making every moment count

Artur Rank Hospice Charity

Annual Report 2011 - 2012
“You’re allowed to feel sad, you’re allowed to feel happy, all these emotions are legitimate. It gives a legitimacy to who you are and what you are doing. This ethos when you come in is something I feel and that doesn’t happen overnight and it’s not just one person, it’s all the staff who have this awareness of their patients and that what is good for one is not necessarily right for another.”
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2012 has been another important year for our charity, as you will see described in this Annual Review. Our financial position remains strong after another successful year generating income of £1,692,013. We continued to expand the support we provide to patients, their carers and families throughout the county, as well as progressing our ambitious plans to build a new hospice for Cambridgeshire that will be recognised as one of the very best.

Lots of people have helped make this possible. Dr Lynn Morgan, the Charity’s Chief Executive, leads a team of seven dedicated charity employees, three paid shop staff and two people managing the hospice volunteers. Dr Margaret Saunders (Clinical Director) and Liz Webb (Modern Matron) lead the NHS staff who deliver the vital services the Charity pays for. In 2012/13, the Charity will pay for the equivalent of 5 full-time and 37 part-time staff providing care and support to patients and their families. And in the community, we have over 300 volunteers who help with everything from serving food to the inpatients to acting as a marshal at one of our fundraising events. Countless more supporters and donors – both individuals and organisations – provide the financial support that is the foundation for what we do. On behalf of the Charity’s Trustees, I thank all of you.

As always, you will find the Review contains facts and figures that are fascinating, and stories that are uplifting. If you can help us to make the future of your hospice even more exciting, then please use one of the many avenues you read about here to continue supporting us.
The past year has been extraordinarily busy and all of us at the Charity have been working hard on all fronts – working hard to raise money, working hard to spend the money on our charitable purposes and looking at the long-term future of the Charity. We have managed to increase our income by 30% this year – which in this current economic climate is impressive. This would not have been possible without a staff team who are all prepared to roll up their sleeves.

In such a relatively small team, nearly everything has to be a team effort and it is not unusual to find the whole team standing in the middle of a very wet Jesus Green at some unearthly hour of a Sunday morning, to help put on an event. However, as a Charity, raising the money is just a means to an end – our primary purpose is to benefit end-of-life patients and patients living with life-limiting illnesses in Cambridgeshire. This year I am delighted to say that we have increased our direct spend on patient care and services by 39% on the previous year, and almost double what we were spending in 2009/2010.

This year we commissioned a strategic review of our options for the future; with the pressure on NHS budgets continuing to bite, it is even more important that we make sure our funds are spent in the best possible way. This can be a tricky path through not wanting to simply fill any gaps created by reduced NHS funding, but at the same time, being determined that patient care will be our priority. For several years now, the Charity has been considering how we improve the physical environment our patients experience. The Strategic Review is helping us to develop plans to maximise the benefits our funding brings to patients, their families and friends, both through the hands-on care and the environment in which patients receive the care. We will continue to keep our supporters up to date as these plans develop.

It has been our ambition over the last 18 months or so to expand our Hospice at Home service. This is an area which we think is very much needed by the community. Nights can be very long, lonely and stressful for patients choosing to spend their last days at home, and very worrying for families and friends. Our Hospice at Home nurses are now caring for 20–25 patients a month in patients’ own homes and we are continuing to grow this service. We are also continuing to lobby the NHS to make an investment in this important aspect of care.

There is often said to be a ‘virtuous circle’ around charitable hospice services. We help fund the services to provide the best end-of-life care possible, and the community helps us to raise funds, so that we can continue to pay for the care. We therefore feel that the Charity is very much a part of the local community and that we are a conduit for the community to fund the care it so very much values.
The last year has been another lively and interesting one for us within Arthur Rank House, with the 30th Anniversary celebrations, Gold Challenge Sports events, new babies, retirements and weddings. Of course we have been working hard looking after our patients and their families and friends as well.

Nationally, as well as the Queen’s Diamond Jubilee and the Olympics, the national agenda for care of patients who require palliative and end-of-life care, has been moving at pace. Following the Independent Review of Palliative Care Provision commissioned by the government last year, seven pilot sites are testing out a new ‘per patient payment’ tariff system, which will report its findings in 2014. This is good news, as it will mean hospices and other providers of palliative care can expect to be paid the same across England.

The new Health and Social Care Act was passed recently, which means that there are many changes affecting the structure of how NHS services are delivered, both national and locally. We are working closely with the new Clinical Commissioning Groups to ensure that palliative and end-of-life care is recognised as a priority, and to ensure that the services delivered from Arthur Rank House are recognised as a central hub of expertise willing to work with GPs and Community Nurses to support patients and families through this time in their lives.

With these two political items in mind, it is vital that Arthur Rank services are able to maintain their kudos and credibility in the ‘quicksand of change’. The building of a new hospice building which allows flexibility of usage and a modern approach to care is vital in this. But also a recognition that most of our work is done in communities with patients and families at home, and this is reflected in the great work that the Hospice at Home and Day Therapy does with the Community Specialist Nurses, GPs and District Nurses. With the significant increase in financial support we have received from the Charity this year, we have been able to further develop the service and to work on new projects quickly and with good effect, for example the expansion of Hospice at Home.

“kudos and credibility in the quicksand of change”
Whilst we contemplate the challenges of the next twelve months, I think we could allow ourselves a ripple of applause for the past year.

One of the interesting aspects of working in the NHS is in knowing that nothing will ever stand still – the political and financial importance of the NHS being such that there are constant changes and initiatives, many of which barely have time to come to fruition before being replaced by a further ‘innovation’. The past year ran true to form with the start of the devolvement of commissioning to GP groups, the expansion and restructuring in Cambridge Community Services NHS trust, and internal changes to our service to meet national/regional and local requirements. I must admit I rather like change – reflecting on the last 12 months, we have had changes to our environment (the new Day Therapy colour scheme and décor has met with universal praise); to our teams: leavers and joiners – leavers who are sadly missed and fondly remembered, joiners who are bringing fresh ideas and enthusiasm; to our neighbours – Cambridge Community Services NHS Trust now includes adult community services in Peterborough, Luton and parts of Suffolk; and our relationships – working more closely with colleagues in both the acute trust (Addenbrookes) and primary care (our new GP commissioners).

These changes present us with opportunities – on the management side that may mean possibilities for new processes and the much-needed efficiencies, but on the clinical side the opportunities are for influencing the quality of care for more patients and their carers, gaining access to patient groups previously beyond our remit. My colleague Dr Petersen has led a project to develop early access to specialist palliative care services for people with Motor Neurone Disease; our community nurses have joined GP practices (Gold Standard Framework/Palliative care meetings) where increasingly they have been able to discuss patients with non-malignant (non-cancer) diseases; I have met with colleagues in both hospital and community settings to explore how we can support young people with life limiting illnesses transitioning to adult services.

