



Phyllis Tuckwell Hospice



**Annual Review 2007/2008**

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# Chief Executive Report



Another year of development of the Hospice's services. Another year of continued support from our local community. An excellent example of a healthy symbiotic relationship, where both of us need and support each other.

My sincere thanks go to all who have made 2007/2008 another successful year for Phyllis Tuckwell Hospice. To our 150 staff, 600+ volunteers, 12 Support Groups, to the many faithful supporters of the Hospice and to all our new supporters, individual and corporate, who have joined the team this last year. Thank you!

We continued to develop our services in response to patient and family feedback. Our In-Patient team looked after 320 patients during the year and we were delighted to be able to re-open two more of our in-patient beds (which

had been closed for financial reasons the year before). In addition to this, we strengthened our multi-disciplinary Community Team to enable us to take our services out into patients' homes, seven days a week. The old adage 'hospice care is a philosophy not a place' is so true for our local community of 600,000 in South West Surrey and North East Hampshire.

Our Community Team supported 675 patients in their homes – nearly three quarters of these were new patients. Never before have we been able to support so many people outside the Hospice – and, as we do so, we are increasingly supporting people earlier in their illness and not just in their last few weeks or days.

There is so much that we can do to help 'add life to days' – as experienced by patients and their partners who came on our two newly introduced courses on creative therapies and relaxation. We were also delighted to introduce a new service specifically for recently bereaved children, who now have their very own Kingfishers Group to support those aged 5 to 15 years.

2007/2008 also saw essential development of parts of the 1930s Hospice building where some areas were obviously in need of updating. We were delighted to officially open the Robin Barnard Therapy and Education Rooms, both of which give us much needed space. Other important refurbishment work took place to both clinical and non-clinical areas. We are so excited about all of these developments and look forward to building on these in the coming year.

Of course, none of this would be possible without the generosity of our local community, on whom we rely for 84p in every pound that we spend.

Our thanks go to all who supported the Hospice in so many different ways – however big or small your donation, it has been hugely important to us. To those who support our new shop in Grayshott and the other ten shops across our catchment area, thank you.

The success of 2007/2008 has given us the confidence to further expand our clinical services for patients and their families in 2008/2009. We have set ourselves ambitious and challenging goals for the coming

year: including re-opening the final two beds, further developing our community team, strengthening our medical team, increasing the support we provide to local nursing homes and working with other healthcare partners to ensure end of life care is more widely available to all patients, not just those with cancer.

My hope is that you will be inspired by what we have achieved to date – and what we are aiming to achieve – and that you will continue to support us. If you aren't yet a supporter, there are so many new and exciting ways to get involved! Our Fundraising and Retail teams would love to hear from you (see page 7 for contact details).

Together we really are 'adding life to days' for so many patients and their families.

**Sarah Brocklebank**  
Chief Executive



# Achievements and Developments 2007/2008

## Clinical

- The Community Team (comprising nurses, doctors, therapists, social workers, patient welfare and chaplaincy) supported even more patients and their families at home for as long as possible. The team was further strengthened with additional Clinical Nurse Specialist time, counselling and social work hours;
- A seven day a week, 9am–5pm, community service was introduced in partnership with the NHS Beacon Service in Guildford. This has proven extremely popular with GPs, District Nurses and other healthcare professionals and has really helped the Hospice to work proactively to support patients in the community;
- Therapists (physiotherapy, occupational therapy and complementary therapy) and the Patient and Family Services team continued to be vital members of the multi-disciplinary team helping patients with a terminal illness to live life to the full, as well as continuing to support patients in their last days;
- Out-Patient services were further developed as another way of supporting patients at home for as long as possible. Blood transfusions and other interventions that might previously have required an admission were carried out in Out-Patients to the satisfaction of patients and families alike;
- Day Hospice activities continued to offer a focused clinical and outcome orientated approach to patients and their families;
- Day Hospice also trialled two new courses for patients and their partners – one focusing on creative therapies and one on relaxation and breathing techniques. These have been formally evaluated and, based on this extremely positive feedback, these groups will continue during 2008/2009;
- Two of the four closed beds were re-opened in August, thanks to the generosity of our local community in response to the Living Appeal. The Step It Up appeal will be launched during 2008/2009 to enable us to open the final two bed during 2008/2009 once the ward refurbishment work has been completed;
- The In-Patient team worked hard to continue to make best use of our beds whilst keeping flexibility for patients who may need a bed at short notice;
- The Bereavement Team successfully trialled and introduced a dedicated group (Kingfishers) for recently bereaved children aged between 5 and 15 years old;
- The Hospice introduced and welcomed our first medical training post.

