charity Shop Facebook Page for details of new items in-store and to keep up-to-date with sales and events.

Ms Mary Forte, Retail Development Manager

## Strategic Plan 2016-2020 – Progress in 2018

Mr. John Hennessey, HSE National Director for Primary Care officially launched the North West Hospice 5 years Strategic Plan 2016-2020 on the 18<sup>th</sup> 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 patients and their families, ensuring that our standards of specialist palliative care and associated holistic support are delivered at the highest level			Progress in 2018
<ul style="list-style-type: none"> <li>■ Regularly review and evaluate the provision of patient care, incorporating the views of patients, families and healthcare professionals, to ensure its quality and appropriateness</li> </ul>	<ul style="list-style-type: none"> <li>■ Three-yearly evaluations of each of our three main services</li> <li>■ Results of evaluations included in our annual report</li> </ul>	<ul style="list-style-type: none"> <li>■ Review/evaluation of services each year</li> <li>■ Results included in annual report</li> </ul>	<ul style="list-style-type: none"> <li>■ Establishment of Board Quality and Patient Safety sub-committee</li> <li>■ 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.</li> <li>■ Policy/Procedure and audit report presented to Board Quality and Patient Safety committee as standing agenda item.</li> </ul>	
<ul style="list-style-type: none"> <li>■ We will run an annual survey of our stakeholders (patients, families, carers, staff, healthcare professionals and people in our wider community) to help us</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual survey results reported on our website and within our published annual report</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual survey and reporting</li> </ul>	<ul style="list-style-type: none"> <li>■ Facilities for feedback on Hospice site i.e. comment boxes</li> <li>■ Complaints / feedback log form updated to record written and verbal</li> </ul>	

understand people's views on the work of the Hospice and our future priorities			<p>complaints/ feedback</p> <ul style="list-style-type: none"> <li>North West Hospice participated in a National Research Survey in 2017, awaiting results in 2018.</li> <li>Hospice led survey planned in Quarter 3, 2019.</li> </ul>
<ul style="list-style-type: none"> <li>We will engage with patients and their families in order to understand the perspectives of those who use our services and to discuss future priorities for North West Hospice</li> </ul>	<ul style="list-style-type: none"> <li>We will establish and implement a mechanism for engagement</li> </ul>	<ul style="list-style-type: none"> <li>Engagement to commence by early 2016</li> </ul>	<ul style="list-style-type: none"> <li>Facilities in place to receive feedback from patients and families.</li> </ul>
<ul style="list-style-type: none"> <li>We will review the range of spiritual support provided within North West Hospice on an inclusive basis, recognising the diversity of those who use our services, and make enhancements or changes as necessary</li> </ul>	<ul style="list-style-type: none"> <li>Review and recommendations will be brought to the Board and an appropriate implementation process commenced</li> </ul>	<ul style="list-style-type: none"> <li>Review and recommendations by early 2016</li> <li>Implementation from early 2016 onwards</li> </ul>	<ul style="list-style-type: none"> <li>2<sup>nd</sup> Social Worker in post</li> <li>Hospice linked with chaplaincy in Sligo University Hospital</li> <li>All religious denominations accessible for patients and families.</li> </ul>

2	To increase the size of our inpatient unit and to redevelop the physical infrastructure of the Hospice in line with best practice in palliative care		Progress in 2018
<ul style="list-style-type: none"> <li>We will examine the demand for in-patient palliative care services within our region, in order to inform our analysis of the optimum size of the North West Hospice in-patient unit</li> </ul>	<ul style="list-style-type: none"> <li>Analysis to be included in formal Business Case to the HSE</li> </ul>	<ul style="list-style-type: none"> <li>Business case submitted to HSE Q1 2016</li> <li>Formal response from HSE by Q2 of 2016</li> <li><b><u>If approved (tentative timescales only):</u></b> <ul style="list-style-type: none"> <li>Development control plan 2016</li> <li>Detailed design / planning 2017</li> </ul> </li> </ul>	<ul style="list-style-type: none"> <li>Design team in place since quarter 4 2017</li> <li>Design at pre planning stage end of Dec 2018</li> <li>To finalise design and submit for planning permission in Q3 2019</li> <li>Discussion on</li> </ul>