Two other areas of the service which have seen dramatic change this year are our lymphoedema team and the Hospice at Home team. Having battled with trials and tribulations the lymphoedema team have emerged with two new members and a rapidly diminishing waiting-list! Whilst the recent increase in the Hospice at Home team (thanks to the unprecedented support of the Arthur Rank House Charity and its supporters) has not only provided more patients with the care needed to achieve their aim of being at home to die, but also supported the families and other carers to share in the achievement.

Whilst we contemplate the challenges of the next twelve months, I think we could allow ourselves a ripple of applause for the past year.
What difference have we made in the last year?

We have measured our progress against our 2011 Strategic Objectives:

Goal 1 Improving existing services for patients and their families by using our money astutely

- Strengthen funding process and the visibility of the Charity’s investment in services
  We have funding agreements in place with the NHS whereby we only fund on invoice for services that have been delivered. We are now very explicit about which services are funded by the NHS and which are funded by the Charity. ✔️

- Closely monitor the services paid for with our funds
  We require, and receive, regular information on the number of patients being care for by the services we fund. We have a good two way dialogue with the NHS senior management team in Arthur Rank House and any issues arising are fully discussed. ✔️

- Support the expansion of Hospice at Home, ensuring it complements any other services
  We have more than doubled our investment in the last year on Hospice at Home and only difficulties in recruiting suitable nurses and healthcare staff prevented us developing the service more. We are currently supporting around 25 end of life patients a month in their own homes. The service works closely with NHS based community services and the hospice inpatient unit. This year we were also part of the national Warm Homes initiatives. This enabled us to give out 34 grants to help vulnerable end of life patients keep their homes warm. ✔️

- Actively pursue opportunities to refurbish or rebuild
  We commissioned a far reaching feasibility study to examine our options, this has considerably progressed this aspiration. This continues to be work in progress but the Trustees are committed to making something happen. ✔️

- Fund on the basis of contracts which deliver strong attribution of funding
  The services we fund are promoted as being funded by the Charity. In all presentations we continue to try and make it clear that currently no national charities support any care at the Arthur Rank Hospice. ✔️

What difference have we made in the last year?

We have measured our progress against our 2011 Strategic Objectives:
Goal 2  Raise awareness of the services we fund and ensure attribution of funding

- Implement the Judge Institute’s recommendation on website development and marketing collateral
  We have made some headway but there is still work to be done to build better links between the NHS Arthur Rank House website and the Charity’s website. Our own website also needs to be developed further around volunteering opportunities and the services we fund. We also wanted to undertake an audit on the full return on investment of the Charity’s investment in the services and use the data to demonstrate more accurately the Charity’s contribution to services at Arthur Rank House. We have done a little of this by trying to do a basic estimate in monetary terms of the value the volunteers add to the service. This is however a piece of work that requires more dedicated time.

- Develop marketing messages to speak to diverse groups
  This year we have tried to reach a range of different groups to explain the role of the Charity and the Hospice. We have achieved this goal in terms of age, gender and disability but have been less successful in reaching different cultural groups. We have plans to do more of this work in 2012.

- Aim to be the Charity of choice for local supporters and businesses
  We have had many supporters choose us as their Charity of the Year this year and this makes an enormous difference to our fundraising efforts. Where a business, school or other organisation adopts us as their Charity of the Year, we strive to build a strong relationship with them, to keep them informed of how their money is helping and to raise visibility of their support in the community.

- Develop an Arthur Rank Charity branding policy to build public awareness
  We have been working with a company called Magstar to update our branding and to develop brand guidelines. This work will help us to ensure that all our marketing material looks more professional and clearly promotes the Charity.

Goal 3 Develop our relationship with key stakeholders and secure a voice in countywide policy development.

- Ensure we have an active role in the development of services using the Charity’s funds
  We have been very involved in the development of Hospice at Home service but our direct involvement in the development of other services has been limited. This is an area we want to specifically address in the coming year.
• Work with different stakeholder groups in the business environment, health economy, third sector and local government
   We have actively engaged with all these areas. We are active members of the Chamber of Commerce (the Charity’s CEO Chairs the Third Sector Special Interest Group); the CEO is also a member of the Greater Cambridge and Peterborough Local Enterprise Partnership Board representing the Charity and Social Enterprise Sector. We have participated in events run by Cambridgeshire County Council, Cambridge City Council, GET group, WI, End of Life Stakeholder Group, Help the Hospices, Cambridge Conversations, Ely Cathedral Business Group and many more organisations.

• By working with Cambridgeshire Community Services, develop a relationship with GP commissioning clusters
   This work is still in progress and has perhaps not progressed as quickly as we would have liked partly because the local commissioning groups have been focussed on getting themselves organised. We are however beginning to have these meetings.

Goal 4 Increase our fundraising and broaden the fundraising base

• Develop new and existing fundraising streams of income i.e. lottery, trusts and foundations, corporate support and legacy income
   We have seen a marked increase in all of these areas. It has been much harder this year to attract corporate sponsorship for events, but corporates have helped in other ways. The Lottery income has exceeded our expectations and we have been very thankful of some legacies that have come in this year. We realise however that with big ambitions we cannot sit on our laurels and will continue to work on all these areas. Legacies will be particularly important to us in the future if we are to achieve all our ambitions for end of life care and we are developing a strategy to try to maximise this potential.

• Evaluate current fundraising activities and establish value in terms of income generated and increased visibility of supporters
   We have looked at all areas of our fundraising and we have agreed investment of resources correlated to income generated and increase of awareness of the Charity and services.

• Assess viability and profitability of securing a warehouse in place of current storage facilities
   We now have a warehouse facility in Dry Drayton and a short tenancy on the Royal Standard in Mill Road. These facilities have greatly increased out capacity to be able to take and sell furniture and the income generated has covered their cost. In addition we have been able to meet our primary aim which was to significantly reduce health and safety concerns associated with staff and volunteers sorting donations in the very small areas at the back of our shops.

• Assess viability and profitability of additional shop and/or furniture outlet
   Our foray into selling donated furniture has shown us that we would probably have to invest considerably more in suitable transport to move large donations of furniture around. However sales of stock at the Royal Standard has shown that there is a market for it, and we do have a potential steady stream of donations. We will continue with the Royal Standard facility whilst it is available, and then make a decision as to whether we would want to make the significant investment needed in setting up a more permanent charity furniture shop. We do believe that a ‘general’ charity shop would work well in Ely and continue to consider this as an option.
Goal 5 Support and develop our staff and volunteers

- Continue to review all staff policies and strive to be a model of good practice
  Staff policies have all been reviewed and revised as appropriate.

- Support staff in developmental activities and enhance their skill base
  Four staff are either on, or about to start, Modern Apprenticeships, other staff have attended conferences and training courses as need and opportunities arose.

- Strengthen Health and Safety and Security policies – and implement
  We have a policy of continual improvement with regard to security and Health and Safety. Lack of office space still presents the biggest challenge but policies are up to date and continual vigilance is strongly encouraged.

- Seek to improve the physical environment within which staff and fundraising volunteers work
  In the short term this has not improved due to lack of space but ambitious plans for the future are in hand.

