

## **Consolidated Annual Financial Statements**

For

Leopardstown Park Hospital Board

For The Year Ended 31/12/2021

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#### **General Information**

**Board Members** 

Mr. Anthony Morris

Mr. Denis Duff

Ms. Frances Ní Fhlannchadha

Ms. Mary Farrelly Ms. Ciara Davin Ms. Doírín Mulligan Mr. John Brassil Appointed 18th February 2021 Reappointed 18th February 2021 Reappointed 18th February 2021 Appointed 18th February 2021

Appointed 18th February 2021 Appointed 18th February 2021 Appointed 18th February 2021

Chief Executive

Ms. Ann Marie O'Grady

Head Office:

Foxrock, Dublin 18.

Main Bankers:

Ulster Bank Ireland Ltd 27/35 Main Street,

Blackrock, Co.Dublin.

Auditors:

The Comptroller & Auditor General

3a Mayor Street Upper,

Dublin 1

Solicitors:

Hayes Solicitors, Lavery House,

Earlsfort Terrace,

Dublin 2.

## Governance Statement and Board Members' Report

#### Governance

The Board of Leopardstown Park Hospital was established under the Leopardstown Park Hospital Board (Establishment) Order 1979. The functions of the Board are set out in Section 4 of this Act. The Board is accountable to the Minister for Health and is responsible for ensuring good governance and performs this task by setting strategic objectives and targets and taking strategic decisions on all key business issues. The regular day-to-day management, control and direction of Leopardstown Park Hospital are the responsibility of the Chief Executive Officer (CEO) and the senior management team. The CEO and the senior management team must follow the broad strategic direction set by the Board, and must ensure that all Board members have a clear understanding of the key activities and decisions related to the entity, and of any significant risks likely to arise. The CEO acts as a direct liaison between the Board and management of Leopardstown Park Hospital. The Board of Leopardstown Park Hospital is also responsible for the administration of Leopardstown Park Hospital Foundation and the authorisation of transactions on the Foundation. The governance arrangements and control procedures with the Hospital apply to the Foundation.

#### **Board Responsibilities**

The work and responsibilities of the Board are set out in Corporate Governance Manual which also contains the matters specifically reserved for Board decision. Standing items considered by the Board include:

- declaration of interests,
- reports from committees.
- financial reports/management accounts.
- performance reports, and
- reserved matters.

Section 22 of the Leopardstown Park Hospital Board (Establishment) Order 1979 requires the Board of Leopardstown Park Hospital Board to keep, in such form as may be approved by the Minister for Health, all proper and usual accounts of money received and expended by it.

In preparing these financial statements, the Board of Leopardstown Park Hospital Board is required to:

- select suitable accounting policies and apply them consistently,
- make judgements and estimates that are reasonable and prudent,
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that it will continue in operation, and
- state whether applicable accounting standards have been followed, subject to any material departures disclosed and explained in the financial statements.

The Board is responsible for keeping adequate accounting records which disclose, with reasonable accuracy at any time, its financial position and enables it to ensure that the financial statements comply with Section 22 of the Leopardstown Park Hospital Board (Establishment) Order 1979. The maintenance and integrity of the corporate and financial information on the Leopardstown Park Hospital Board's website is the responsibility of the Board.

The Board is responsible for approving the annual plan and budget. An evaluation of the performance of Leopardstown Park Hospital by reference to the annual plan and budget was carried out on 24th February 2022.

The Board is also responsible for safeguarding its assets and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.

The Board considers that the financial statements of Leopardstown Park Hospital Board properly presents the state of affairs of Leopardstown Park Hospital Board at 31 December 2021 and its income and expenditure for 2021.

The Board consists of a Chairperson and six ordinary members, all of whom are appointed by the Minister for Health. The members of the Board were appointed for a period of five years and they met 7 times as per the detail on page 8. The table below details the appointment period for current members:

Board Structure					
Board Member	Role	Date Appointed			
Anthony Morris	Chairperson	18 February 2021			
John Brassil	Ordinary Member	18 February 2021			
Ciara Davin	Ordinary Member	18 February 2021			
Frances Ní Fhlannachdha	Ordinary Member	18 February 2021			
Denis Duff	Ordinary Member	18 February 2021			
Doirín Mulligan	Ordinary Member	18 February 2021			
Mary Farrelly	Ordinary Member	18 February 2021			

A Board self-evaluation was completed in November 2021.

The Board has established four Committees, as follows:

1. Audit & Risk Committee: Comprises at four persons, two of which will be Board members. The role of the Audit & Risk Committee is to support the Board in relation to its responsibilities for the financial reporting process, the system of internal control, the audit process, and the Hospital process for monitoring compliance with laws and regulations, the code of practice for the Governance of State Bodies and Risk Management. The Committee is independent from the financial management of the organisation. In particular the Committee ensures that the internal control systems including audit activities are monitored actively and independently. The Audit & Risk Committee provides the internal audit reports to the Board after having been reviewed by the Audit & Risk Committee and reports to the Board formally in writing annually.

The Audit & Risk Committee met twice in 2021 instead of usual 4 times due to absence of Board for Q1 2021 and therefore the absence of a quorum. The members of the Committee were as follows:

Members of Audit & Risk Committee 2021	
Dr Nicolas Marcoux - Chairperson	
Mr. Dermot Magan	
Ms. Doirín Mulligan	
Ms. Mary Farrelly	

2. Integrated Quality, Safety and Risk Committee: This comprises of two Board members, one of whom is the Chairperson, one independent member, the other the Hospital's risk advisor and five members of management. Its aim is to drive quality improvement and provide a level of assurance to the Board that there are appropriate and effective systems in place that cover all aspects of quality and safety and relevant areas of risk. The Committee met 4 times in 2021 and the members of the Committee are as follows:

## Members of Integrated Quality, Safety and Risk Committee

Ms. Elaine Keane (Independent Chairperson) resigned 22 September 2021

Mr. John Brassil (Board Member) appointed Chairperson 23 September 2021

Ms. Mary Connolly (Risk Advisor)

Frances Ní Fhlannachdha (Board Member)

Ms. Ann Marie O'Grady CEO

Mr. Adrian Ahern, Director of Nursing

Ms. Florence Hogan, Quality & Patient Safety Manager

Ms. Nicola Keogh, Risk Officer

Ms. Úna Hendroff, HSCP Representative

3. Finance Committee: This comprised of two Board members, one of whom is Chairperson, and one independent member. The Finance Committee is established to assist and advise the Board in discharging its oversight responsibilities for good financial governance and stewardship of the organisation's assets.