		<ul style="list-style-type: none"> <li>■ Construction 2018-19</li> <li>■ Opening of new North West Hospice 2019-2020</li> </ul>	going with Board of Management and HSE to agree capital funding
<ul style="list-style-type: none"> <li>■ We will submit a formal business case to the HSE in respect of the capital funding required for our proposed redevelopment, options</li> </ul>	<ul style="list-style-type: none"> <li>■ Submission of formal Business Case to the HSE</li> </ul>	<ul style="list-style-type: none"> <li>■ Board sign-off of Business Case and submission to HSE during Q2 of 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ Capital plan approved on HSE National Development plan for 2021. Discussions on going to escalate to earlier timeframe.</li> <li>■ Planning permission submission in quarter 3 2019</li> </ul>
<b>3</b>	<b>To provide a palliative care service in all areas of our work – within our in-patient unit, within Sligo University Hospital, and within our community palliative care teams – which is in line with international best practice</b>		<b>Progress in 2018</b>
<ul style="list-style-type: none"> <li>■ We will deliver palliative care services in line with the annual Service Plan agreed with the HSE</li> </ul>	<ul style="list-style-type: none"> <li>■ Service Plan to be agreed with the HSE and signed off by both parties</li> </ul>	<ul style="list-style-type: none"> <li>■ Final sign-off by end of Q2 annually</li> </ul>	<ul style="list-style-type: none"> <li>■ As per Service level agreement with the HSE and signed by Board of management in Feb 2018.</li> </ul>
<ul style="list-style-type: none"> <li>■ We will ensure that we are appropriately resourced with senior clinical staff, to reflect our growing caseload and complexity of work</li> </ul>	<ul style="list-style-type: none"> <li>■ We will aim to recruit a second full-time Consultant in Palliative Medicine</li> <li>■ We will aim to have a dedicated Assistant Director of Nursing in position on a full-time, dedicated basis</li> </ul>	<ul style="list-style-type: none"> <li>■ Confirmed by end of Q2 2016</li> <li>■ Confirmed by end of Q2 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ Locum Consultant in place with permanent contract expected in July 2019</li> <li>■ Proposal to convert Assistant Director of nursing position to Director of Nursing position dedicated to Hospice only. For further review in 2019.</li> </ul>



<ul style="list-style-type: none"> <li>■ 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</li> </ul>	<ul style="list-style-type: none"> <li>■ We will implement “Towards Excellence in Palliative Care Self-Assessment tool” against the “National Standards for Safer Better Healthcare”, 2014</li> <li>■ Agreed Quality Improvement recommendations from self-assessment brought to the North West Hospice executive and Board, and prioritised as appropriate</li> <li>■ Service improvements will be reported in our Annual Report</li> </ul>	<ul style="list-style-type: none"> <li>■ Self-assessment complete by end of Q2, 2016</li> <li>■ Quality Improvement plans for all three care settings will be progressed and completed Q2 2016</li> <li>■ On-going self-assessment to continue to monitor progress</li> <li>■ Annual: Included in Annual Report Q2 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going self-assessment in collaboration with National collaborative Committee</li> <li>■ Quality Improvement plans agreed with Operational Management team and reviewed at integrated Quality and Safety and Board Quality and Safety subcommittee.</li> <li>■ Included in Annual Report under Quality/ Safety Report</li> </ul>
<ul style="list-style-type: none"> <li>■ 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</li> </ul>	<ul style="list-style-type: none"> <li>■ Partnership working and service integration will be specifically reported in our Annual Report</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual: Included in Annual Report Q2 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ Included in annual report under “Quality/ Safety “ Report</li> </ul>

service across all aspects of care and all care pathways			
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4	To consider new opportunities to develop our services and capacity to fulfil our mission and vision, either individually or in partnership with other organisations			Progress in 2018
<ul style="list-style-type: none"> <li>■ We will continue to engage with Co-Operation and Working Together (CAWT) in respect of possible cross-border initiatives</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going contact and reporting to the North West Hospice Board on progress</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual report to the Board</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going engagement with HSE projects relevant to palliative care</li> </ul>	
<ul style="list-style-type: none"> <li>■ We will liaise with other organisations providing services which are relevant or complementary to palliative care</li> </ul>	<ul style="list-style-type: none"> <li>■ Engagement with other service providers, and signing of Memoranda of Understanding in relation to complementary work / joint projects</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going over life of strategy</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going engagement with Centre for Nurse / Midwifery Education and St. Angela's College to support on-going education for nursing staff</li> </ul>	
<ul style="list-style-type: none"> <li>■ We will further develop relationships with key decision-makers in relation to services which North West Hospice can offer</li> </ul>	<ul style="list-style-type: none"> <li>■ Regular engagement and six-monthly "strategic contact" report by the Hospice Manager to the North West Hospice Board</li> </ul>	<ul style="list-style-type: none"> <li>■ Six-monthly report to the Board</li> </ul>	<ul style="list-style-type: none"> <li>■ 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.</li> </ul>	