- Ensure that our reward system, terms and conditions are in line with good practice
  As a small charity it is difficult to give significant financial rewards to our staff. However we are able to offer the flexibility which comes with being a small organisation. Staff are able to work flexitime, one member of staff has taken an unpaid sabbatical to travel extensively, when appropriate staff can work from home and we strive to embrace good practice for example offering salary sacrifice for nursery vouchers, staff development and a positive work environment. We have a fantastically dedicated staff team, who all work exceptionally hard and we want to ensure we retain them.
In our financial year 2011 – 2012

Key facts

Average number of patients attending day therapy a month = 29
Average number of patients having formal complementary therapy sessions per month = 21
Average number of patients receiving bereavement counselling per month = 34
Average number of patients receiving Hospice at Home care per month = 22.5

Our volunteer drivers covered 1,040 journeys driving patients or their families between the hospice and their homes.

Income Comparison

Income for the financial year 2011/2012 showed a marked increase on the previous year
Sources of income 2011/2012

Expenditure Comparison

- Governance
- Charitable activities
- Investment management
- Fundraising/marketing
- Shop running costs

Legend:
- [2011/2012]
- [2010/2011]
**Facts**

Growth of voluntary income on prior year 30%

Charitable expenditure growth on prior year 36%

Fundraising costs as a % of voluntary income 13%

Fundraising costs (including shops) as a % of total expenditure 26%

Governance (includes investment management) as % of total expenditure 1%

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**Expenditure 2011/2012**

- **Direct charitable expenditure**: 71%
- **Strategic Development**: 14%
- **Management and administration**: 15%
- **Fundraising costs**: 26%
- **Voluntary services**: 71%
The future

Objectives and commentary
Targets for 2012–2013

In setting our objectives for the year ahead, the Charity intends to:

• Further develop our plans to build a new hospice for Cambridgeshire that will be recognised as one of the very best. We have recently completed a high quality feasibility study using expert outside consultants, so we are off to a good start.

• Continue to expand the delivery of Hospice at Home throughout Cambridgeshire. We aim to fund £742,500 next year, up from actual spend of £529,000* in 2011/2012 and £143,860 in 2010/2011. And we believe we have made the case sufficiently for the PCT to put in a contribution of £250,000 into this important area.

• Sustain our ‘business as usual’ support for services and facilities at Arthur Rank House. Next year we plan to fund £1,322,748, up from £1,204,152 in 2012. Together with the Hospice at Home Service, the Charity will pay for the equivalent of 5 full-time and 37 part-time staff providing care and support to patients and their families.

• Maintain and enhance our relationships with relevant NHS organisations, and in particular the newly emerging Clinical Commissioning Group for Cambridgeshire and the Local Commissioning Groups.

• Continue to grow the Charity’s capabilities to deliver these objectives; working closely with our NHS colleagues while increasing our autonomy, independence and control of our own destiny. We will need a capital appeal to support building a new hospice.

* Figure also includes nursing ‘bank’ staff for Hospice at Home and in-patient unit
Day therapy

Day therapy at Arthur Rank Hospice gives patients a programme of care which is designed around the specific needs of individual patients. The Day Therapy core team includes a creative therapist, complementary therapists, specialist palliative care nurses and care assistants. Working closely with the team are our social worker, psychologist, counsellors, chaplain, physiotherapists and other clinicians, providing an holistic care approach for each patient. The professionals are very much supported by our army of volunteers who help make day therapy that much more enjoyable by providing tea, coffee, cake, a nutritious lunch and are on hand to support the staff in a range of activities.

Lunch is a very sociable event; patients are offered wine or beer with their lunch, the volunteers cook delicious homemade meals with lots of very fresh produce. For over a year, a local fruit and vegetable distributor, Fresh Direct, have delivered boxes of fresh produce for us to serve to our patients. Fresh Direct provide this all completely free of charge. Patients, their families, friends and staff are really appreciative of these contributions.

Whilst day therapy is about helping the patients manage their symptoms and receive the therapies the hospice has to offer, it is also about patients being able to talk freely about their conditions, their thoughts and fears, with people experiencing the same anxieties:

“I think one of the first impressions you get [when you come into the hospice] is of coming into a happy place. It’s not dour or glum or gloomy, people are pleasant, they smile and are welcoming and they laugh. You don’t have to feel that just because it’s a place where people die or are very poorly that has to be reflected in the attitude here, and I think that’s absolutely wonderful I really really do. And it’s the whole person, the whole family, the whole group of you that come in that is cared for.”

Day therapy refurbishment

The Day Therapy room itself was looking very tired until recently. The carpet was stained, some of the recliners no longer reclined and it had begun to look the very opposite of the cheerful environment we want to provide. The Charity therefore agreed to refurbish the room – with a little help from our friends. Cate Burren and her staff from Angel and Blume, an interior design company in Cambridge, offered their design advice free of charge. Having talked to staff, patients and volunteers, they developed two ‘mood boards’, and everyone got the chance to vote on their preferred colour combination.

The preferred approach was bright and floral – Cate very much wanted to link the room with our beautiful garden. People expressed their preference overall for the light green/dark pink colour combination and we set about putting the plan into action. This proved more challenging than we expected as various permissions had to be sought from the NHS. However, IMS sent in a team of volunteers to decorate, Ron Brown Joinery did an excellent job in building some fantastic storage cupboards, John Lewis gave us £500 of soft furnishings, a supporter, Andrew Fuller, funded a new sound system and we discovered that some conference tables that St John’s Innovation Centre donated to us, made an excellent dining table. Peter Buncombe, a local photographer, provided some great photos of flowers in close up which we had mounted onto canvases. In all it took a little longer than we had hoped – but, as they say, good things are worth waiting for.
Hospice at Home

Lorraine Moth, Lead Clinical Nurse Specialist

Hospice at Home continues to expand. There are now 16 staff members and we are currently recruiting for more HCA Band 2s and Band 3s. The referral numbers fluctuate, but generally there is a steady flow of referrals into the service. The team continues to experience a high volume of deaths but are proud to be able to report that patients are being supported and enabled to die at home.

The links with other healthcare providers continue to develop, and the team appears to be well respected and valued. The main sources of our referrals are District Nurses, GPs, specialist nurses and discharge planning teams. The service is being evaluated over a two-year period in a partnership which involves the National Institute of Health Research, the Collaboration for Leadership in Applied Health Research and Care, and the Charity. The research project’s evaluation to date has noted real merit in the service and the Hospice at Home team has received very positive feedback. Systems are constantly being developed to support data collection so that the evidence is accurate and robust.

We are hopeful that the PCT will make a contribution to the service in the coming year to complement the funding provided by the Charity and therefore facilitate greater reach of the service.

This year the Charity has provided the staff with a number of small items of equipment which have enhanced the care the nurses have been able to provide to our patients. These extras included aromatherapy infusers, remote in-house monitors, massage oils and individual toiletries for the patients.