There were 3 meetings of the Committee in 2021 instead of scheduled 4 due to the absence of the Board in Q1 2021. The members of this committee are as follows:

#### **Members of the Finance Committee**

Ms. Mary Farrelly - Chairperson

Mr. Denis Duff - Board Member

Mr. James Rogan - Independent Member

**4. Veterans' Committee:** Committee comprises two Board members one of which is the Chairperson and two nominees from the Leopardstown Park Hospital Trust. Due to Covid-19 there was no meeting of this committee in 2021. The members of this committee are as follows:

## Members of the Veterans' Committee

Mr. Denis Duff - Chairperson (Board Member)

Mr. John Brassil - Board Member

Major Ed Hillan

Dr. Anne Montgomery

## Schedule of Attendance, Fees and Expenses for Non-Executive Board/Committee Members

A schedule of attendance at the Board and Committee meetings for 2021 is set out below including the fees and expenses received by each non-executive member:	Board	Audit & Risk Committee	Integrated Quality, Safety & Risk Committee	Finance Committee	Veterans' Committee	Fees 2021* *No fees are payable	Expenses 2021 These are noted in Note 23 of AFS
No of Meetings 2021	7	2	4	3	0	***************************************	***************************************
Mr. Anthony Morris	7			*****************************	***************************************		0
Mr. John Brassil	6		1		0		0
Ms. Ciara Davin	7				***************************************		0
Ms. Doirín Mulligan	7	2					0
Ms. Mary Farrelly	6	2		3	0		0
Ms. Frances Ni Fhlannchadha	7		3				0
Mr. Denis Duff	7		***************************************	2	0		0
Dr Nicolas Marcoux	-	1			***************************************		0
Mr. Dermot Magan		2	***************************************		***************************************		0
Mr. James Rogan				3			0
Ms. Elaine Keane			3		***************************************		0
Major Ed Hillan					0		0
Dr Anne Montgomery					0		0

#### **Key Personnel Changes**

Ms Paula Carraher, Resident Services Manager resigned in April 2021 and Edel Ambrose replaced her in November 2021.

## Disclosures Required by Code of Practice for the Governance of State Bodies (2016)

The Board is responsible for ensuring that Leopardstown Park Hospital has complied with the requirements of the Code of Practice for the Governance of State Bodies ("the Code"), as published by the Department of Public Expenditure and Reform in August 2016. The following disclosures are required by the Code:

Employee Short-Term Benefits Breakdown - This is provided in note 8b of the financial statements

#### **Consultancy Costs\***

	2021	2020
	€'000	€'000
Legal advice	71	32
Human Resources	42	48
Occupational Health	208	167
Other	31	
Total consultancy costs	352	247

<sup>\*</sup>Consultancy costs include the cost of external advice to management and excludes outsourced business-as-usual' functions.

## **Legal Costs and Settlements**

The table below provides a breakdown of amounts recognised as expenditure in the reporting period in relation to legal costs, settlements and conciliation and arbitration proceedings relating to contracts with third parties. This does not include expenditure incurred in relation to general legal advice received by Leopardstown Park Hospital Board which is disclosed in Consultancy costs above.

2021	2020	
€	€	
415	0	
0	0	
2,160	0	
2,575	0	-
	€ 415 0 2,160	€ € 415 0 0 0 2,160 0

#### Travel and Subsistence Expenditure

Travel and subsistence expenditure is categorised as follows.

2021	2020
€	€
0	896
498	104
al	
0	0
0	0
498	1,000
	€ 0 498 al 0 0

#### Hospitality Expenditure

The hospital did not incur any hospitality expenditure in relation to staff or clients in 2021.

#### Statement of Compliance

The Board has adopted the Code of Practice for the Governance of State Bodies (2016) and has put procedures in place to ensure compliance with the Code. In 2021, Leopardstown Park Hospital has complied with the requirements of the Code of Practice for the Governance of State Bodies, as published by the Department of Public Expenditure and Reform in August 2016, with the following exceptions:

Those areas disclosed within the Statement of Internal Controls

On behalf of the Board

Board Member

Date 118/22

Date 17/8/22

Mr Anthony Morris - Chairman



# Ard Reachtaire Cuntas agus Ciste Comptroller and Auditor General

## Report for presentation to the Houses of the Oireachtas

## Leopardstown Park Hospital

## Opinion on the financial statements

I have audited the financial statements of Leopardstown Park Hospital for the year ended 31 December 2021 as required under the provisions of section 5 of the Comptroller and Auditor General (Amendment) Act 1993. The financial statements comprise

- the statement of accounting policies
- the consolidated non-capital income and expenditure account
- the consolidated capital income and expenditure account
- the consolidated balance sheet
- the consolidated cash flow statement and
- the related notes.

In my opinion, the financial statements

- properly present the state of affairs of Leopardstown Park Hospital at 31 December 2021 and its income and expenditure for 2021
- have been prepared in the form prescribed under article 22 of the Leopardstown Park Hospital Board (Establishment) Order 1979, and in accordance with the Accounting Standards for Voluntary Hospitals approved by the Minister for Health.

## Basis of opinion

I conducted my audit of the financial statements in accordance with the International Standards on Auditing (ISAs) as promulgated by the International Organisation of Supreme Audit Institutions. My responsibilities under those standards are described in the appendix to this report. I am independent of Leopardstown Park Hospital and have fulfilled my other ethical responsibilities in accordance with the standards.

I believe that the audit evidence I have obtained is sufficient and appropriate to provide a basis for my opinion.

## Report on information other than the financial statements, and on other matters

Leopardstown Park Hospital has presented certain other information together with the financial statements. This comprises the governance statement and Board members' report and the statement on internal control. My responsibilities to report in relation to such information, and on certain other matters upon which I report by exception, are described in the appendix to this report.

I have nothing to report in that regard.

John Crean

For and on behalf of the

**Comptroller and Auditor General** 

26 August 2022

#### Responsibilities of Board members

As detailed in the governance statement and Board members' report, the Board members are responsible for

- the preparation of annual financial statements in the form prescribed under article 22 of the Leopardstown Park Hospital Board (Establishment) Order 1979, and in accordance with the Accounting Standards for Voluntary Hospitals approved by the Minister for Health
- · ensuring the regularity of transactions
- assessing whether the use of the going concern basis of accounting is appropriate, and
- 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.

#### Responsibilities of the Comptroller and Auditor General

I am required under section 5 of the Comptroller and Auditor General (Amendment) Act 1993 to audit the financial statements of Leopardstown Park Hospital and to report thereon to the Houses of the Oireachtas.

My objective in carrying out the audit is to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement due to fraud or error. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with the ISAs 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.

As part of an audit in accordance with the ISAs, I exercise professional judgment and maintain professional scepticism throughout the audit. In doing so,

- I identify and assess the risks of material misstatement of the financial statements whether due to fraud or error; design and perform audit procedures responsive to those risks; and obtain audit evidence that is sufficient and appropriate to provide a basis for my opinion. The risk of not detecting a material misstatement resulting from fraud is higher than for one resulting from error, as fraud may involve collusion, forgery, intentional omissions, misrepresentations, or the override of internal control.
- I obtain an understanding of internal control relevant to the audit in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the internal controls.
- I evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures.