5	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 2018
<ul style="list-style-type: none"> <li>■ Organisational development plan approved by North West Hospice Board</li> </ul>	<ul style="list-style-type: none"> <li>■ Development and implementation of an organisational development plan for North West Hospice</li> </ul>	<ul style="list-style-type: none"> <li>■ End of Q2 2016 – development of plan</li> <li>■ On-going during 2016 implementation of plan</li> </ul>	<ul style="list-style-type: none"> <li>■ North West Hospice and HSE approved Governance Option Appraisal Report in Quarter 1 2018.</li> <li>■ On-going engagement with the HSE and Board to implement recommendations</li> </ul>	
<ul style="list-style-type: none"> <li>■ Training and Development Plan</li> </ul>	<ul style="list-style-type: none"> <li>■ We will enhance the training and development of Board directors, management, staff and volunteers</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual submission to North West Hospice</li> </ul>	<ul style="list-style-type: none"> <li>■ Training and development for Board of Directors on going</li> <li>■ Training/ Education policy for staff / Volunteers Implemented</li> <li>■ Professional Development plans continues in 2018</li> </ul>	
<ul style="list-style-type: none"> <li>■ Improved data collection mechanisms identified and developed that can improve delivery or affect services</li> </ul>	<ul style="list-style-type: none"> <li>■ Develop management information system for strategic decision-making</li> </ul>	<ul style="list-style-type: none"> <li>■ End of Q2 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ Extensive review of data collection mechanisms in 2018 to comply with General Data Protection legislation introduced on 18<sup>th</sup> May 2018</li> </ul>	
<ul style="list-style-type: none"> <li>■ Staff feedback mechanism</li> </ul>	<ul style="list-style-type: none"> <li>■ Safe and supportive working environment for North West Hospice staff</li> </ul>	<ul style="list-style-type: none"> <li>■ To be implemented by end Q1 2016 and on-going over life of plan</li> </ul>	<ul style="list-style-type: none"> <li>■ Staff Support/ Training / Education Policy agreed and approved</li> <li>■ Access to Occupational Health for all staff</li> </ul>	

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7	To ensure the organisation is governed and managed in accordance with best practice and in compliance with all regulatory and statutory requirements			Progress in 2018
<ul style="list-style-type: none"> <li>■ We will work on the development of a succession plan for the Board to ensure continuity and the managed replacement of Board members reaching the end of their term of office</li> </ul>	<ul style="list-style-type: none"> <li>■ Board succession plan to be drafted and discussed annually</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual</li> </ul>	<ul style="list-style-type: none"> <li>■ In place</li> </ul>	
<ul style="list-style-type: none"> <li>■ We will continue to strengthen the Board and our governance arrangements, including introducing new Board members with skill sets and experience which can add real value</li> </ul>	<ul style="list-style-type: none"> <li>■ 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</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going</li> </ul>	<ul style="list-style-type: none"> <li>■ Two new Board Directors appointed in 2018. One Director with expertise to Chair Board Quality and Safety subcommittee and second Director with expertise in communication.</li> </ul>	
<ul style="list-style-type: none"> <li>■ We will move to full compliance with the new regulatory arrangements for charities</li> </ul>	<ul style="list-style-type: none"> <li>■ Quarterly compliance report to North West Hospice Board by Hospice Manager</li> </ul>	<ul style="list-style-type: none"> <li>■ Quarterly</li> </ul>	<p>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 to commence review in 2019.</p>	
<ul style="list-style-type: none"> <li>■ We will be transparent and open regarding how money is spent within North West Hospice</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual report detailing our income and expenditure, in line with best practice and regulatory standards for charities</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual</li> </ul>	<ul style="list-style-type: none"> <li>■ Annual report detailing all audited accounts</li> </ul>	
<ul style="list-style-type: none"> <li>■ We will engage with HIQA, the HSE and Department of Health as appropriate in respect of future licensing</li> </ul>	<ul style="list-style-type: none"> <li>■ Report and recommendations to North West Hospice Board as necessary</li> </ul>	<ul style="list-style-type: none"> <li>■ On-going; to be formally tabled for discussion at least annually</li> </ul>	<ul style="list-style-type: none"> <li>■ Self-assessment of “Towards Excellence in Palliative Care” standards on going and reported back to Board of Directors via Board Quality</li> </ul>	