## Fundraising

- Delighted to secure our first corporate sponsor with The Entrepreneur Channel providing additional, restricted resources for our community team;
- Overall a very successful year which provides a strong foundation for the achievement of our ambitious five year income generation strategy;
- It was particularly encouraging that our revenue income, excluding legacies, almost covered all of our operating costs;
- Legacy income during 2007/2008 was exceptionally high and unexpected. Gifts left to the Hospice in a will remain essential to the development of our services.

## Retail

- Opened our eleventh shop in Grayshott in September 2007 and negotiated a lease for our twelfth shop in Cranleigh (due to open mid 2008);
- Continued the shop modernisation programme with a refit of the Guildford shop;
- Despite strong competition, as well as some shops facing particularly difficult local market conditions, sales matched the achievement of 2006/2007;
- Delivered an overall profit margin of 31%.





### Housekeeping and Estates

- Maintained high standards of cleanliness;
- Undertook an extensive refurbishment programme to improve the clinical and non-clinical Hospice environment.

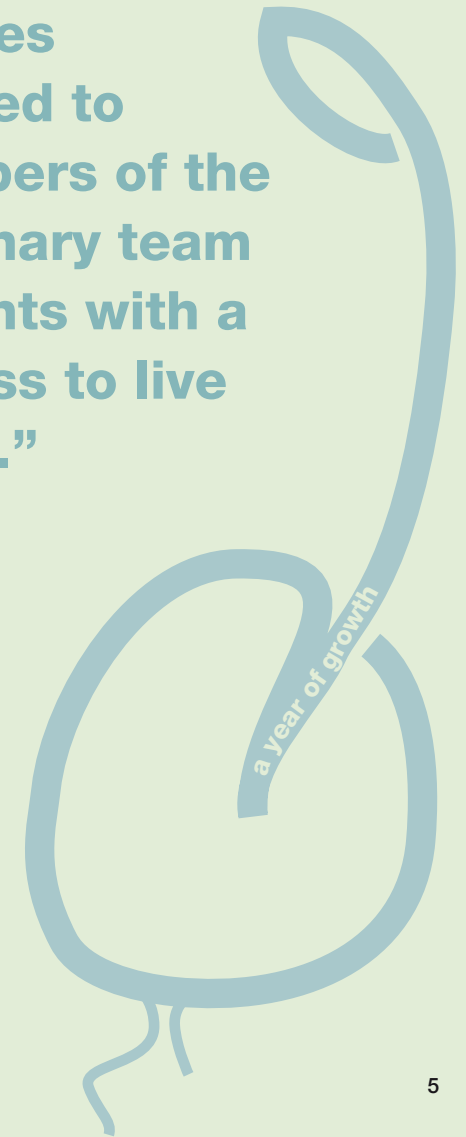
### Staff and Volunteers

- Enjoyed the ongoing support and commitment of staff to deliver high quality care and cost savings wherever possible;
- Benefited from the energy, commitment and time of over 600+ volunteers, working in all areas of the Hospice;
- Recruited volunteers to support the fundraising team as ambassadors for the Hospice, helping to raise awareness in the community and to act as our representative at fundraising events;
- Benefited from a large increase in the numbers of young volunteers interested in supporting the Hospice; nearly 50% of people interested in joining the Hospice as a volunteer this year were under 25.

### Statistics

Patient referrals: 657  
Non-cancer referrals: 60  
Patients returning home rate: 37%  
Bed occupancy rate: 81%  
Community team contacts (in person/telephone): 8,650

**“The Patient and Family Services team continued to be vital members of the multi-disciplinary team helping patients with a terminal illness to live life to the full.”**



## Plans for 2008/2009

2007/2008 has shown that Phyllis Tuckwell Hospice continues to benefit from enormous support from our local community as a key player in the provision of Specialist Palliative Care. We intend to build on this and continue to strive to provide the optimum balance of services within our financial constraints. Specifically, our objectives for 2008/2009 include to:

- Open the final two beds once the ward refurbishment project is completed and the Step It Up appeal has been successfully launched;
- Introduce the Specialist Registrar training post into our community team and review medical resource planning;
- Increase the hours for the therapies, social work and counselling teams to support patients in all settings and further enhance the resources in our community nursing team;
- Carry out a research project into a Hospice at Home service and determine how best to implement this at Phyllis Tuckwell Hospice;
- Strengthen local relationships and expertise to ensure non-cancer service provision develops in line with the Government and PCTs' End of Life strategy and plans;
- Undertake a comprehensive review of the Hospice's future estates and space requirements with respect to our clinical strategy, and determine how these can be met;
- Enhance estates management, health and safety and risk management activities;
- Work with the local community on local car parking issues;
- Continue to make significant progress towards achieving our five year income generation strategy in combination with a strategic marketing and publicity plan and the development of a new website.