I conclude on the appropriateness of the use of the going concern basis of accounting and, based on the audit evidence obtained, on whether a material uncertainty exists related to events or conditions that may cast significant doubt on Leopardstown Park Hospital's ability to continue as a going concern. If I conclude that a material uncertainty exists, I am required to draw attention in my report to the related disclosures in the financial statements or, if such disclosures are inadequate, to modify my opinion. My conclusions are based on the audit evidence obtained up to the date of my report. However, future events or conditions may cause Leopardstown Park Hospital to cease to continue as a going concern.

I communicate with those charged with governance regarding, among other matters, the planned scope and timing of the audit and significant audit findings, including any significant deficiencies in internal control that I identify during my audit.

I report by exception if, in my opinion,

- I have not received all the information and explanations I required for my audit, or
- the accounting records were not sufficient to permit the financial statements to be readily and properly audited, or
- the financial statements are not in agreement with the accounting records.

#### Information other than the financial statements

My opinion on the financial statements does not cover the other information presented with those statements, and I do not express any form of assurance conclusion thereon.

In connection with my audit of the financial statements, I am required under the ISAs to read the other information presented and, in doing so, consider whether the other information is materially inconsistent with the financial statements or with knowledge obtained during the audit, or if it otherwise appears to be materially misstated. If, based on the work I have performed, I conclude that there is a material misstatement of this other information, I am required to report that fact.

#### Reporting on other matters

My audit is conducted by reference to the special considerations which attach to State bodies in relation to their management and operation. I report if I identify material matters relating to the manner in which public business has been conducted.

I seek to obtain evidence about the regularity of financial transactions in the course of audit. I report if I identify any material instance where public money has not been applied for the purposes intended or where transactions did not conform to the authorities governing them.

## Certification of Chief Executive Officer and Chairperson

Certification of Chief Executive Officer and Chairperson for the Year Ended 31st December 2021

We certify that the consolidated financial statements of the Leopardstown Park Hospital Board for the year ended 31st December 2021 as set out herein are in agreement with the books of account and have been drawn up in accordance with generally accepted practices and with the accounting standards as laid down by the Minister for Health.

These financial statements, which comprise pages 20 to 35 and the statement of accounting policies, pages 18 to 19, properly presents the state of affairs of the hospital at 31st December 2021 and of its income and expenditure and cash flow for the year then ended.

			1.1
Signed	Ann Marie O'Grady – Chief Executive Officer	_ Date _	17/8/22
Signed	MAnthony Morris - Chairman	_ Date _	17/3/22

#### Statement on Internal Control

## Scope of Responsibility

On behalf of Leopardstown Park Hospital Board we acknowledge the Board's responsibility for ensuring that an effective system of internal control is maintained and operated. This responsibility takes account of the requirements of the Code of Practice for the governance of State Bodies (2016).

## Purpose of the System of Internal Control

The system of internal control is designed to manage risk to a tolerable level rather than to eliminate it. The system can therefore only provide reasonable and not absolute assurance that assets are safeguarded, transactions authorised and properly recorded and that material errors or irregularities are either prevented or detected in a timely way.

The system of internal control, which accords with guidance issued by the Department of Public Expenditure and Reform, has been in place in Leopardstown Park Hospital Board for the year ended 31 December 2021 and up to the date of approval of the financial statements except for the internal control issues outlined below.

#### Capacity to Handle Risk

Leopardstown Park Hospital Board has an Audit & Risk Committee with financial and audit expertise comprising two Board members and two external members, one of whom is the Chairperson. The Committee met twice in 2021. In addition, due to the nature of healthcare the Board also has an Integrated Quality, Safety & Risk Committee which focuses on clinical, health & safety and related risks, while the Audit & Risk Committee focuses on more corporate related risks. The Audit & Risk Committee receives reports from the IQS Committee and has visibility on the work carried out there. The Board receives reports from both Committees. The absence of the Board from September 2020 into Q1 2021 had an effect on the ability of the Audit & Risk Committee to achieve a quorum for its meetings following the retirement of Audit & Risk Committee members who were also Board members, and delays in reviewing of internal audit reports resulted. Executive management ensured that audits continued as per internal audit plan and management actions were detailed.

Leopardstown Park Hospital Board has also contracted externally an internal audit function, which is adequately resourced and conducts a programme of work agreed with the Committee.

The Board has developed a risk management policy which sets out the risk management processes in place and details the roles and responsibilities of staff in relation to risk. This policy was reviewed and updated in November 2021. The policy has been issued to all staff who are expected to work within Leopardstown Park Hospital Board's risk management policies, to alert management on emerging risks and control weaknesses and assume responsibility for risks and controls within their own area of work.

#### **Risk and Control Framework**

Leopardstown Park Hospital Board has implemented a risk management system which identifies and reports key risks and the management actions being taken to address and, to the extent possible, to mitigate those risks.

A risk register is in place which identifies the key risks facing Leopardstown Park Hospital Board and these have been identified, evaluated and graded according to their significance. The register is reviewed and updated by the Board twice annually or more frequently as required. The outcome of these assessments is used to plan and allocate resources to ensure risks are managed to an acceptable level.

The risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff.

We confirm that a control environment containing the following elements is in place:

- procedures for all key business processes have been documented,
- financial responsibilities have been assigned at management level with corresponding accountability,
- there is an appropriate budgeting system with an annual budget which is kept under review by senior management. The annual budget was reviewed by the Finance Committee and the Board at the earliest opportunity after appointment in 2021
- there are systems aimed at ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets

#### **Ongoing Monitoring and Review**

Formal procedures have been established for monitoring control processes and control deficiencies are communicated to those responsible for taking corrective action and to management and the Board, where relevant, in a timely way. We confirm that the following ongoing monitoring systems are in place:

- key risks and related controls have been identified and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies,
- reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- there are regular reviews by senior management of periodic and annual performance and financial reports which indicate performance against budgets/forecasts.

#### **Procurement**

I confirm that Leopardstown Park Hospital Board has procedures in place to ensure compliance with current procurement rules and guidelines. Matters arising regarding controls over procurement are highlighted under internal control issues below.

#### **Review of Effectiveness**

I confirm that Leopardstown Park Hospital Board has procedures to monitor the effectiveness of its risk management and control procedures. Leopardstown Park Hospital Board's monitoring and review of the effectiveness of the system of internal financial control is informed by the work of the internal and external auditors, the Audit & Risk Committee which oversees their work, and the senior management within Leopardstown Park Hospital responsible for the development and maintenance of the internal financial control framework.