			and safety sub committee
<ul style="list-style-type: none"> <li>■ We will maintain our formal risk register and update it monthly</li> </ul>	<ul style="list-style-type: none"> <li>■ Formal Risk Register presented quarterly to NWH Board</li> </ul>	<ul style="list-style-type: none"> <li>■ Complete by end Q2 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ Quality and Safety standing item at Board meetings report</li> <li>■ Board Quality &amp; Safety sub-committee established in quarter 1 2018</li> </ul>
<b>8</b>	<b>To develop our organisational structure, resources and capacity in order to enable North West Hospice to deliver all aspects of our strategic plan over the next five years</b>		<b>Progress in 2018</b>
<ul style="list-style-type: none"> <li>■ Recognising that our organisational structure has current capacity constraints, we will strengthen our executive and administrative structure / resources by making targeted changes and additions to our structure</li> <li>■ Continuous monitoring</li> </ul>	<ul style="list-style-type: none"> <li>■ Report and recommendations to North West Hospice Board</li> <li>■ New positions in place via formal recruitment process</li> </ul>	<ul style="list-style-type: none"> <li>■ New positions in place by end Q2 2016</li> </ul>	Board of Directors and HSE approved Governance Option Appraisal Report in January 2018 and is working on recommendations in 2018. To continue in 2019.
<ul style="list-style-type: none"> <li>■ We will ensure that we are appropriately resourced with senior clinical staff, to reflect our growing caseload and complexity of work (in line with Objective 3 above)</li> </ul>	<ul style="list-style-type: none"> <li>■ We will aim to recruit a second full-time Consultant in Palliative Medicine</li> <li>■ We will aim to have a dedicated Assistant Director of Nursing in position on a full-time, dedicated basis</li> </ul>	<ul style="list-style-type: none"> <li>■ Confirmed by end of Q3 2016</li> <li>■ Confirmed by end of Q3 2016</li> </ul>	<ul style="list-style-type: none"> <li>■ 2<sup>nd</sup> Consultant in Palliative Medicine in post, HSE permanent contract expected in July 2019.</li> <li>■ Proposal to convert Assistant Director of Nursing in post to a full time dedicated post is on-going with the HSE</li> </ul>
<ul style="list-style-type: none"> <li>■ We will ensure that our organisation has effective reporting, internal control and accounting systems</li> </ul>	<ul style="list-style-type: none"> <li>■ 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</li> </ul>	<ul style="list-style-type: none"> <li>■ Initial report by end of Q2 2016 followed by a bi-annual review</li> </ul>	<ul style="list-style-type: none"> <li>■ 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</li> </ul>

			<ul style="list-style-type: none"> <li>■ Monthly activity and KPIs returned to HSE</li> <li>■ Audited accounts published in annual report yearly</li> <li>■ Internal financial audits will progress further in 2019.</li> </ul>
<ul style="list-style-type: none"> <li>■ 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</li> </ul>	<ul style="list-style-type: none"> <li>■ Agree performance management targets and reporting mechanism</li> <li>■ Reporting of achievement against targets</li> </ul>	<ul style="list-style-type: none"> <li>■ Board agreement by end of Q1 2016</li> <li>■ Monthly (internal); Annually (external reporting)</li> </ul>	<ul style="list-style-type: none"> <li>■ Detailed progress on all eight objectives reported in Annual Report</li> </ul>



**Financial Statement & Accounts**





**Company registration number: 119501**

**North West Hospice Company Limited by Guarantee  
The Mall  
Sligo**

**Financial Statements**

**for the financial year ended 31st December 2018**

## North West Hospice Company Limited by Guarantee

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## North West Hospice Company Limited by Guarantee