Increasingly, the nurses have supported a number of patients who have been cared for in nursing homes. The size of the homes and insufficient staffing levels overnight have meant that patients may die alone, if it were not for the extra support provided by our Hospice at Home nurses. Staff and relatives are understandably distressed if they think a patient has died, or is in danger of dying, alone. We have been providing night care to ensure patients are adequately symptom controlled; this is obviously of benefit to the patients but it also provides support for the care home staff which helps them to feel better about the final hours of their patients when they don’t necessarily have the resources to provide this level of care themselves.

Our continuing vision for the next few months is to successfully recruit into the team and maintain the uniqueness and high quality of care that patients and families have come to expect! We get a great many positive comments from families about the Hospice at Home service:

"Your organisation did not only help Ken fulfil his wish to die at home, but also helped myself to have some respite during the night. The nurse who cared for my husband was kind, professional, supporting and more importantly caring. I would be grateful if you could relay my sincere gratitude to your team, for making a sad experience a peaceful, calming and comforting one, not only for him, but for us."
This has been a busy year for all members of the Family Support Team and unfortunately we will see some major changes as our Chaplain Jonathan Burrough will be retiring at the end of August after 12 years. Over the years, Jonathan has offered support and spiritual leadership to patients, families and staff members. As Jonathan was the first full-time Chaplain at Arthur Rank House, he has developed the role to provide a focus on spirituality, where the essence of the person is identified rather than solely their religious beliefs. As a result, chaplaincy can reach out to a wide variety of people at a very difficult turning point in their lives.

During his time here, Jonathan set up the Chaplaincy Volunteer Service. This is comprised of 16 volunteers who work closely with Jonathan to provide spiritual and emotional support to patients and families both at Arthur Rank House and the Lord Byron Ward at Brookfields Hospital. I know that I speak for all at Arthur Rank House when I say he will be a hard act to follow and he has our sincere thanks for all his support over the years. Jonathan has agreed to come back to help us out whilst we seek a new chaplain, so we won't lose him completely just yet.

The psychotherapists and the bereavement services have been under pressure over the last six months, with some areas of referrals for therapeutic support increasing by 200% in early summer. There is an on-going need for us to review how we provide services and look at ways of reaching people more effectively. None of this would be possible without the Arthur Rank House Charity’s on-going support and commitment to these vital services and to team members. Staff development has also been a new undertaking with our psychotherapist providing Salisbury Training to enable professionals to provide a higher level of psychological support to patients. There is also an initiative to set up a choir to include individuals who have received services at Arthur Rank House.

As the social worker at Arthur Rank House, I have been able to provide vital financial support for specific items through the Arthur Rank House Charity’s micro grants. Examples of these range from a microwave to enable a lady to have hot meals at home, a new carpet to enable a lady to spend her last months at home in a warm environment, to airline tickets for a family member to enable a young family to be supported through the loss of their mother. Although these grants are relatively small, they have made a huge difference to the end of life for some and the future for others. The Family Support Team continues to develop its services and provide on-going support for those who are in most need. Without the Charity’s support, none of this would be possible.

In addition to the work done by the Chaplain and his team of volunteers within Arthur Rank House, both in the Inpatient Unit and Day Therapy, the Chaplain also has some involvement with families after a death has occurred.

Every two months the Chaplain organises an occasion of remembrance and thanksgiving for families, around the first anniversary of their bereavement. The numbers vary – sometimes two services are necessary on the same day – but there is always great appreciation.

The Chaplain will also, when asked, conduct the funeral for families. This is also greatly appreciated by friends and families:

Many thanks for the service of Remembrance Thanksgiving today, conducted with such compassion and understanding. I felt quite emotional when I arrived at Arthur Rank Hospice, but the words, music and poetry helped me enormously to come to terms with my grief;

Thank you for conducting Dad’s funeral last week and for all the preparation and attention to detail you took with us and behind the scenes. We really appreciated everything.

That you were willing to undertake the task was such a relief and blessing. Thanks to your involvement we are now able to begin a new stage in our lives, feeling we have honoured the memory of both our parents.
Having a nice long soak in the bath and then enjoying a lovely massage by the staff with some beautiful cream makes my day and lets me escape into a different world for that short period of time.

The visitors’ kitchen is always filled with an array of food and beverages so that patients and relatives can help themselves any time of the day or night. Having food available 24/7 means that if relatives are staying with us, they do not need to worry about leaving their loved one to organise food. The ward assistant (funded by the Charity) ensures that food, snacks and drinks are offered to patients throughout the day. She will also ensure that relatives have had some food and drink and are tended to.

The introduction of the afternoon cake round has been well received by patients and relatives. Cakes are lovingly prepared by volunteers or staff and then enjoyed with a good old cup of tea, coffee or even their favourite tipple.

Thanks to the generous donation of fresh fruit and vegetables every week by Fresh Direct, patients have been enjoying jacket potatoes, salad and fruit throughout the year; this all supplements the range of food available through the NHS.

Volunteers continue to help throughout the unit and we wouldn’t run such an effective service if it wasn’t for the volunteers. The volunteers help us out in so many different roles on the IPU, from shifts on the unit, helping serve meals, to flower arranging and the volunteer drivers. The volunteer drivers will bring in and collect relatives at times to suit them, this enables the relatives to be here for as long as they want. Our older relatives especially appreciate this service with many of them being able to avoid a bus route which would involve several changes to reach us.

The tea bar is a little sanctuary within the hospice where patients, relatives, visitors and staff can go for a hot beverage, friendly smile and a place to escape. Daily papers provided by the Charity are located there, patients who are mobile might wander round to read the papers and have a cup of tea or we will take the newspapers to the patients when requested. It’s a way of keeping in touch with the world outside.

You’d have thought I’d have been all upset that I couldn’t go home but I wasn’t. I was happy about it because it was a relief to accept the inevitable and that was a big thing and it was all the professionals, my family and me who were able to say this can happen. It makes a big difference in how I felt because I’ve been here for a week or so and I couldn’t believe how everything revolves around the patient and it was explained to me that you have a bank of energy and how do you spend that? Do you spend it because you want to go home and you want to walk and go to the loo on a commode in the night because there’s no one there for you or do you want to use it for the enjoyment of your family and friends and have a catheter, have these things that can help you, have a comfortable whatever the rest of your life is.

Carly Love, Inpatient Unit Manager
Volunteering is a rewarding experience that gives people a sense of achievement as well as skills, experience and confidence. But volunteering at Arthur Rank Hospice is even more: it’s about human relationships that create a strong sense of belonging, in both paid staff and volunteers.

When I came into post, only a few months ago, as a temporary Volunteer Services Manager, I was extremely pleased to be able to join a team of committed and dedicated volunteers. I discovered that the volunteers will literally do anything, at any time, to help patients and families in those difficult times. It wasn’t only their commitment that surprised me: it was their compassion, friendliness and never ceasing smiles that really impressed me. As you can imagine, it is not only me that sees this - whether it’s about volunteer drivers, Day Therapy hostesses, Inpatient Unit or any other volunteers, the feedback we receive from patients and families is always positive.