# Trustees, Officers and Contacts

Phyllis Tuckwell Hospice has been served by the following during 2007/2008.

## President

Mr E C Tuckwell

## Board of Trustees

Brian G Lowe (Chairman)  
Nigel H Penny (Treasurer)  
William S Douglas (resigned during the year)  
Nigel Roberts  
Janet C Windeatt  
Tacye Connolly  
Virginia Colwell  
Dr Lorraine Linton  
Christopher Sprague  
Stefan Kuchar  
John Wenger  
Peter Duffy

## Contacts

### Chief Executive

Sarah Brocklebank  
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sarah.brocklebank@pth.org.uk

### Medical Director

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01252 729401  
carey.morris@pth.org.uk

### Director of Nursing

Clodagh Sowton  
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clodagh.sowton@pth.org.uk

### Head of Estates & IT

Paul Batten  
01252 729407  
paul.batten@pth.org.uk

### Retail Operations Manager

Tim Osborn  
01252 729449  
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### Finance Manager

Pat Bowyer  
01252 729436  
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### Head of Fundraising

Emma Le Beau  
01252 729434  
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### Voluntary Services Manager

Christine Chapman  
01252 729431  
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### Tuckwell CHASE Lottery Manager

Susan Wade  
01252 728411  
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# Financial Summary

The Statement of Financial Activities shows a surplus for the year (before unrealised losses) of £2.99m (2006/2007 £1.78m). This included a surplus on restricted income of £319,000, mostly pre-funding from the Department of Health of a grant for ward refurbishment. Unrestricted income increased by 29% while costs rose by 14%.

The principal sources of funds for the Hospice are fundraising activities organised by the Hospice and the local community, donations, legacies, retail income and the NHS service grant. No charges are made to patients for hospice services, but the Hospice benefits from generous donations made by and on behalf of patients. The improved income of last year was maintained and was supplemented by an exceptionally strong year for legacies, which totalled £2.7m, £1.4m higher than the previous year. The NHS service grant was pegged to a 3% increase and amounted to only 13% of our total income. Investment income rose by £90,000, reflecting the higher sums on short term deposit.

Expenditure on hospice care increased by £350,000 (13%)

following the re-opening of two In-Patient beds in August 2007 and expansion of the community care team. Total income generation costs also rose, by £120,000, through strengthening of the fundraising team in line with our income generation strategy and the £50,000 increase in shop costs included the costs of an additional shop at Grayshott.

Capital expenditure on fixed assets totalled £620,000 and included the completion of work on the Robin Barnard Therapy and Education Rooms (£280,000 bringing the total to £375,000) and improvement work on the upper floor of the hospice building to increase office space and house the expanded Home Care team.

Excluded from these figures is the work of volunteers and other services given without charge. We are extremely grateful to our volunteers who contribute in excess of £750,000 to the value of our work, and who are currently over 600 strong.

Cash and short term deposits increased by £1.69m to £4.78m as a result of strong income

generation. Short term deposits are placed at fixed interest rates for terms of up to a year. Investment funds are largely held by Rensburg Sheppard under an active management mandate and during the year showed realised and unrealised losses of £210,000 through the decline in values in the equity and fixed interest markets.

Our policy is to maintain free reserves equal to approximately 50% of budgeted annual expenditure. At the year end, free reserves were £2.5m, a little above the £2.4m required. The Trustees have decided to increase

Designated Funds by £2.5m as a provision for service growth and future capital expenditure. This brings the Capital Fund to £3.35m and plans to use these funds in the development of the Hospice's estate will be progressed during the coming year. The Development Fund has been maintained at £1 million to cover future operating losses arising from service growth.

A copy of the full accounts is available from the Hospice on request.