### Directors and Other Information

<b>Directors</b>	Mr. James Callaghan Mr. Noel Walsh Ms. Winifred McDermott Ms. Dymphna Gorman Ms. Aisling Barry Mr. Patrick Dolan Ms. Mary Curran	Mr. Declan Hegarty Mr. Noel Scott Dr. Fiona Quinn Mr. George Chadda Mr. John McElhinney (Appointed 7th March 2018) Mr. Daniel Browne (Appointed 9th August 2018) Ms. Siobhan O' Dowd (Appointed 18th February 2019)
<b>Secretary</b>	Mr. Noel Scott	
<b>Company number</b>	119501	
<b>Charity number</b>	CHY 7983	
<b>Registered charity number</b>	20018863	
<b>Registered office</b>	The Mall Sligo	
<b>Business addresses</b>	The Mall Sligo  Hospice Centre Wine Street Car Park Sligo	
<b>Auditor</b>	Gilroy Gannon Chartered Accountants and Statutory Audit Firm Stephen Street Sligo	
<b>Bankers</b>	Ulster Bank Stephen Street Sligo  Permanent TSB 22 O'Connell Street Sligo	

**North West Hospice Company Limited by Guarantee**

**Directors and Other Information (continued)**

**Solicitors**

Michael J Horan  
Floor 1  
Millennium House  
Stephen Street  
Sligo

## North West Hospice Company Limited by Guarantee

### Directors Report

The directors present their annual report and the audited Financial Statements of the company for the financial year ended 31st December 2018.

#### Directors

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

Mr. James Callaghan	Mr. Declan Hegarty
Mr. Noel Walsh	Mr. Noel Scott
Ms. Winifred McDermott	Dr. Fiona Quinn
Ms. Dymphna Gorman	Mr. George Chadda
Ms. Aisling Barry	Mr. John McElhinney (Appointed 7th March 2018)
Mr. Patrick Dolan	Mr. Daniel Browne (Appointed 9th August 2018)
Ms. Mary Curran	

#### Secretary

The company secretary throughout the year was Mr. Noel Scott.

#### Principal activities

North West Hospice is a company limited by guarantee and a registered charity. Our purpose is to provide specialist care with compassion for those living with life-limiting illness in Sligo, Leitrim, South Donegal and West Cavan. We offer a full range of consultant-led specialist palliative care services through our In-Patient Unit, our Community Palliative Care Team and our Hospital Support Team. We receive limited statutory funding and rely on voluntary contributions to fund our services.

#### Development and performance

In 2018 the Company's income increased by 1% to €2,364,725. The company received additional funding from the Health Service Executive of €177,000 under Schedule 10 Service Level Agreement 2018 whilst donations and fundraising decreased by €150,322. Establishment costs and Administrative expenses rose by €157,577 principally due to increased staff costs. During the year the company incurred expenditure of €88,117 in preliminary site investigation and design fees.

#### Principal risks and uncertainties

The directors are aware of the major risks to which a charity is exposed and are satisfied that systems are in place to mitigate exposure to those risks. Risks are documented and managed in the company's risk register, which is reviewed and updated on a regular basis.

The major financial risks include management of funding resources and cashflow, as the organisation endeavours to maintain services in an environment of funding reductions. The major operational risks centre on the consistent delivery of quality services to people in need of specialist palliative care, for both the individual and North West Hospice staff. These risks are addressed through appropriate systems and controls.

#### Likely future developments

The directors expect to operate at a similar level of activity in the forthcoming year.

The company has engaged with the HSE to develop a new Hospice building on the existing site at The Mall, Sligo in accordance with the objectives of its strategic plan 2016-2020.



## North West Hospice Company Limited by Guarantee

### Directors Report

#### Events after the end of the reporting period

There have been no events affecting the company since the end of the reporting period.

#### Directors and secretary and their interests

The company is limited by guarantee, not having a share capital. Therefore the directors and secretary, held no interest in share capital of the company during the financial year.

#### 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, 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 Statutory Audit Firm, will continue in office.

This report was approved by the board of directors on 13th June 2019 and signed on behalf of the board by:



Mr. Noel Walsh  
Director



Mr. Noel Scott  
Director

## **North West Hospice Company Limited by Guarantee**

### **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.

**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 2018, 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 2018 and of its deficit 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 the Ethical Standard for Auditors (Ireland) issued by the Irish Auditing and Accounting Supervisory Authority (IAASA), and we have fulfilled our other ethical responsibilities in accordance with these requirements.

We have relied on the exemption provided by the Irish Auditing and Accounting Supervisory Authority's Ethical Standard - Section 6 - Provisions Available for Audits of Small Entities in the circumstances as outlined in note 22 to the financial statements.

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.