2011–12 has been another remarkable year for the volunteer team. We currently have 281 volunteers helping us in 24 different areas in the Charity – plus a host of fundraising volunteers. Seventy new applicants have attended one of our volunteer information or induction sessions over the last year and many of these were young people under the age of 30. This proves that our efforts to attract more young people to join the volunteer team at Arthur Rank Hospice have been successful – although we do of course very much value older volunteers as well. From the feedback received from prospective medical students, and as a result of consultation with other hospices in the region, we are currently developing a pilot volunteer scheme for sixth-form students. This is aimed at helping those students who want to go on to a future medical career, to gain some skills and experience in the hospice environment.

This year we were delighted to celebrate 36 of our volunteers being awarded long-service medals. These ranged from 5, 10, 15 and 20 years of service. One of the recipients of a long-service award was Mimi, the Pat Dog who has provided her very much appreciated services to our patients for 10 years. Being able to celebrate so many long-service awards demonstrates that all the support and training that the Volunteer Services provide is very much appreciated by the volunteers.

From the feedback received from our current and past volunteers, we identified new targets for the Volunteer Services team to ensure the continuous improvement in our services. We have identified areas of volunteering within the hospice where we can recruit more volunteers. For example, on the Inpatient Unit we have increased our volunteer numbers by 46% within just a few months, after identifying there was a need.

We have had positive feedback about our re-designed quarterly Volunteer Newsletter and we are pleased that our efforts to improve internal communications between the organisation, its volunteers and staff have been successful. We provide regular opportunities for the staff and volunteers to discuss important issues. Through these consultations we have identified new volunteer roles to pilot in the future that will add to the 24 areas of activity that we currently offer to volunteers.

We really appreciate our volunteers who kindly give their time, expertise and support to complement the services we provide for patients and their families. We value their feedback on our work and therefore we will continue to explore ways in which their opinions are heard to ensure they feel, and are acknowledged as, a proactive and integral part of the organisation.

Agnes Toth, Volunteer Services Manager
The hospice is a juxtaposition of beauty and sadness, pleasure and pain, tenderness and caring. We are all on the same side giving to something better and bigger than us. I came in January with no expectations, offering my services as a volunteer counsellor. Who would have thought that there would be so much love and life to drown out the fear of death. It is difficult to see suffering and to know that the patients may not go home, but thanks to the staff and volunteers, the hospice reflects and incorporates the atmosphere and comfort of home. The hospice’s touch is tender, innocent and unconditional, a bit like the love of a mother. I feel very privileged to be part of something good, something better than me. Everyone has made me feel very comfortable and I love the way it is all about the patients and their families. The hospice is like an unconditional friend to all who enter its doors!

Nadia Macari-Brown, Day Therapy and Tea Bar volunteer

It is actually my pleasure to have the opportunity to use myself in such a meaningful way within the hospice [as a volunteer]. Thanks to all the staff I have been around, it has been a heartening and moving experience over the five years of being there; to see the team work and individual level of quality interaction. Arthur Rank House holds an excellent reputation outside in Cambridge itself, so I feel proud to be part of this service the hospice gives.

Jill Wittmer, Volunteer, Family Support Team

- 281 volunteers working in or around the hospice
- 100+ fundraising volunteers
- 208 kg of fresh vegetables cooked for Day therapy patients
- 1248 slices of cake served by volunteers on the inpatient unit
- 36 long-service volunteer awards this year
- 468 full-fat yoghurts bought for patients to improve their calorie intake
- 18,265 volunteer hours
- 1040 volunteer driver journeys
The Arthur Rank Hospice Charity shops have had a very successful year. The shops and our Lottery combined have produced an increased income of 30% on last year. The shops, in Mill Road and Regent Street, have seen a healthy flow of donations coming in and the shop staff and volunteers have worked hard to maximise the value of donated goods. We have volunteers who have a keen interest in antiques and collectables who monitor the stock and take promising items to Cheffins; this approach has produced some very good returns this year.

Sarah Turner is the Senior Shop Manager and she is very ably assisted by Assistant Manager Paul Darking and the Manager of the Regent Street Shop, Helen Sheppard. This team works hard but without the army of volunteers, we simply could not operate the shops.

We also use the old Royal Standard on Mill Road. The Royal Standard is a disused pub and we rent the ground floor. Initially our plans were just to have some extra sorting space, as the cramped conditions at the rear of both our shops presented health and safety challenges. However, whilst the pub is still used for sorting and storage, we have expanded into selling secondhand furniture. We were fortunate in that we were able to entice Geraldine Woods back. Geraldine had been our manager at the Regent Street shop but retired a few years ago - not that she had become a stranger to us as she continued to volunteer in the hospice. Geraldine agreed to volunteer to open up the ‘pub’ two or three mornings and, in a spirit of ‘if you can’t beat ‘em, join ‘em’, her husband ‘Spud’ has thrown himself into helping out with the furniture sales. Donated furniture is continuing to flow in and out, and is bringing in a healthy income.

This year we have seen a real upturn in business. The quality and quantity of donations are still at a high as is the support for the hospice; being local is very important. People realise that they can get quality at a bargain price and also help the hospice, which is such a good cause.

We are lucky in that we have 30 + shop volunteers ranging from 16 to 80+ years of age who all bring their own individual skills from window dressing, van driving to knitting!

Without our band of volunteers, the shops and Royal Standard just couldn’t function. We are always on the lookout for potential volunteers who can spare four hours plus a week. When volunteering at our busy shops there’s never a dull moment as you never quite know what’s going to come through the door and there’s always plenty to do.

We hope to build on the success of the past year so why not be a part of it?

Sarah Turner, Senior Shop Manager
When we started the Lottery last year, it was with some trepidation as to how successful it would be. The Lottery is a partnership with St Helena’s Hospice in Colchester. St Helena’s have set the Lottery up for us and continue to run it. However we could not have dared hope that the Lottery would be so successful – in the first year we recruited over 6,000 players. We expect to make well in excess of £50,000 this year and the projections for the next three years are even more exciting. Just a commitment of £1 or £2 a week from you would help us raise even more from the Lottery and, who knows, you might be one of the weekly winners winning £1,000 or one of the many other cash prizes. To join, ring 0800 285 1390 or go to www.yourhospicelottery.org.uk
Fundraising
The Fundraising Team

The Fundraising Team offers a wide range of income-generating activities in which supporters can get involved. The Charity aimed to raise £1.3 million to fund the services to which we committed ourselves for 2011/12. Through a combination of events, donations, legacies, small grants and our retail income, we managed this.

Unfortunately however, the inclement British weather had an impact on our mass participation activities, such as the Star Shine Stroll - with walker numbers and donations being below what was expected. However, to help bring in additional income, we introduced our first ever Summer Prize Draw, which raised in excess of £14,000 for the Charity.