I confirm that on April 6<sup>th</sup> 2022 the Board conducted an annual review of the effectiveness of the internal controls for 2021.

#### Internal Control Issues

The Board is fully committed to implementing public procurement guidelines. LPH looks to adopt any HSE or OGP contracts that it is aware of and has incrementally increased the number of contracts from HSE or OGP procurement processes. LPH's Service Arrangement with the HSE states that pursuant to the Government decision of April 2013, the HSE and all service providers funded by the HSE are mandated to use contracts put in place by HSE Health Business Service (HBS) Procurement and the Office of Government Procurement (OGP). At times LPH is required to wait for completion of the tender processes being carried out by HSE or OGP to be put in place, this has caused delays in moving to compliant contracts but is outside of the control of LPH. In 2021, LPH incurred expenditure of €339k (excl. VAT) in relation to goods and services where the procedures did not fully comply with procurement rules and guidelines. These were in the areas of facilities, legal, cleaning, office, bedding/clothing, catering and medical supplies. Progress continues to be made in relation to compliance in 2021 as new contracts both came into effect and were put in place through HSE frameworks, tendering in conjunction with HSE, OGP and other group procurement processes. Derogations were put in place, as appropriate, this included to address critical Covid related requirements including supply of PPE where not able to be supplied through HSE.

The onset of the COVID 19 pandemic in early 2020, and the resulting public health advice and safety measures, changed some of the working practices of the LPH with remote and virtual working introduced for some staff.

The hospital has monitored the developments closely, looking to mitigate the risks that may affect the business operations, staff, and stakeholders. Actions taken by the LPH includes:

- Transition of business operations to a remote working environment where some processes can continue as normal.
- Continuous assessment of significant risks pertaining to the COVID-19 pandemic and the ability of LPH to respond effectively.
- · Ensuring robust segregation of duties.
- Ensuring all existing data protection and records management policies and procedures continue to apply in the remote working environment and are monitored and reported on as normal.
- Ensuring that staff members access LPH's network using the LPH's approved ICT equipment and that all staff members working remotely have been equipped with the necessary ICT equipment.

 Assessed the potential for weaknesses in internal controls resulting from COVID-19 and undertook measures to monitor and update internal controls where necessary."

It is also noted that Leopardstown Park Hospital relies on an aged ICT infrastructure, which is on the corporate risk register as a high risk and detailed in internal audit reports. The Hospital has submitted project and funding applications to the HSE to resolve these risks.

Signed on behalf of the Hospital:

Signed Date: 17/8/27

Signed Date: 17/8/27

Mr Anthory Morris - Chairman

#### Statement of Accounting Policies

## 1 Basis of Accounting

The financial statements have been prepared on an accruals basis under the historical cost convention, in accordance with the accounting standards laid down by the Minister for Health. In accordance with Sec 1.8.1 of the Accounting Standards for Voluntary Hospitals, Leopardstown Park Hospital Foundation is consolidated with the Financial Statements of Leopardstown Park Hospital Board.

#### 2 Income Recognition

Revenue Grants are received from the Health Service Executive towards the net annual running costs of the hospital. The amount brought to account represents the approved allocation in respect of the costs as at the reporting date.

Capital Grants are accounted for in the Capital Income and Expenditure Account on an accruals basis.

Income in relation to Fair Deal Funding is recognised when the service is delivered to the resident.

#### 3 Fixed Assets

Expenditure on fixed assets qualifying for a capital grant from the Health Service Executive or the Trustees of the hospital or which have been funded through independent fund raising schemes are capitalised in the balance sheet since 1979.

Expenditure on fixed assets not qualifying for a capital grant from the Health Service Executive, is charged to the income and expenditure account in the year in which it is incurred. However any fixed asset items with a purchase cost of € 3,809 or more are charged to the income and expenditure account and are also stated as tangible fixed assets in the balance sheet. Computer equipment with a purchase cost of € 1,270 or more is charged to the income and expenditure account and is also stated as a tangible fixed asset in the balance sheet.

Land and buildings taken over by the hospital in 1979, which under the revised Department of Health accounting guidelines, are normally included in a hospital's financial statements at professional and insurance valuations respectively, are not accounted for in these financial statements, as the relevant assets are held under licence between the Trustees of Leopardstown Park Hospital and the Board of Leopardstown Park Hospital. Extensions to the buildings in the period since 1979, which were the subject of approved Health Service Executive capital grants are reflected in the financial statements and are stated at cost.

## 4 Depreciation

Depreciation is charged directly to the capitalisation account and is provided on tangible fixed assets recognised in the balance sheet at rates calculated to write off the cost or valuation of each asset on a straight line basis over its expected useful life as follows

•	Buildings	2% Straight Line
•	Equipment	20% Straight Line
•	Computers	33% Straight Line
•	Motor Vehicles	20% Straight Line

## Statement of Accounting Policies (continued)

#### 5 Stocks of Consumable Stores

Stocks have been valued on the basis of cost with appropriate write-offs for stock which is damaged or obsolete.

#### 6 Patients' Property

Monies received by the Board from or on behalf of patients for safekeeping are kept in accounts separate and apart from Board accounts. Such accounts are collectively called the Patients' Private Funds. Such monies are not the property of the Board and are administered by the Board on behalf of the patients. Independent auditors audit the accounts of the funds.

#### 7 Superannuation

By direction of the Minister of Health, no provision has been made in the financial statements to cover any future liabilities in respect of pensions payable under the Local Government Scheme. Contributions from employees who are members of the scheme are credited to the income and expenditure account when received. Pensions payments under the scheme are charged to the income and expenditure account when paid.

The Public Service Pensions (Single Scheme and Other Provisions) Act 2012 became law on 28th July 2012 and introduced the new Single Public Service Pension Scheme ("Single Scheme"). This commenced with effect from 1st January 2013. All new entrants to pensionable public service employment on or after 1st January 2013 are, in general, members of the Single Scheme. Employee contributions under the scheme are remitted to the Department of Public Expenditure and Reform.

#### 8 Pay Awards

Retrospective pay awards are not provided for in these financial statements until sanctioned and funded by the HSE.

#### 9 Capitalisation Account

The capitalisation account represents the unamortised value of funds applied for the purchase of fixed assets.

## 10 Fundraising

Leopardstown Park Hospital Foundation is a vehicle through which fundraising activities are undertaken. The Foundation is under the control of the Board of Leopardstown Park Hospital. Funds are remitted to the Hospital in the form of grants and are awarded for specific purposes relating to the enhancement of care and support for residents, patients and clients (and their carers and families) of Leopardstown Park Hospital, and specifically excludes the cost of day to day operations. In the consolidation of the Hospital and Foundation accounts the funds within the Foundation accounts are restricted to use in line with the above charitable objects of the Foundation. A sum of € 1 million of the Foundation's funds has been designated by the Board as being reserved as a contribution towards aspects of the cost of the development of a new hospital building. This contribution has been agreed with the HSE.