Bryan Kilfeather

For and on behalf of

Gilroy Gannon

Chartered Accountant and Statutory Auditor

Stephen Street

Sligo

Date: 13th June 2019

**North West Hospice Company Limited by Guarantee**

**Income and Expenditure Account  
Financial year ended 31st December 2018**

	<b>Note</b>	<b>2018</b> <b>€</b>	<b>2017</b> <b>€</b>
<b>Income</b>	<b>5</b>	2,364,725	2,339,636
		<hr/>	<hr/>
		2,364,725	2,339,636
<b>Expenditure</b>			
Establishment costs		(115,059)	(110,159)
Administrative expenses		(2,185,740)	(2,033,063)
Pre Planning Design and Preliminary works costs		(88,117)	-
		<hr/>	<hr/>
<b>Operating (deficit)/surplus</b>	<b>6</b>	<b>(24,191)</b>	<b>196,414</b>
Interest receivable and similar income		11,403	12,016
		<hr/>	<hr/>
<b>(Deficit)/surplus for the financial year</b>		<b>(12,788)</b>	<b>208,430</b>
		<hr/> <hr/>	<hr/> <hr/>

The notes on pages 13 to 20 form part of these Financial Statements.

**North West Hospice Company Limited by Guarantee**

**Balance Sheet  
As at 31st December 2018**

	Note	2018 €	€	2017 €	€
<b>Fixed assets</b>					
Tangible assets	12	78,567		101,832	
Financial assets	13	1,657,676		1,742,478	
			1,736,243		1,844,310
<b>Current assets</b>					
Debtors	14	516,223		432,220	
Cash at bank and in hand	15	252,107		181,539	
		768,330		613,759	
<b>Creditors: amounts falling due within one year</b>	16	(153,651)		(145,359)	
<b>Net current assets</b>			614,679		468,400
<b>Total assets less current liabilities</b>			2,350,922		2,312,710
<b>Creditors: amounts falling due after more than one year</b>	17		-		(15,000)
<b>Net assets</b>			2,350,922		2,297,710
<b>Reserves</b>					
Capital Contribution Reserve	19	66,000			-
Income and Expenditure Account	20	2,284,922		2,297,710	
		2,350,922		2,297,710	

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

The notes on pages 13 to 20 form part of these Financial Statements.

**North West Hospice Company Limited by Guarantee**

**Balance Sheet (continued)  
As at 31st December 2018**

These Financial Statements were approved by the board of directors on 13th June 2019 and signed on behalf of the board by:



**Mr. Noel Walsh**  
Director



**Mr. Noel Scott**  
Director

**The notes on pages 13 to 20 form part of these Financial Statements.**



**North West Hospice Company Limited by Guarantee**

**Statement of Changes in Equity  
Financial year ended 31st December 2018**

	<b>Note</b>	Capital Contribution Reserve €	Income and Expenditure Account €	<b>Total €</b>
<b>At 1st January 2017</b>		-	2,089,280	2,089,280
(Deficit)/surplus for the financial year			208,430	208,430
<b>Total comprehensive income for the financial year</b>		-	208,430	208,430
<b>At 31st December 2017 and 1st January 2018</b>		-	2,297,710	2,297,710
(Deficit)/surplus for the financial year			(12,788)	(12,788)
Other comprehensive income for the financial year:				
Restricted income	<b>19</b>	66,000	-	66,000
<b>Total comprehensive income for the financial year</b>		66,000	(12,788)	53,212
<b>At 31st December 2018</b>		66,000	2,284,922	2,350,922

## **North West Hospice Company Limited by Guarantee**

### **Notes to the Financial Statements Financial year ended 31st December 2018**

#### **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 2018.

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 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.

## North West Hospice Company Limited by Guarantee

### Notes to the Financial Statements Financial year ended 31st December 2018

#### **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 prepared budgets and cash flows for a period of at least twelve months from the date of the 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. 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 Long leasehold property 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 €78,567.

##### **Income**

Income is derived from government funding and other sources including donations, legacies and general fundraising.

Income from other sources is recognised when it is received.

##### **Taxation**

The company is limited by guarantee under the Companies Act 2014 and is not established for the profit or gain of its members. The company is solely trading for the mutual benefit of its members and accordingly is not liable to corporation tax.

##### **Tangible assets**

All tangible fixed assets are initially recorded at historic cost. This includes legal fees, stamp duty and other non-refundable purchase taxes, and also any costs directly attributable to bringing the asset to the location and condition necessary for it to be capable of operating in the manner intended by management, which can include the costs of site preparation, initial delivery and handling, installation and assembly, and testing of functionality.