We would like to thank our sponsors who continue to make our fundraising events possible:

- Ely Festive Fun Run 2011 – Ward, Gethlin, Archer (formerly Archer and Archer)
- Light Up A Life 2011: Skeates and Peasgood Funeral Directors
- Luxury Tea Party 2012: Doubletree by Hilton
- Star Shine Stroll 2012: Elms BMW, Gibbs Denley, Supremebeing, Ridgeon Group, NW Brown Ltd, Cadbury’s and Shelford Rugby Club

Challenges - we have been very privileged in that people have run marathons and half marathons for the Charity, they have cycled enormous journeys, undertaken challenges such as the Three Peaks Challenge, walked the Great Wall of China and many other amazing personal challenges.

This year we also ran the Gold Challenge, which was an initiative linked to the Olympics. Individuals or teams set themselves challenges in one or more of the Olympic sports. Many of our own staff participated so that they too, ran that extra mile, swam those extra lengths and rowed that much further – all to raise money for the Charity.

Therefore the Gold Challenge has been a really successful challenge. The participants have been very enthusiastic and so far it has raised over £14,000 out of a pledged income of £21,000. Over 20 teams signed up to either learn a new sport, or take on a challenge, which is certainly worthy of a gold medal. As part of the Gold Challenge, Method Creative came up with the idea of Wacky Races, which got local businesses competing in canoes on the lake at Milton Country Park, for the title of Business Star 2012.

Here is a summary of how you have helped support your local Hospice:

- Your Local Hospice Lottery – over 6000 players at the end of June – £23,000
- Donations, including those sent to us in memory of their loved ones – £376,753
- Event participation, including challenge events – £114,789
- Regular giving (this is where people have standing orders to us) – £9,483
- Trusts – £30,700 – (£19,500 of this from Girton Town Charitable Trust)
- Community fundraising – £62,852
- Corporate – £5,000
- Gifts in wills – £640,428 – this was boosted by £100K from an estate of which Hewitsons are discretionary trustees

Gifts in wills, or legacies, continue to remain our largest individual source of income. They are hugely important to us in maintaining and developing the funding the Charity can both offer and provide to the Hospice. This income is important so that together, we can deliver our vision for future hospice care delivered to your community.

In 2010 Robert Barnes beloved wife Lisa died in the Hospice. Robert was so grateful for the care that he and Lisa received, that he vowed to raise £100,000 for the Hospice. In the last financial year Robert, with a lot of help from his loyal supporters, has already presented us with £48,200. This is an amazing amount for a supporter to raise and we are truly grateful because we know the difference this money will make.
How you can help

As you can see in this review our expenditure on patient services continue to increase if you would like to support us, there are many ways you can help:

REGULAR GIVING – a standing order to us for a small amount a month is tremendously helpful, it enables us to work in the knowledge that a regular income is coming in and we can more accurately plan for the services we can support. Please look on our website or ring our fundraising office for help in setting this up.

HOLDING FUNDRAISING EVENTS FOR US – Big Cake Break, coffee mornings, raffles, wine tastings, suppers ..... If you have an idea and would like some support please talk to us. We can provide balloons and other branded resources, and we can often also help with raffle prizes. If you enjoy doing car boot sales or jumble sales, we may well be able to help by providing good quality jumble.

TEXTING A DONATION TO US - You can now make donations to The Arthur Rank Hospice Charity by text. Simply text ARHC30 £10 (or whatever amount you would like to donate) to 70070 - it’s that speedy and simple.

CORPORATE SPONSORSHIP – We are always delighted when a company chooses us as their Charity of the Year or offers to sponsor part, or all, of an event. Giving to ARHC and getting your staff to undertake fundraising events can be a great morale booster for the company and is also a very effective method of team building. Contact us for lots of ideas of how to finance.

CHALLENGES - If you have been inspired to get physical for us and run, climb, walk, cycle, jump out of a plane – or any other challenge you can think of, then please do contact and we can put you in touch with organisations that arrange challenges. Whether you plan your event yourself or do an organised challenge, we can provide you with support – contact us to find out how we can help with your fundraising efforts.

DONATE TO OUR SHOPS – we have two shops, one in Mill Road and the other in Regent Street. We welcome your donations of clothes, bric-a-brac, jewellery, shoes, books etc. Or why not organise a ‘Don’t Dump, Donate’ day in your workplace. Invite colleagues to bring in their unwanted items, and if you give us a little notice, we will call and pick everything up at the end of the day.

STAR SHINE STROLL – this event held in May each year is a tremendously fun event. Walkers can either walk the full ten miles or choose a shorter route. Although this is a very ‘girly event’ – flashing bunny ears, feather boas, pink cowboy hats are in abundance – we also invite men, who can get into the spirit of it to participate. The walk takes in Cambridge city centre and walkers get great support from the local community.

BRIDGE THE GAP – Join us each September to participate in this unique walk. Every year the walk will take you through ten Cambridge colleges. Each year the mix of Colleges and University Departments which participate is different, Blue Badge Guides are on hand to tell you about the Colleges visited and many of the colleges open up areas not normally made available to the public. The walk is suitable for wheelchair users and pushchairs. To find out more go to www.bridgethegapwalk.org
Legacy income has always been very important for the Charity. Last year we received over £640,000, well in excess of our tentative expectations at the beginning of the year. These gifts, by their very nature, arise on a random basis and the yearly totals vary considerably. Many of our donors have had personal experience of the hospice either as a patient’s family member or friend and sometimes as a fund raiser or volunteer. They find that remembering the Hospice in their Will is, for them, their preferred way of supporting us and perpetuating their relationship.

We are often asked about this form of giving and the various options available both as to the type of Will and the choices for arranging a gift. It is, perhaps, not surprising that many people do not make a Will at all, and when the time comes there can be many complications and delays.

It is preferable that thought is given to making a Will so that wishes can be properly observed. To help, there are books available to explain the details; specialist Will writers (there is an institute of Professional Will Writers), and of course solicitors.

There are different types of gift, and if a legacy is thought to be the preferred route the next decision is how best it can be arranged.

- **PECUNIARY LEGACY.** This is a fixed sum of money allocated to the charity alongside the distribution of other bequests. The drawback to this form is that its value can be eroded over time as inflation bites and might, in the end, be less than you might have intended. It means that to avoid devaluing the effect you will need to revisit your Will from time to time.

- **RESIDUARY LEGACY.** Very common nowadays as a way to remember a charity as it is expressed as a percentage of the balance if your estate once all the other payments and deductions have been made. This automatically takes account of the value of your estate including the effects of inflation.

- **SPECIFIC LEGACY.** You may have a particular item that you want to leave to the Charity. This can include such things as furniture, art, buildings, land, or other investments and which you can specifically nominate.

- **LIFE INTEREST (REVERSIONARY) TRUST.** You might decide to set up a trust fund for a dependent which they can enjoy during their lifetime. Thereafter the trust comes to an end and the assets disposed according to the wishes of the original will maker. This kind of Will is best dealt with by a solicitor.

- There is another reason why you might need a solicitor to help with your Will and that is to make provision for the eventuality that you outlive all those who are your beneficiaries. This requires careful consideration. If you already have a Will in place and you now wish to leave a gift to the Charity you can instruct your solicitor to draw up a codicil. This is a simple legal device to amend your Will without completely re-writing it.

