



**Consolidated Annual Financial Statements**

**For**

**Leopardstown Park Hospital Board**

**For The Year Ended 31/12/2022**

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**General Information**

Board Members

Mr. Anthony Morris	Appointed 18th February 2021
Mr. Denis Duff	Reappointed 18th February 2021
Ms. Frances Ní Fhlannchadha	Reappointed 18th February 2021
Ms. Mary Farrelly	Appointed 18th February 2021
Ms. Ciara Davin	Appointed 18th February 2021
Ms. Doírín Mulligan	Appointed 18th February 2021
Mr. John Brassil	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 26<sup>th</sup> January 2023.

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 2022 and its income and expenditure for 2022

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 8 times as per the detail on page 8. The table below details the appointment period for current members:

<b>Board Structure</b>		
<b>Board Member</b>	<b>Role</b>	<b>Date Appointed</b>
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

The 2022 Board Evaluation is required to be an external review and this will take place in early 2023.

The Board has established four Board 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 3 times in 2022. The members of the Committee were as follows:

<b>Members of Audit &amp; Risk Committee 2022</b>
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 2022 and the members of the Committee are as follows:

<b>Members of Integrated Quality, Safety and Risk Committee</b>
Mr. John Brassil, Chairperson - Chairperson (Board Member) Frances Ní Fhlannachdha (Board Member) Ms. Mary Connolly (Risk Advisor) 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 – until 24.2.2022
Ms. Emma Convey, HSCP Representative – appointed May 2022

**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 4 meetings of the Committee in. The members of this Committee are as follows:

<b>Members of the Finance Committee</b>
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. There were two meetings in 2022. The members of this Committee are as follows:

<b>Members of the Veterans' Committee</b>
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 2022 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 2022* <i>*No fees are payable</i>	Expenses 2022 <i>These are noted in Note 23 of AFS</i>
<b>No of Meetings 2022</b>	<b>8</b>	<b>3</b>	<b>4</b>	<b>4</b>	<b>2</b>		
Mr. Anthony Morris	4						
Mr. John Brassil	4		3		1		
Ms. Ciara Davin	7						
Ms. Dóirín Mulligan	8	3					
Ms. Mary Farrelly	8	3		4			
Ms. Frances Ni Fhlannchadha	7		4				
Mr. Denis Duff	8			3	2		
Dr Nicolas Marcoux		3					
Mr. Dermot Magan		1					
Mr. James Rogan				4			
Major Ed Hillan					2		
Dr Anne Montgomery					1		

**Key Personnel Changes**

There were no key personnel changes in 2022

**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, NDP Delivery 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\***

	<b>2022</b>	<b>2021</b>
	<b>€'000</b>	<b>€'000</b>
Legal advice	88	71
Human Resources	21	42
Occupational Health	52	208
Other	51	31
<b>Total consultancy costs</b>	<b>212</b>	<b>352</b>

\*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.

	<b>2022</b>	<b>2021</b>
	<b>€</b>	<b>€</b>
Legal fees – legal proceedings	23,032	415
Conciliation and arbitration payments	0	0
Settlements	23,000	2,160
<b>Total</b>	<b>46,032</b>	<b>2,575</b>

**Travel and Subsistence Expenditure**

Travel and subsistence expenditure is categorised as follows.

	<b>2022</b>	<b>2021</b>
	<b>€</b>	<b>€</b>
<b>Domestic</b>		
Board	29	0
Employees	647	498
<b>International</b>		
Board	0	0
Employees	82	0
<b>Total</b>	<b>758</b>	<b>498</b>

**Hospitality Expenditure**

The hospital did not incur any hospitality expenditure in relation to staff or clients in 2022.

**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 2022, 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, NDP Delivery and Reform in August 2016, with the following exceptions:

Those areas disclosed within the Statement of Internal Controls

On behalf of the Board Mary Lavelley Date 14/9/23  
Board Member  
A Morris Date 14/9/23  
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 2022 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 2022 and its income and expenditure for 2022
- 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

22 September 2023



## Appendix to the report

### 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 2022.**

We certify that the consolidated financial statements of the Leopardstown Park Hospital Board for the year ended 31st December 2022 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 2022 and of its income and expenditure and cash flow for the year then ended.

Signed		Date	<u>14/09/23</u>
	Ann Marie O'Grady - Chief Executive Officer		
Signed		Date	<u>14/09/23</u>
	Mr Anthony Morris - Chairman		

## **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, NDP Delivery and Reform, has been in place in Leopardstown Park Hospital Board for the year ended 31 December 2022, 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 three times in 2022. 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.