## North West Hospice Company Limited by Guarantee

### Notes to the Financial Statements Financial year ended 31st December 2018

#### Depreciation

Depreciation is provided on all tangible fixed assets, other than freehold land, 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:

Long leasehold property	- 10%	straight line
Fittings fixtures and equipment	- 15/20%	straight line

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.

#### Financial assets

Financial assets are interest bearing investments which are set aside for capital development. The balance in the financial statements represents the balance held on deposit at the year end.

#### Impairment of assets, other than financial instruments

At the end of each reporting period, the company assesses whether there is any indication that the recoverable amount of an asset is less than its carrying amount. If any such indication exists, the carrying amount of the asset is reduced to its recoverable amount, resulting in an impairment loss. Impairment losses are recognised immediately in the income and expenditure account.

Where the circumstances causing an impairment of an asset no longer apply, then the impairment is reversed through the income and expenditure account.

The recoverable amount of tangible fixed assets is the higher of the fair value less cost to sell of the asset and its value in use. The value in use of these assets is the present value of the cash flows expected to be derived from those assets. This is determined by reference to the present value of the future cash flows of the company which is considered by the directors to be a single cash generating unit.

#### Government grants

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 as the related expenditure is incurred.

## North West Hospice Company Limited by Guarantee

### Notes to the Financial Statements Financial year ended 31st December 2018

#### 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 trade debtors, are initially measured at the undiscounted amount of cash receivable from that debtor, which is normally the invoice price. 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 assets are measured at amortised cost less impairment, where there is objective evidence of impairment.

##### Other financial liabilities

Other financial liabilities, including trade creditors arising from goods purchased from suppliers on short-term credit, 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.

#### Defined contribution plans

The company operates a defined contribution scheme. Retirement benefit contributions in respect of the scheme for employees are charged to the income and expenditure account as they become payable in accordance with the rules of the scheme. The assets are held separately from those of the company in an independently administered fund. Differences between the amounts charged in the income and expenditure account and payments made to the retirement benefit scheme are treated as assets or liabilities.

#### 4. Limited by guarantee

The liability of the members of the company is limited. The maximum liability of each member will not exceed €1.27.

**North West Hospice Company Limited by Guarantee**

**Notes to the Financial Statements  
Financial year ended 31st December 2018**

**5. Income**

Income arises from:

	<b>2018</b>	<b>2017</b>
	€	€
Health Service Executive Grant	966,780	966,780
Health Service Executive Funding as per Schedule 10 of Service Level Agreement - 2018	177,000	-
Fundraising and Other Income	844,519	882,064
Donations and Legacies	371,315	484,092
Tusla Family Support Agency Grant	4,611	4,000
Other Grants	500	2,700
	<u>2,364,725</u>	<u>2,339,636</u>

The whole of the income is attributable to the principal activity of the company which is wholly undertaken in Ireland.

**6. Operating (deficit)/surplus**

Operating (deficit)/surplus on ordinary activities before taxation is stated after(crediting)/ charging:

	<b>2018</b>	<b>2017</b>
	€	€
Depreciation of tangible assets	39,999	47,875
Amortisation of capital grant recognised in:		
Establishment costs	(15,000)	(15,000)
Fees payable for the audit of the Financial Statements	4,144	3,998
	<u>4,144</u>	<u>3,998</u>

**7. Staff costs**

The average monthly number of persons employed by the company during the financial year, including the directors was 45 (2017: 43).

The aggregate payroll costs incurred during the financial year were:

	<b>2018</b>	<b>2017</b>
	€	€
Wages and salaries	1,685,825	1,600,782
Social insurance costs	182,563	170,155
Other retirement benefit costs	116,672	104,724
Other staff costs	70,726	59,026
	<u>2,055,786</u>	<u>1,934,687</u>

**North West Hospice Company Limited by Guarantee**

**Notes to the Financial Statements**  
**Financial year ended 31st December 2018**

**8. Employee benefits**

The amount recognised in the income and expenditure account in relation to defined contribution plans was €116,672 (2017: €104,724).

**9. Companies Act 2014 S291(6)**

The directors have availed of the provisions of sections 291(5) of the Companies Act 2014 to use a format for the financial statements that better describes the activities of a company not trading for profit. The main change is the replacement of the title "Profit & Loss" with the title "Income & Expenditure" and consequential changes in the description of certain items to be consistent with the descriptions appropriate to the not for profit sector.