## 11 Accounting for Bad and Doubtful Debts

Known bad debts are written off in the period in which they are identified. Specific provision is made for any amount which is considered doubtful.

## **Financial Statements**

Form 1

## Form 1 Income & Expenditure Account (Non-Capital)

Consolidated Non-Capital Income and Expenditure Account for the year ended 31st December 2021.

		2021	2020
	Note	€'000	€'000
		***************************************	
Cumulative Non-Capital Deficit/(Surplus)		90	268
brought forward from the previous year		00	200
, and the second positions of			
		***************************************	
Pay			
Salaries	1	12,358	12,436
Superannuation and Gratuities	1	1.698	1,695
Superannuation and Statutios		1,090	1,095
		14,056	14 121
Non-Pay		14,030	14,131
Direct Patient Care	1	689	862
Support Services	1		
Financial and Administrative	1	1,250	1,277
i inancial and Administrative	1	1,088	921
Gross Expenditure for the year including	L	3,027	3,060
deficit/(surplus)			
	Γ	47 470	47.450
brought forward from previous year	Ļ	17,173	17,459
•		***************************************	
Income	1	3,063	2,629
Net Expenditure for the year	Į	14,110	14,830
	-		
Determination-Notified for the year (from HSE)		6,930	6,732
HSE Fair Deal/Saver Grant		7,071	8,008
		14,001	14,740
Deficit/(Surplus) for the year carried forward			,
to the following year		109	90
	1.	.00	00

With the exception of fixed asset depreciation which is dealt with through the Capitalisation Account, all recognised gains and losses for the year ended 31st December 2021 have been included in the Income and Expenditure Account. The net deficit/(surplus) in both years arises from continuing operations. The financial statements, which include the accounting policies and notes, which were drawn up in compliance with the accounting standards laid down by the Minister for Health, were approved by the Board on 6<sup>th</sup> April 2022.

On behalf of	the Board	101
Signed	1/ famelly	
	Board Member	- 4
	ar Mallix	1/11/10
Signed	1019400	Date: 1/1/0/02
	Mr Anthony Morris - Chairman	"//

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Form 2

## Consolidated Capital Income and Expenditure Account for the year ended 31st December 2021

	Note	2021 €'000	2020 €'000
Capital Income Sources HSE CHO6-Minor Capital Grant HSE Estates- Minor Capital Infrastructural Works HSE Estates- Capital grant HSE Energy Grant Other	Note	0 0 1,106 0 9	0 0 1,190 0 39
Total Capital Income		1,115	1,229
Capital Expenditure			
Buildings		27	273
Vehicle		0	28
Equipment		34	49
Work in Progress		1,078	917
Capital Expenditure- Capitalised		1,139	1,267
Capital Expenditure- Not Capitalised		0	0
Total Canital Funancial			
Total Capital Expenditure	Į	1,139	1,267
Transferred to Restricted Funds		24	38
	ı		
Opening (Surplus)/Deficit from previous year	[	0	0
Closing (Surplus)/Deficit C/F to following year	[	0	0
	5		

With the exception of fixed asset depreciation which is dealt with through the Capitalisation Account, all recognised gains and losses for the year ended 31st December 2021 have been included in the Income and Expenditure Account. The net deficit/(surplus) in both years arises from continuing operations. The financial statements, which include the accounting policies and notes, which were drawn up in compliance with the accounting standards laid down by the Minister for Health, were approved by the Board on 6<sup>th</sup> April 2022.

On behalf	of the Board	
Signed	M. Larrelly	Date: 17/8/22
	Board Merhiter	/ (
Signed	Mr Anthony Morris - Chairman	Date: 17/8/22

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## Form 3 Balance Sheet

## Consolidated Balance Sheet as at 31st December 2021

#### Form 3

		2021	2020
Fixed Assets	Note	€'000	€'000
Tangible Assets	12	7,970	7,065
		7,970	7,065
Current Assets			
Debtors	13	1,911	1,563
Stock	14	62	72
Cash in hand and bank balances		1,806	1,536
		3,779	3,171
Creditors- Amounts falling due within one year			
Creditors	15	2,141	1,490
Loans and overdraft		0	0
		2,141	1,490
Net Current Assets		1,638	1,681
Total Assets Less Current Liabilities		9,608	8,746
<b>6</b>			
Creditors- Amounts falling due after more than or			
Bank Loans	16	0	0
		9,608	8,746
Capital and Reserves	_		
Non-Capital Income & Expenditure Account	Γ		
Surplus/(Deficit)		(109)	(90)
Restricted Funds		1,747	1,771
Capitalisation Account	17	7,970	7,065
	29	9,608	8,746
	-		

The financial statements, which include the accounting policies and notes, which were drawn up in compliance with the accounting standards laid down by the Minister for Health, were approved by the Board on  $6^{\rm th}$  April 2022.

On beha	If of the Board	
Signed	H. Jarrelly	Date: 17/8/22
	Board Member	( /
Signed	A Malles	Date: 17/8/22
	Mr Anthony Morris - Chairman	

## Form 4 Cash Flow Statement

## Consolidated Cash Flow Statement for the year ended 31st December 2021

## Form 4

		2021	2020
	Note	€'000	€'000
Net Cash Inflow / (Outflow) from Operating Activities	18	294	338
	Ī		
	1		
Net Cash inflow From Servicing of Finance		0	0
Capital Expenditure			
Net deficit/(surplus) from Foundation activities		9	38
Expenditure from HSE Capital		(1,139)	(1,267)
Net Cash (Outflow) From Capital Expenditure Capitalised	Γ	(1,130)	(1,229)
Capital Expenditure - Not Capitalised		0	0
Net Cash (Outflow) From Capital Expenditure		(1,130)	(1,229)
	-		
Net Cash (Outflow) Before Financing		(836)	(891)
	_		
<u>Financing</u>			
British Legion donation		0	0
HSE Capital grant received		1,106	1,190
		1,106	1,190
	L.		
Net Cash Inflow / (Outflow) from Financing	Γ	270	299
	L.		
Net Cash Flow		270	299
	L.		
Increase/(Decrease) in Cash in hand and bank balances	20	270	299
(Increase) / decrease in Loans Less Than One Year	20	0	0
(Increase) / decrease in Bank Loans More Than One	20	0	0
Year	L		
		270	299
	4000		

## Notes

#### Note 1

Income & Expenditure (Non Capital)