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 is due for review in 2023. 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 Board & Finance Committee initially on 26<sup>th</sup> January 2022 and at multiple subsequent meetings throughout the year.
- 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 30<sup>th</sup> March 2023 the Board conducted an annual review of the effectiveness of the internal controls for 2022

## **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 2022, LPH incurred expenditure of €226k (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 cleaning, ICT, legal, and medical supplies. Progress continues to be made in relation to compliance in 2022 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.

Leopardstown Park Hospital Board

- 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 had been relying on an aged ICT infrastructure, which is on the corporate risk register as a high risk and detailed in internal audit reports. Progress was made in 2022 with the upgrading of PCs and transition to Microsoft 365, and a server upgrade is taking place in 2023. The risk will be reviewed following completion of this install.

Signed on behalf of the Hospital:

Signed  Date: 14/09/23  
Board Member

Signed  Date: 14/09/23  
Mr Anthony 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 fundraising 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, NDP Delivery 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.

**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 Income & Expenditure Account (Non-Capital)

Consolidated Non-Capital Income and Expenditure Account for the year ended 31st December 2022.

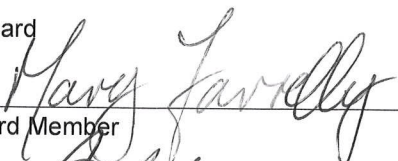
Form 1

	Note	2022 €'000	2021 €'000
Cumulative Non-Capital Deficit/(Surplus) brought forward from the previous year		109	90
<b>Pay</b>			
Salaries	1	12,272	12,358
Superannuation and Gratuities	1	1,614	1,698
		13,886	14,056
<b>Non-Pay</b>			
Direct Patient Care	1	493	689
Support Services	1	1,344	1,250
Financial and Administrative	1	1,081	1,088
		2,918	3,027
Gross Expenditure for the year including deficit/(surplus) brought forward from previous year		16,913	17,173
<b>Income</b>	1	1,880	2,313
Net Expenditure for the year		15,033	14,860
Determination-Notified for the year (from HSE)		7,052	6,930
HSE Fair Deal/Saver Grant		6,021	7,071
HSE Additional Funding		2,331	750
		15,404	14,751
Deficit/(Surplus) for the year carried forward to the following year		(371)	109

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 2022 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 30<sup>th</sup> March 2023.

On behalf of the Board

Signed

  
Board Member

Date: 14/09/23

Signed

  
Mr Anthony Morris - Chairman

Date: 14/09/23

**Form 2 Income & Expenditure Account (Capital)**

**Consolidated Capital Income and Expenditure Account for the year ended 31st December 2022**

Form 2

**Capital Income Sources**

HSE CHO6-Minor Capital Grant  
 HSE Estates- Minor Capital Infrastructural Works  
 HSE Estates- Capital grant  
 HSE Energy Grant  
 Other

Note	2022 €'000	2021 €'000
	0	0
	0	0
	1,407	1,106
	0	0
	1	9
<b>Total Capital Income</b>	<b>1,408</b>	<b>1,115</b>

**Capital Expenditure**

Buildings  
 Vehicle  
 Equipment  
 Work in Progress

	0	27
	0	0
	109	34
	1,307	1,078
<b>Capital Expenditure- Capitalised</b>	<b>1,416</b>	<b>1,139</b>
<b>Capital Expenditure- Not Capitalised</b>	<b>0</b>	<b>0</b>
<b>Total Capital Expenditure</b>	<b>1,416</b>	<b>1,139</b>

Capital Expenditure- Capitalised

Capital Expenditure- Not Capitalised

**Total Capital Expenditure**

Transferred to Restricted Funds

	8	24
--	---	----

Opening (Surplus)/Deficit from previous year

	0	0
--	---	---

Closing (Surplus)/Deficit C/F to following year

	0	0
--	---	---

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 2022 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 30<sup>th</sup> March 2023.

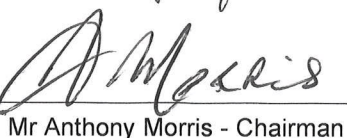
On behalf of the Board

Signed

  
 Board Member

Date: 14/09/23

Signed

  
 Mr Anthony Morris - Chairman

Date: 14/09/23

Form 3 Balance Sheet

Consolidated Balance Sheet as at 31st December 2022

Form 3

		2022	2021
	Note	€'000	€'000
<b>Fixed Assets</b>			
Tangible Assets	12	9,137	7,970
		9,137	7,970
<b>Current Assets</b>			
Debtors	13	2,657	1,911
Stock	14	45	62
Cash in hand and bank balances		1,410	1,806
		4,112	3,779
<b>Creditors- Amounts falling due within one year</b>			
Creditors	15	1,994	2,141
		1,994	2,141
Net Current Assets		2,118	1,638
Total Assets Less Current Liabilities		11,255	9,608
<b>Creditors- Amounts falling due after more than one year</b>			
Bank Loans	16	0	0
		11,255	9,608
<b>Capital and Reserves</b>			
Non-Capital Income & Expenditure Account			
Surplus/(Deficit)		371	(109)
Restricted Funds		1,747	1,747
Capitalisation Account	17	9,137	7,970
	29	11,255	9,608

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 30<sup>th</sup> March 2023.