It is also very helpful to inform us if you have taken this step. We cannot know when a gift will come but a broad indication of a commitment is always helpful. You can discuss your plans, in confidence, with us and we will be pleased to help in any way we can.

Peter Tingley, Legacy Ambassador
peter.tingley@arhc.org.uk
General Information

The summarised financial statements (overleaf) are taken from the audited financial statements of Arthur Rank Hospice Charity for the year ended 30 June 2012. The audited financial statements, on which the auditors have expressed an unqualified opinion, were signed on behalf of the Board of Directors of Arthur Rank Hospice Charity, were approved on 12 September 2012 and were submitted to the Registrar of Companies on 24 September 2012. The financial statements have yet to be submitted to the Charity Commission for England and Wales.

The summarised financial statements and general information may not contain enough information for a full understanding of Arthur Rank Hospice Charity. Copies of the full audited financial statements may be obtained on request from Arthur Rank Hospice Charity, 351 Mill Road, Cambridge, CB1 3DF.

The purpose of the Charity is to relieve sickness and suffering of people with life limiting conditions and to assist their families or carers in Cambridgeshire and the surrounding areas.

Arthur Rank Hospice Charity is a registered charity, number 1133354.

The Charity has a subsidiary company, Arthur Rank Hospice Limited, which engages in fundraising activities on behalf of the parent charity. Profits from the trading company are gift aided to the charity by way of a charitable donation.

On behalf of the Board

Mr S Evans, Chairman

25 September 2012

Independent Auditors’ Statement to the Trustees

We have examined the summary financial statement for the year ended 30 June 2012.

Respective Responsibilities of Trustees and Auditors
The trustees are responsible for preparing the summary financial statement in accordance with applicable United Kingdom law. Our responsibility is to report to you our opinion on the consistency of the summary financial statement with the full annual financial statements and its compliance with the relevant requirements of section 427 of the Companies Act 2006 and the regulations made thereunder.

We conducted our work in accordance with Bulletin 2008/3 issued by the Auditing Practices Board. Our report on the company’s full annual financial statements describes the basis of our opinion on those financial statements.

Opinion
In our opinion the summary financial statement is consistent with the full annual financial statements of Arthur Rank Hospice Charity for the year ended 30 June 2012 and complies with the applicable requirements of section 427 of the Companies Act 2006 and the regulations made thereunder and with the applicable requirements of the Statement of Recommended Practice ‘Accounting and Reporting by Charities’ (revised 2005).

We have not considered the effects of any events between the date on which we signed our report on the full annual financial statements 24 September 2012 and the date of this statement.

PETERS ELWORTHY & MOORE
Chartered Accountants and Statutory Auditor, Cambridge

26 September 2012
## Summary Consolidated Statement of Financial Activities
for the year ended 30 June 2012

<table>
<thead>
<tr>
<th>Incoming Resources</th>
<th>Restricted</th>
<th>Unrestricted</th>
<th>Total 2012</th>
<th>As Restated Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>From generated funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legacies</td>
<td>15,427</td>
<td>1,156,661</td>
<td>1,172,088</td>
<td>732,560</td>
</tr>
<tr>
<td>Activities for generating funds</td>
<td>25,894</td>
<td>361,757</td>
<td>387,651</td>
<td>341,789</td>
</tr>
<tr>
<td>Investment income</td>
<td>-</td>
<td>53,051</td>
<td>53,051</td>
<td>43,161</td>
</tr>
<tr>
<td><strong>Total incoming resources</strong></td>
<td><strong>41,321</strong></td>
<td><strong>1,571,469</strong></td>
<td><strong>1,612,790</strong></td>
<td><strong>1,117,510</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Resources Expended</th>
<th>Restricted</th>
<th>Unrestricted</th>
<th>Total 2012</th>
<th>As Restated Total 2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Costs of generating funds</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Shop running costs</td>
<td>-</td>
<td>132,429</td>
<td>132,429</td>
<td>109,842</td>
</tr>
<tr>
<td>Fundraising costs</td>
<td>-</td>
<td>220,997</td>
<td>220,997</td>
<td>179,200</td>
</tr>
<tr>
<td>Investment management expenses</td>
<td>-</td>
<td>9,187</td>
<td>9,187</td>
<td>5,972</td>
</tr>
<tr>
<td>Charitable activities</td>
<td>43,822</td>
<td>1,160,330</td>
<td>1,204,152</td>
<td>775,365</td>
</tr>
<tr>
<td>Governance costs</td>
<td>-</td>
<td>15,678</td>
<td>15,678</td>
<td>14,975</td>
</tr>
<tr>
<td><strong>Total resources expended</strong></td>
<td><strong>43,822</strong></td>
<td><strong>1,538,621</strong></td>
<td><strong>1,582,443</strong></td>
<td><strong>1,085,354</strong></td>
</tr>
</tbody>
</table>

Net incoming resources/(resources expended) for the year  
(2,501) 32,848 30,347 32,156

Transfers between Funds
Investment gains/(losses)
Net movement in funds for the year
(4,423) (4,859) 436 141,653

Fund balances brought forward at 1 July 2011
88,598 4,621,924 4,710,522 4,568,869

Fund balances carried forward at 30 June 2012
84,175 4,626,783 4,710,958 4,710,522
## Summary Consolidated Balance Sheet

as at 30 June 2012

<table>
<thead>
<tr>
<th></th>
<th>2012</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Fixed Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tangible assets</td>
<td>8,590</td>
<td>11,233</td>
</tr>
<tr>
<td>Investments</td>
<td>3,595,761</td>
<td>3,606,124</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>3,604,351</td>
<td>3,617,357</td>
</tr>
<tr>
<td><strong>Current Assets</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stocks</td>
<td>12,040</td>
<td>13,874</td>
</tr>
<tr>
<td>Debtors</td>
<td>47,745</td>
<td>236,675</td>
</tr>
<tr>
<td>Cash on deposit</td>
<td>1,214,051</td>
<td>866,177</td>
</tr>
<tr>
<td>Cash at bank and in hand</td>
<td>101,041</td>
<td>86,726</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>1,374,877</td>
<td>1,203,452</td>
</tr>
<tr>
<td><strong>Creditors: amounts due within one year</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>(268,270)</td>
<td>(110,287)</td>
</tr>
<tr>
<td><strong>Net current assets</strong></td>
<td>1,106,607</td>
<td>1,093,165</td>
</tr>
<tr>
<td><strong>Total Assets Less Current Liabilities</strong></td>
<td>4,710,958</td>
<td>4,710,522</td>
</tr>
<tr>
<td><strong>Funds</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Restricted Funds</td>
<td>84,175</td>
<td>88,598</td>
</tr>
<tr>
<td>Unrestricted Funds</td>
<td>4,626,783</td>
<td>4,621,924</td>
</tr>
<tr>
<td><strong>Total Charity Funds</strong></td>
<td>4,710,958</td>
<td>4,710,522</td>
</tr>
</tbody>
</table>
Slightly against our expectations given the economic gloom, our income from all sources grew last year, helped undoubtedly by some generous legacies but also stimulated by our other fundraising efforts including a full year of our second shop on Mill Road and the first modest returns from our own lottery. This was especially pleasing because last year also saw our increasing commitment and contribution to Hospice at Home in particular but a number of other projects described elsewhere in this annual review.