## Non-Capital Income and Expenditure - Details

	Note	2021	2020	
<u>Pay</u>		€'000	€'000	
Management / Administration		997	1,031	
Medical / Dental I (NCHD's)		208	188	
Medical / Dental II (Consultants)		0	0	
Nursing		7.651	7,872	l
Paramedical		872	799	
Catering & Housekeeping / Support Services		2,630	2,546	
Maintenance / Technical		0	0	
		12,358	12,436	
Pensions & Refunds		1,412	1,371	
Gratuities / Lump Sums		286	324	
Others		0	0	
		1,698	1,695	
N = 7		14,056	14,131	

## Non-Pay

Di	re	90	ct	P	af	ie	n	t	C	ar	e

Drugs & Medicines	157	167
Medical Gases	4	7
Medical & Surgical Supplies	364	495
Other Medical Equipment	0	0
Other Medical Equipment Supplies	164	193
	689	862

	689	862
Support Services		
Catering Equipment	0	0
Catering Provisions	347	379
Heat, Power & Light	240	252
Laundry, Cleaning & Washing Equipment	0	0
Laundry, Cleaning & Washing Supplies	220	249
Furniture, Crockery & Hardware	26	18
Bedding & Clothing	25	34
Maintenance Equipment	0	0
Maintenance Materials Supplies	293	230
Farm & Garden Equipment	0	0
Farm & Garden Supplies	45	55
Travel & Subsistence	1	2
Transport of Patients	29	42
Vehicle Purchases	0	0
Vehicles Supplies	24	16
	1,250	1,277

## Non Capital Income and Expenditure - Details

Financial & Administrative	Note	2021 €'000	2020 €'000
Bank Interest			
Overdraft		0	0
Bank Charges		4	2
Other			
Insurance-Medical Defence	2	0	0
Insurance -Other Audit	2	39	37
Legal		53 70	27 32
Office Expenses (Rent & Rates, Postage & Telephone)		66	58
Office Supplies / Contracts On		90	106
Computer Supplies / Contract On		102	116
Professional Services		441	408
Adjustment to Doubtful Debts provision Misc Non-Capital Expenditure on Capital Projects	3	9	(78)
Miscellaneous Expenses	4	0 214	213
	•	1,088	921
Total Non-Pay		3,027	3,060
Total Gross Expenditure		17,083	17,191
Income			
Fair Deal Funding			
Money follows the patient		7,071	8,008
Patient Income			
In-Patients	5	1,904	2,074
Out-Patients	5	3	11
		1,907	2,085
Other Income Superannuation		100	214
Other Payroll Deductions		188 57	214 62
Income from External Agencies	6	863	205
Meals on Wheels		17	24
Canteen receipts		20	27
		3	3
Transport Income Other Income (Non Capital)	7	0	
Other Income (Non-Capital)	7	8	9
•	7	3,063	2,629
Other Income (Non-Capital)	7	J	J

Note 2

Insurance

	2021	2020
	€'000	€'000
Medical Defence		
Consultants	0	0
NCHD's	0	0
	0	0
Other		
Public Liability	2	1
Employers Liability	0	0
Property	22	21
Other	15	15
	30	37

Note 3 Miscellaneous Non-Capital Expenditure on Capital Projects

	2021	2020
	€'000	€'000
Land	0	0
Buildings	0	0
Work in Progress	0	0
Equipment	0	0
Vehicles	0	0
Other	0	0
	0	0

Note 4 Miscellaneous Expenses

	2021	2020
	€'000	€'000
Security	132	137
Publications	4	4
Memberships / Subscriptions	54	44
Interest on Late Payment	0	0
Education / Training	18	28
Shop / Restaurant Purchases	0	0
Other *	6	0
	214	213

## Note 5 Analysis of Patient Income

	2021	2020
Note	€'000	€'000
In-Patients		
Statutory In-Patient Charges	0	0
Private / Semi Private Charges	0	0
Long Stay Charges	1,904	2,074
Other In-Patient Charges	0	0
	1,904	2,074
<u>Out-Patients</u>		,
Statutory Accident & Emergency Charges	0	0
Other Out-Patient Charges	3	11
	0	11
Total Patient Income	1,907	2,085

## Note 6 Income from External Agencies

	2021	2020
	€'000	€'000
St.James's Hospital	0	25
HSE- Community Healthcare Organisation 6 Carman Centre Grant	113	113
HSE- Community Healthcare Organisation 6 Transport Grant	0	22
HSE-Additional Funding	750	0
HSE - Training Grants	0	45
	863	205

External agency income comprises of income in respect of the provision of services not funded through the HSE revenue, fair deal or capital allocation mechanism. The Board provided a number of beds for the exclusive use of St. James's Hospital. The HSE- Community Healthcare Organisation 6 (previously Eastern Region) provides funding for the operational costs of a day centre.

## Note 7 Other Income (Non Capital)

	2021	2020
	€'000	€'000
Shop / Restaurant Sales	0	0
Car Parking	0	0
Public Telephones	0	0
Pharmacy / Stores Sales- Staff & Patients	6	3
Recoverables	0	0
Insurance Claims	0	0
FAS Grants	0	0
Rent / Licences / Franchises, etc.	0	0
PP Admin. Charges	0	0
Fund-raising- Non-Capital only	0	0
Sundries	2	6
Equity Dividend Received	0	0
Interest Received	0	0
	8	9

## Note 8 Range of Total Employee Benefits

	Note	2021	2020
		€'000	€'000
Basic		8,716	8,718
Overtime		71	37
Weekend		1,166	1,179
		0	0
		0	0
		0	0
		0	0
On Call		2	10
PRSI		1,038	1,032
Allowance		294	309
Agency		1,071	1,150
		12,358	12,435
	,		·
		205.78	207.02
	Overtime Weekend On Call PRSI Allowance	Basic Overtime Weekend  On Call PRSI Allowance	Basic       8,716         Overtime       71         Weekend       1,166         0       0         0 Con Call       2         PRSI       1,038         Allowance       294         Agency       1,071         12,358

Amount paid to DPER in 2021 single scheme contributions was €226,282 (2020 €201,548).

## Note 8b Range of Total Employee Benefits

			Number of	of Employees
From		То	2021	2020
€60,000	-	€69,999	15	12
€70,000	-	€79,999	4	7
€80,000	-	€89,999	1	1
€90,000	-	€99,999	1	0
€100,000	-	€109,999	0	1
€110,000	-	€119,999	1	1

## Note 8c Key Management Personnel Compensation

Key management personnel compensation

The compensation paid to key management in 2021 was €284k (2020: €328k). Key management personnel includes Chief Executive, HR Manager, Deputy CEO/Financial Accountant, Resident and Patient Services Manager, Director of Nursing.