**Nigel Penny**  
Honorary Treasurer

**“We are extremely grateful to our volunteers who contribute in excess of £750,000 to the value of our work.”**



# Statement of Financial Activity

## Income

Retail	736,124	10%
Lottery	346,578	5%
Legacies	2,704,564	37%
Fundraising	1,198,101	16.5%
NHS income	922,378	13%
Donations and gifts	831,608	11%
Patient related donations	303,105	4%
Investment Income	251,599	3.5%
	<b>7,294,057</b>	<b>100%</b>
Realised losses	-18,052	
	<b>7,276,005</b>	

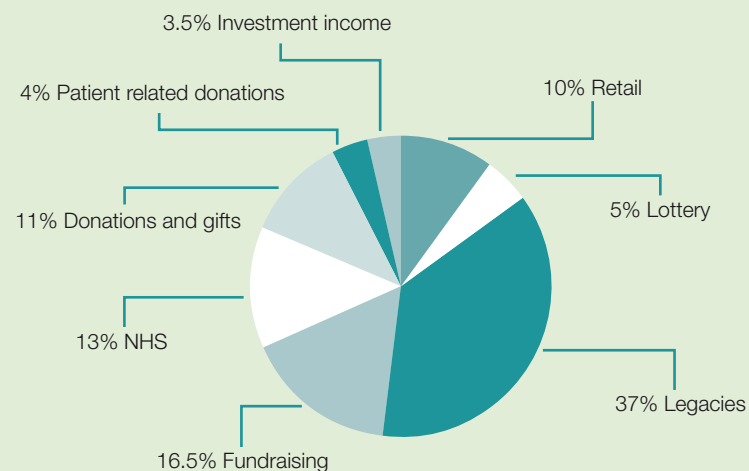
## Expenditure

Hospice care	3,114,883	73%
Retail	497,797	12%
Lottery	146,156	3%
All other income generation expenditure	528,503	12%
	<b>4,287,339</b>	<b>100%</b>
Surplus	2,988,666	
Unrealised losses	-193,954	

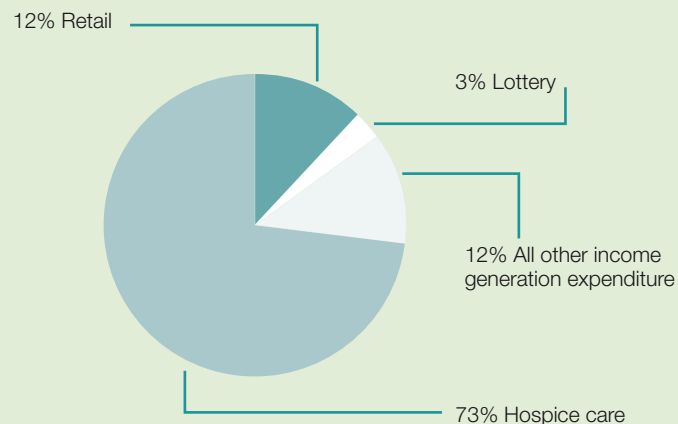
## Summary of Balance Sheet

	2008	2007
	£'000	£'000
Fixed Assets		
Tangible Assets	2,647	2,178
Investments	1,635	1,710
Current Assets	5,858	3,587
	<b>10,140</b>	<b>7,475</b>
Creditors	-307	-437
<b>Total Net Assets</b>	<b>9,833</b>	<b>7,038</b>
Represented by Unrestricted/designated funds	6,160	3,507
Revaluation Reserve	188	483
Other charitable funds	2,467	2,349
	8,815	6,339
Restricted/endowment funds	1,018	699
<b>Total funds</b>	<b>9,833</b>	<b>7,038</b>

## Income: £7,294,057



## Expenditure: £4,287,339



a year of growth

# Auditors' Statement

Auditors' statement on summarised financial statements:

## Independent auditors' statement to the Trustees of Phyllis Tuckwell Hospice

We have examined the summarised financial statements which comprise the summary statement of financial activities and the summary balance sheet.

## Respective responsibilities of trustees and auditors

The trustees are responsible for preparing the summarised financial statements in accordance with United Kingdom law and the recommendations of the charities SORP.

Our responsibility is to report to you our opinion on the consistency of the summarised financial statement with the full financial statements and Trustees' Annual Review. We also read the other information contained in the annual review and consider the implications for our report if we become aware of any apparent misstatements or material inconsistencies with the summarised financial statements.

## Basis of opinion

We conducted our work on accordance with Bulletin 1999/6 "the auditors' statement on the summary financial statement" issued by the Auditing Practices Board for use in the United Kingdom. Our report on the

organisation's full annual financial statements describes the basis of our audit opinion on the financial statements.

## Opinion

In our opinion the summarised financial statements are consistent with the full annual financial statements and the Trustees' Annual Report of Phyllis Tuckwell Hospice for the year ended 31 March 2008.