Notwithstanding a fall in the value of our investment portfolio (in line with market movements), we ended the year with a small surplus of £436. Our balance sheet remains very strong with significant cash reserves. Much of this cash is earmarked for our property project (covered elsewhere in this review) but we also need to retain funds to underwrite our significant commitment to Hospice at Home since, although we will continue to work hard at fundraising, we cannot presume on the eternal generosity of our supporters.

Report from Michael Magnay of Kleinworth Benson Bank Limited on the investment fund they manage for the Charity

30 June 2011 – 1 July 2012

Risk assets have had a volatile 12 months, driven by uncertainty in global markets. During the period under review the portfolio depreciated by 3.65%. The return since the initial investment was made is +9.72%.

During the third quarter of 2011 the portfolio depreciated by 7.4% as the Eurozone crisis developed, leading to increased fears about the security of European banks. Macro headlines dominated the newswires throughout the quarter. In the US, politicians failed to reach agreement on the conditions required to raise the debt ceiling until a late compromise was reached on the deficit reduction plan.

The portfolio rose by 2.8% during the fourth quarter of 2011 as equity and fixed income markets rose. Despite the weaker economic news, equity markets rallied as hopes of a solution to the Eurozone crisis grew.

Investor confidence improved significantly during the first quarter of 2012, however, the outlook for growth remained challenging. The performance of the portfolio lagged behind the balanced sector as a whole as the defensive positioning of the portfolio, underweight equity and overweight fixed income, was unable to take full advantage of the surprisingly strong markets, but left the portfolio well positioned given the risks to the global economy.

During the second quarter of 2012, equity and commodity markets declined. The continued defensive strategy kept the volatility of the portfolio subdued in difficult market conditions. Nevertheless, we continue to focus on markets that appear to offer real long-term value and thus provide us with a margin of safety. Between 1 July and 28 August 2012, the portfolio has appreciated 3.08%.
Trustees
The Arthur Rank Hospice Charity Trustees

Stuart Evans became a Trustee in June 2007 and Chair of Trustees in December 2009. His wife Brenda and daughter Bella have both been volunteers for nearly ten years so the whole family is involved. He has been an entrepreneurial business leader in Cambridge since 1983. He was the founding Chief Executive at Plastic Logic and Cotag International and currently follows a portfolio career. His professional life includes a Harvard MBA and early career with IBM and McKinsey. He has a Cambridge MA and is a Chartered Director of the Institute of Directors.

Andy Swarbrick is a senior Partner at Deloitte LLP where he has worked for 37 years, 28 as a Partner. He heads up the firm’s Entrepreneurial Business Team in Cambridge and works with a number of local businesses on accounting, tax, audit and strategic issues. He lives in Cambridge with Louise, his wife and their seven children. He has been a Trustee and Treasurer of the Hospice since summer 2007.

Edward (Ed) Coe is a Chartered Quantity Surveyor and consultant in the construction industry, having retired as a partner of Davis Langdon in 2002. As a Rotarian he is involved in several charity projects locally and around the world.

Jon Hutt is Joint Head of the Corporate Real Estate Division of Savills, and a Commercial Property Chartered Surveyor with over 20 years’ experience in commercial work including business space agency, investment and corporate consultancy. He runs the Corporate Real Estate team working across EMEA, focusing on working alongside corporate occupiers to plan all aspects of their property strategy. He has a special interest in the Life Sciences sector and sustainability consultancy.

Lewis Isaacs was educated at Merchant Taylors’ School and Brasenose College, Oxford, where he read Law. He qualified as a Solicitor in 1967 and in 1971 became a Partner with Wild, Hewitson and Shaw (now Hewitsons LLP) in Cambridge. On his retirement, in 2002, he became and remains a Consultant with the firm. Lewis became a Trustee of ARHC in 2001. He co-founded the annual Chariots of Fire event. ARHC has on two occasions been the chosen beneficiary of the event.

Anthony McGurk is a Partner in the Corporate Finance team of the Cambridge office of the national law firm Mills & Reeve (having joined them in June 2011 from the Cambridge office of Eversheds) and he works for a large number of local and private companies.

Kate Kirk has worked as a writer and editor for over 20 years, working for international organisations such as WHO and the Asian Development Bank, leading European business schools and specialist publishers. She started volunteering at Arthur Rank House in 2007, and became a Trustee of the Arthur Rank Hospice Charity in 2010. She also serves on the communications Advisory Group for BuildCARE, a major research project into palliative and end-of-life care supported by Cicely Saunders International and The Atlantic Philanthropies.

Mark Lloyd has been CEO of Cambridgeshire County Council since March 2008. Prior to that, he was CEO of Durham County Council. Before entering local government in 2000, Mark was a civil servant. He is also a Board Member at Anglia Ruskin University and Chairman of the Association of County Chief Executives.

Lynda Tingley has a strong nursing and clinical background at a senior level, ten years in legal administration and many years experience of working with local charities. Lynda joined the in 2004 as a volunteer and was quickly asked to become a Trustee. She was able to bring her background and experience to bear on the development of the Charity. She continues to volunteer within the Hospice and is very active supporting fundraising activities.

Dr Alex Manning studied medicine at Manchester University, qualifying in 1992. After a variety of hospital jobs and a three-year spell working as a volunteer medical officer in Namibia for VSO, he became a GP partner in Burwell Surgery in 2000. Alex has a particular interest in palliative care in the community working closely with other members of the primary healthcare team as well as services based at the Arthur Rank. More recently, Alex has developed an interest in GP Commissioning and sits on the board of the Isle of Ely Local Commissioning Group. He lives with his wife and three young children on a Fenland smallholding.

Jennifer Brook studied at St Hughís College, Oxford and later did an MBA at Cranfield. She started her career in marketing and after gaining much experience, moved to a major international travel and financial services group. Jennifer became Bursar at Churchill College in 1998 where she would describe her role as akin to that of a chief operating officer. She is also a trustee of one of the major private schools in Cambridge. Jennifer has three children and five step-children.

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Thank you

We would like to thank all the organisations who have supported us in the last year, including:

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Arthur Rank Hospice Charity supports people in Cambridgeshire by providing end of life care, counselling and support for adult patients with life limiting illness. Our care helps patients and families to make every moment count. Arthur Rank Hospice Charity provides managerial, financial and volunteer support for the Hospice, along with a wide range of outreach and education services, facilities, equipment and grants.

Lynn.morgan@arhc.org.uk
01223 723115
www.arhc.org.uk
ARHC, 351 Mill Road
Cambridge. CB1 3DF

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