There were no termination benefit payments made in 2021 (2020: €0k)

Reconciliation of Expenditure to Cost of Services (Memorandum Only)

Note 9

(Memorandum Only)				
		2021	2020	
		€'000	€'000	
Net Expenditure- Current Year	Form 1	14,020	14,562	
<u>Deduct</u>		***************************************	***************************************	
Purchase of Equipment & Vehicles from Non-Capital	11	0	0	

Net Expenditure- Current Year	Form 1	14,020	14,562
<u>Deduct</u>			
Purchase of Equipment & Vehicles from Non-Capital	11	0	0
Funding of Capital Projects & Balances from Non-Capital		0	0
Loan Repayments- Principal Only		0	0
Total Deductions		0	0
Sub-Total			

Sub-Total	14,020	14,562
<u>Add</u>	L	
Depreciation Charge for the Year 12	236	226

## Note 10 Statement of Advances and Balances due From HSE (Non-Capital & Capital)

Note 10 Statement of Advances and Balances due From HSE (Non-Capital & Capital)				
	Note	2021	2020	
		€'000	€'000	
Non-Capital				
Total notified non-capital determination for the year		7,594	6,538	
Less: Remittances from HSE Non-Capital in the year		6,400	5,684	
Balance due from HSE in respect of the year		1,194	854	
Balance due from HSE re Previous year(s) as at 1st Jan.		854	706	
Less: Remittances from HSE in year re previous year(s)		(854)	(706)	
Balance due from HSE re Previous year(s) as at 31st Dec.		0	0	
Total Balance of Approved Non-Capital Determination Due		1,194	854	
From HSE	-			
P-to Pool		2021	2020	
Fair Deal		€'000	€'000	
Money follows the patient invoiced to HSE		7,071	8,008	
Less: Remittances from HSE Fair Deal in the year		6,504	7,372	
Balance due from HSE in respect of the year		567	636	
Balance due from HSE re Previous year(s) as at 1st Jan.		636	677	
Less: Remittances from HSE in year re previous year(s)		(636)	(677)	
Balance due from HSE re Previous year(s) as at 31st Dec.	L	0	0	
Total Balance of Fair Deal Due from HSE		= = T		
Total Balance of Pair Deal Due from HSE	L	567	636	
	Г	2004	0000	
Capital		2021	2020	
Total Capital Grant notified by HSE for the year	-	€'000	€'000	
Less: Remittances from HSE Capital in the year		1,106	1,190	
Balance due from HSE in respect of the year	-	(1,106)	(1190)	
balance due nom rior in respect of the year		0	0	
Balance due from HSE re Previous year(s) as at 1st Jan.		0	0	
Balance due from HSE re Previous year(s) as at 31st Dec.		0	0	
	-			
Total Balance of Capital Grants Due From HSE		0	0	
Gross Total Due from HSE Capital, Fair Deal & Non-Capital	Γ	1,761	1,490	
	L	.,	.,	

## Note 11 Purchase of Equipment and Vehicles from non-capital account (Capitalised)

	2021	2020
	€'000	€'000
Other Medical Equipment	0	0
X-Ray / Imaging Equipment	0	0
Laboratory Equipment	0	0
Catering Equipment	0	0
Laundry Equipment	0	0
Maintenance Equipment	0	0
Farm & Garden Equipment	0	0
Computer Equipment	0	o l
	0	0
Vehicles Purchases	0	0
	0	0

## Note 12 Schedule of Fixed Assets and Depreciation

	Buildings	Equipment	Vehicles	WIP	Total
	€'000	€'000	€'000	€'000	€'000
Cost of Valuation at 01/01/2021	9,068	1,158	296	917	11,439
Transfer from Work-in -Progress	0	0	0		0
Sub-Total	9,068	1,158	296	917	11,439
Additions from Capital	27	34	0	1,078	1,139
Additions from Non-Capital	0	0	0	0	0
Disposals during the year at Gross Book					
Value	0	0	(62)	0	(62)
Revaluations	0	0	0	0	0
0 (0)					
Cost / Valuation at 31/12/2021	9,095	1,192	234	1,995	12,516
				***********************************	
Accumulated Depreciation at 01/01/2021	3,041	1,085	248	0	4,374
Depreciation charge for year	182	33	19	0	234
Disposals during the year at Gross Book	100				
Value	0	0	(62)	0	(62)
Accumulated Depreciation at 31/12/2021	3,223	1,118	205	0	4,546
			***************************************	*******************************	
Net Book Amount at 31/12/2021	5,872	74	29	1,995	7,970
			***************************************		
Net Book Amount at 31/12/2020	6,027	73	48	917	7,065
			10	J 1 7	.,500

## Note 13 Debtors

		2021	2020
	Note	€'000	€'000
HSE- Revenue Grant Due	10	1,194	854
HSE- Capital Grant Due	10	0	0
HSE- Fair Deal Grant Due	10	567	636
HSE Debtors	Ì	1,761	1,490
HSE Other Grant			
noe Other Grant		0	0
Patients (Closing Ledger Balance)		214	151
Less: Provision for bad & doubtful debts		(126)	(117)
Other		(0)	1
Prepayments		(2)	•
rrepayments		72	38
Non-HSE Debtors		158	73
	L	136	73
Total	Γ	1,919	1,563
	L	.,	.,000

## Note 14 Stocks

	2021	2020
	€'000	€'000
Drugs & Medicines	26	30
Medical Gases	0	0
Medical & Surgical Supplies	7	6
Sterile Supplies	0	0
Provisions	4	4
Laundry / Cleaning	7	14
Bedding / Clothing	0	0
Furniture / Crockery	0	0
Heat / Power/ Light Supplies	0	0
Maintenance Supplies	4	4
Office Supplies	14	14
Computer Supplies	0	0
Shop	0	0
	62	72

## Note 15 Creditors

	2021	2020
	€'000	€'000
Creditors- Capital	0	0
Creditors- Non-Capital	1,155	562
Creditors -Taxation	276	285
Creditors -Wages and Salaries	546	440
Creditors -Other	164	203
	2,141	1,490

## Note 16 Bank Loans - Greater than one year

	2021	2020
	€'000	€'000
Bank Loans	0	0
Deficit Bank Loan Account	0	0
Deficit-Financing Account	0	0
	0	0

## Note 17 Capitalisation Account

	2021	2020
	€'000	€'000
Balance at beginning of year	7,065	6,024
Additions		
Capital Expenditure	1,139	1,267
Non-Capital Expenditure	0	0
Sub-Total Additions	8,204	7,291
Less:		
Disposals (Cost less Depreciation)	0	0
Revaluations	0	0
Depreciation for the year	234	226
- spressader to the year	204	220
Sub-Total deductions	224	226
Sub-1 stal deductions	234	226
Polemen of warm and		
Balance at year-end	7,970	7,065