**10. Tax on deficit/surplus**

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

**11. Appropriation of income and expenditure account**

	<b>2018</b>	<b>2017</b>
	€	€
At the start of the financial year	2,297,710	2,089,280
(Deficit)/surplus for the financial year	(12,788)	208,430
<b>At the end of the financial year</b>	<u>2,284,922</u>	<u>2,297,710</u>

**12. Tangible assets**

	Long leasehold property €	Fixtures, fittings and equipment €	<b>Total</b> €
<b>Cost</b>			
At 1st January 2018	793,515	304,515	1,098,030
Additions	-	16,734	16,734
<b>At 31st December 2018</b>	<u>793,515</u>	<u>321,249</u>	<u>1,114,764</u>
<b>Depreciation</b>			
At 1st January 2018	746,895	249,303	996,198
Charge for the financial year	19,052	20,947	39,999
<b>At 31st December 2018</b>	<u>765,947</u>	<u>270,250</u>	<u>1,036,197</u>
<b>Carrying amount</b>			
<b>At 31st December 2018</b>	<u>27,568</u>	<u>50,999</u>	<u>78,567</u>
At 31st December 2017	<u>46,620</u>	<u>55,212</u>	<u>101,832</u>

The basis by which depreciation is calculated is stated in Note 3.

**North West Hospice Company Limited by Guarantee**

**Notes to the Financial Statements  
Financial year ended 31st December 2018**

<b>13. Financial assets</b>	<b>2018</b>	<b>2017</b>
	€	€
Interest bearing investments	1,657,676	1,742,478
	<u>          </u>	<u>          </u>
<b>14. Debtors</b>	<b>2018</b>	<b>2017</b>
	€	€
Trade debtors	43,924	-
Other debtors	18,165	-
HSE grant receivable	429,764	409,556
Prepayments	24,370	22,664
	<u>          </u>	<u>          </u>
	516,223	432,220
	<u>          </u>	<u>          </u>
<b>15. Cash and cash equivalents</b>	<b>2018</b>	<b>2017</b>
	€	€
Cash at bank and in hand	252,107	181,539
Bank overdrafts	(196)	(251)
	<u>          </u>	<u>          </u>
	251,911	181,288
	<u>          </u>	<u>          </u>
<b>16. Creditors: amounts falling due within one year</b>	<b>2018</b>	<b>2017</b>
	€	€
Amounts owed to credit institutions	196	251
Trade creditors	10,039	5,811
Tax and social insurance:		
PAYE and social welfare	48,415	43,797
Accruals	80,001	80,500
Government grants (Note 18)	15,000	15,000
	<u>          </u>	<u>          </u>
	153,651	145,359
	<u>          </u>	<u>          </u>
<b>17. Creditors: amounts falling due after more than one year</b>	<b>2018</b>	<b>2017</b>
	€	€
Government grants (Note 18)	-	15,000
	<u>          </u>	<u>          </u>



**North West Hospice Company Limited by Guarantee**

**Notes to the Financial Statements  
Financial year ended 31st December 2018**

**18. Government grants**

	2018	2017
	€	€
At the start of the financial year	30,000	45,000
Released to income and expenditure	(15,000)	(15,000)
At the end of the financial year	<u>15,000</u>	<u>30,000</u>

The amounts recognised in the financial statements for government grants are as follows:

	2018	2017
	€	€
Recognised in creditors:		
Deferred government grants due within one year	15,000	15,000
Deferred government grants due after more than one year	-	15,000
	<u>15,000</u>	<u>30,000</u>

**19. Capital Contribution Reserve**

During the year ended 31st December 2018, specific contributions totalling €66,000 were received through Donations which were restricted to new build costs.

**20. Reserves**

The income and expenditure account represents cumulative gains and losses recognised in the income and expenditure account, net of transfers to/from other reserves.

**21. Events after the end of the reporting period**

There have been no events affecting the company since the end of the reporting period.

**22. Ethical standards**

In common with many other businesses of our size and nature we use our auditors to assist with the preparation of the financial statements.

**23. Controlling party**

The company is limited by guarantee not having a share capital. The company is controlled by its members.

**24. Approval of financial statements**

The board of directors approved these Financial Statements for issue on 13th June 2019.

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