Registered auditors: **Sayer Vincent**

## Statement of the Trustees

These summarised financial statements contain information from both the Statement of Financial Activities and the Balance Sheet for the year ended 31 March 2008, but are not the full statutory report and accounts. The full financial statements were approved by the Trustees on 26 June 2008 and subsequently submitted to the Charity Commission (and to Companies House). They received an unqualified audit report and copies may be obtained from the charity's head office.

Signed on behalf of the trustees.

Chairman of the Trustees: **Brian G Lowe**







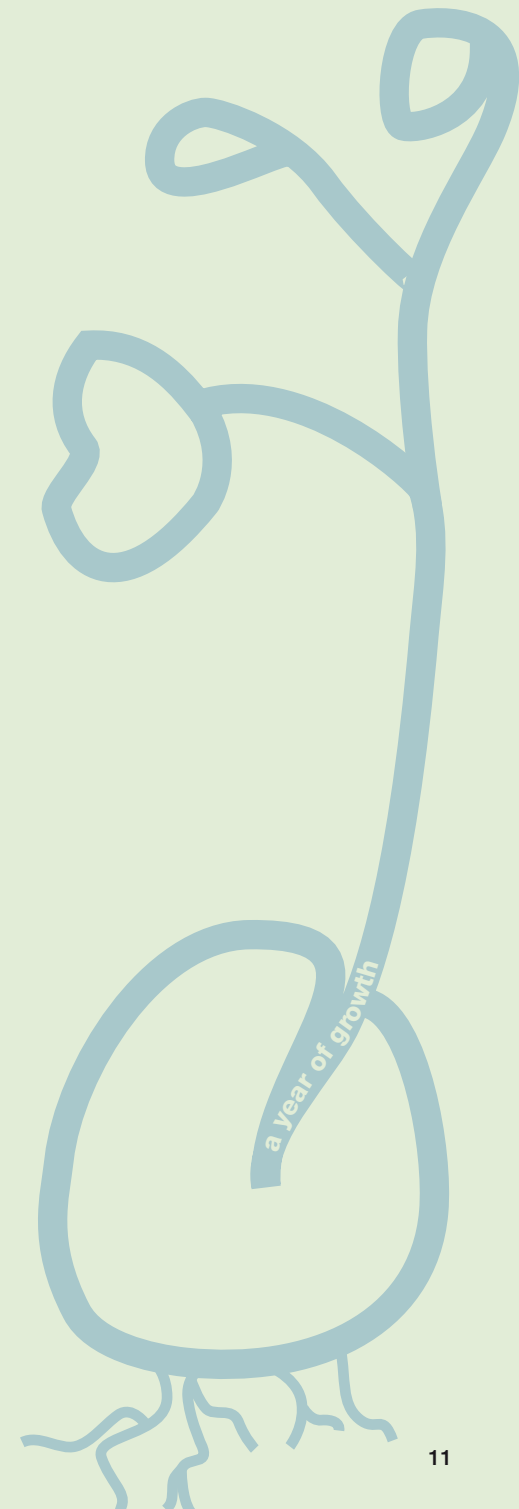
This has been a year of change, positive development and achievement for the Hospice. Through good management, and fortuitously due to our legacy position, we have a solid financial foundation on which to base the next phase of service expansion. This will require further capital expenditure at the Hospice and attendant increase in operating costs, which must be sustainable. The importance of our fundraising activities and public perception cannot therefore be understated.

Our Chief Executive, Senior Management Team (SMT), staff and volunteers have worked admirably as an integrated team this past year, coped with many changes, and contributed to many solutions. Not least of these has been the refurbishment and maintenance throughout the Hospice, expanded day and home care services, new IT systems, new personnel, and streamlined administration services. Our high clinical standards were evidenced by the Health Care Commission deeming a site inspection unnecessary this year. On behalf of the Board, I pay tribute to them all.

The Board this year has also taken time out for its own training, and spent time developing the reporting and interface through its Committees with the Chief Executive and SMT. This will hopefully be further enhanced next year by the introduction of electronic Balanced Scorecard reporting and more emphasis on strategic issues. It is also planned to recruit two new Trustees with specific skills to bring the Board up to full strength. May I thank all Trustees for their many and varied contributions, input and expertise to the Board.

**Brian G Lowe**  
Chairman of Trustees

**“On behalf of the Board,  
I pay tribute to them all.”**







## Phyllis Tuckwell Hospice



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