## Note 18 Notes to the Cash Flow Statement

	2021	2020
	€'000	€'000
(Deficit)/Surplus (Non-Capital)	(109)	(90)
Add back deficit / (surplus) brought forward	90	268
Deficit / (Surplus) for current year	(19)	178
Deduct repayment of loan (Capital Element) charges		
against non-capital	0	0
Deduct Interest and Dividend Income	0	0
Add back purchase of equipment from non-capital	0	0
Add back interest charged against non-capital	0	0
(Increase)/Decrease in Stocks	10	(13)
(Increase)/Decrease in HSE Debtors (Non-Capital)	(263)	(53)
(Increase) in Non-HSE and Non-Health Board Debtors	(85)	48
Increase/(Decrease) in Non-Capital Creditors	651	178
Net Cash Inflow/(Outflow) from Operating Activities	294	338

## Note 19 Analysis of change in Net Debt

At 1st.	Cash	Non Cash	At 31st
Jan-21	Flow	Changes	Dec-21
€'000	€'000	€'000	€'000
1,536	270	0	1,806
0	0	0	0
1,536	270	0	1,806
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
0	0	0	0
1,536	270	0	1,806
	Jan-21 €'000 1,536 0 1,536 0 0 0 0	Jan-21 Flow €'000 €'000  1,536 270 0 0 1,536 270  0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Jan-21     Flow e'000     Changes e'000       €'000     €'000     €'000       1,536     270     0       0     0     0       1,536     270     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0       0     0     0

## Note 20 Reconciliation of Net Cash Inflow to Movement in Net Debt

	2021	2020
	€'000	€'000
Increase/(Decrease) in cash in the year	270	299
Cash Inflow / (Outflow) from increase / (decrease) in		
debt and lease financing	0	0
Changes in net debt resulting from cash flow	270	299
New Finance Leases taken out in the year	0	0
Changes in Net Debt	0	(1)
Net debt at beginning of year	1,536	1,238
Net debt at end of year	1,806	1,536

## Note 21 Board Members – Disclosure of Interests

The Board adopted procedures in accordance with guidelines issued by the Department of Public Expenditure and Reform in relation to the disclosure of interest by Board members and these procedures have been adhered to in the year. There were no transactions in the year in relation to Board's activities in which Board members had any beneficial interests.

#### Note 22 LPH Foundation

The LPH Foundation is an unincorporated association. It is a registered charity with Revenue and the Charity Regulatory Authority. The main object of the Foundation is the enhancement of care and support for residents, patients and clients (and their carers and families) of Leopardstown Park Hospital. The Directors of the Foundation are the Board members of the Leopardstown Park Hospital Board. The Foundation accounts are audited by an accounts and statutory audit firm. The consolidated accounts of the LPH Board incorporate the LPH Foundation accounts, as required under the Department of Health Accounting Standards for Voluntary Hospitals (1999). In 2021, the Foundation provided income of €47,286 to the Hospital in line with their objects. This income is offset against the costs as part of the financial statements consolidation process.

Note 23 Board Members - Expenses

Name	2021	2020
Mr. E. Magee		F07
	0	597
Ms. D. Duggan	0	0
Mr. D. Magan	0	0
Ms. E. Cogan	0	0
Mr. D. Duff	0	206
Ms. H O'Neill	0	93
Ms. F. Ni Fhlannchadha	0	0
Mr. Martin Cowley	0	0
Total	0	896

All of the Board members expenses related to mileage and travel expenses and did not include any payment towards hospitality.

No Board members received any fees in respect of their Board related activities.

The Leopardstown Park Hospital Board (Establishment) Order, 1979, specifically forbids the payment of fees, salaries etc to board members. (Article 18, subsection 1).

Note 24 Board Members – Attendance at Board Meetings

	Scheduled	Attended
No of Meetings 2021	7	7
Mr. Anthony Morris	7	7
Mr. John Brassil	7	6
Ms. Ciara Davin	7	7
Ms. Doirín Mulligan	7	7
Ms. Mary Farrelly	7	6
Ms. Frances Ni Fhlannchadha	7	7
Mr. Denis Duff	7	7

Note 25 CEO's Remuneration

	2021	2020
	€'000	€'000
Basic Pay	115	112
Employers PRSI	3	2
Total	118	114

The CEO is a member of the Local Government Pension Scheme, and the entitlements in that regard do not extend beyond the terms of the model public service pension scheme. The value of retirement benefits earned in the period is not included above.

## Note 26 Premises

The Board operates from a premises at Leopardstown Park which it occupies in agreement with the Leopardstown Park Hospital Trust. No rent is charged for the use of the premises.

## Note 27 Additional Superannuation Contributions

In 2021 an amount of €189k in ASC (2020: €193k) was deducted and forms part of the determination for the year. Amount paid to DPER in 2021 single scheme contributions (SPSPS) was €226,282 (2020 €201,548).

#### Note 28 Consolidation

In accordance with Sec 1.8.1 of the Accounting Standards for Voluntary Hospitals, the Leopardstown Park Hospital Foundation is consolidated with the financial statements of Leopardstown Park Hospital.

Alata	20	Doggrap
Note	29	Reserves

	Non Capital Income & Expenditure	Restricted Reserves	Capital Reserves	Total
At 1 January 2021	<b>€′000</b> (90)	<b>€′000</b> 1,771	<b>€'000</b> 7,065	<b>€′000</b> 8,746
Non Capital Income & Expenditure Deficit	(19)			(19)
Restricted Funds Deficit		(24)		(24)
Capitalised Fixed Assets movement			905	905
At 31 December 2021	(109)	1,747	7,970	9,608

#### Note 30 Impact of Covid-19 on funding

In 2021, the impact of Covid-19 virus on services and costs of providing ongoing services safely continued to be very significant. These were not provided for within the funding envelope initially allocated at the start of 2021. Costs and loss of income continues to be tracked with the HSE in 2021 and funding was made available

#### Note 31 Capital Development

The Hospital is carrying out a capital development programme funded by the Health Service Executive. The Design Phase funding has been identified and confirmed as part of the HSE capital plan and is managed via project stage approval processes and oversight by the Hospital and HSE collaboratively. Each stage is funded by the HSE within the approved project funding envelope following the approval processes for each stage. Therefore there is no risk to the Hospitals' funding position in this regard.

## Note 32 Regulatory Impact on Income

Due to Regulatory requirements relating to SI293/2016, an 11 bed reduction in Nursing Home Support Scheme (NHSS) beds took place in 2021 and a further 11 NHSS and 2 respite bed reduction is required in 2022. In addition the Regulator (Health Information & Quality Authority -HIQA) has paused admissions for respite and NHSS beds until further refurbishment works have been completed. These works are expected to be concluded in Q3 2022 and will be subject to inspection by the Regulator at that point in time. There is a significant reduction in total 2022 income projected as a result. This is the subject of discussions with the HSE.

#### Note 32 Approval of Financial Statements

The Financial Statements were approved by the Board on 6th April 2022.