On behalf of the Board

Signed Mary Farrelly Date: 14/09/23  
 Board Member

Signed A Morris Date: 14/09/23  
 Mr Anthony Morris - Chairman



## Form 4 Cash Flow Statement

## Consolidated Cash Flow Statement for the year ended 31st December 2022

## Form 4

	2022 €'000	2021 €'000
Net Cash Inflow / (Outflow) from Operating Activities	(388)	294
Net Cash inflow From Servicing of Finance	0	0
<b>Capital Expenditure</b>		
Net deficit/(surplus) from Foundation activities	1	9
Expenditure from HSE Capital	(1,416)	(1,139)
Net Cash (Outflow) From Capital Expenditure Capitalised	(1,415)	(1,130)
Capital Expenditure - Not Capitalised	0	0
<b>Net Cash (Outflow) From Capital Expenditure</b>	<b>(1,415)</b>	<b>(1,130)</b>
<b>Net Cash (Outflow) Before Financing</b>	<b>(1,803)</b>	<b>(836)</b>
<b>Financing</b>		
British Legion donation	0	0
HSE Capital grant received	1,407	1,106
	1,407	1,106
<b>Net Cash Inflow / (Outflow) from Financing</b>	<b>(396)</b>	<b>270</b>
<b>Net Cash Flow</b>	<b>(396)</b>	<b>270</b>
Increase/(Decrease) in Cash in hand and bank balances	(396)	270
(Increase) / decrease in Loans Less Than One Year	0	0
(Increase) / decrease in Bank Loans More Than One Year	0	0
	(396)	270

Notes

Note 1 Income & Expenditure (Non Capital)

Non-Capital Income and Expenditure – Details

**Pay**

Management / Administration  
 Medical / Dental I (NCHD's)  
 Medical / Dental II (Consultants)  
 Nursing  
 Paramedical  
 Catering & Housekeeping / Support Services  
 Maintenance / Technical

Pensions & Refunds  
 Gratuities / Lump Sums  
 Others

Note	2022 €'000	2021 €'000
	1,110	997
	184	208
	0	0
	7,286	7,651
	856	872
	2,836	2,630
	0	0
	12,272	12,358
	1,494	1,412
	120	286
	0	0
	1,614	1,698

13,886	14,056
--------	--------

**Non-Pay**

**Direct Patient Care**

Drugs & Medicines  
 Medical Gases  
 Medical & Surgical Supplies  
 Other Medical Equipment  
 Other Medical Equipment Supplies

144	157
6	4
260	364
0	0
83	164
493	689

**Support Services**

Catering Equipment  
 Catering Provisions  
 Heat, Power & Light  
 Laundry, Cleaning & Washing Equipment  
 Laundry, Cleaning & Washing Supplies  
 Furniture, Crockery & Hardware  
 Bedding & Clothing  
 Maintenance Equipment  
 Maintenance Materials Supplies  
 Farm & Garden Equipment  
 Farm & Garden Supplies  
 Travel & Subsistence  
 Transport of Patients  
 Vehicle Purchases  
 Vehicles Supplies

0	0
381	347
204	240
0	0
228	220
38	26
18	25
0	0
354	293
0	0
37	45
1	1
73	29
0	0
10	24
1,344	1,250

**Non Capital Income and Expenditure - Details**

<b>Financial &amp; Administrative</b>	Note	2022 €'000	2021 €'000
<b>Bank Interest</b>			
Overdraft		0	0
Bank Charges		4	4
<b>Other</b>			
Insurance-Medical Defence	2	0	0
Insurance -Other	2	40	39
Audit		36	53
Legal		88	70
Office Expenses (Rent & Rates, Postage & Telephone)		44	66
Office Supplies / Contracts On		96	90
Computer Supplies / Contract On		206	102
Professional Services		284	441
Adjustment to Doubtful Debts provision		9	9
Misc Non-Capital Expenditure on Capital Projects	3	0	0
Miscellaneous Expenses	4	274	214
		<b>1,081</b>	<b>1,088</b>
<b>Total Non-Pay</b>		<b>2,918</b>	<b>3,027</b>
<b>Total Gross Expenditure</b>		<b>16,804</b>	<b>17,083</b>
<b>Income</b>			
<b>Fair Deal Funding</b>			
Money follows the patient		6,021	7,071
<b>Patient Income</b>			
In-Patients	5	1,437	1,904
Out-Patients	5	22	3
		<b>1,459</b>	<b>1,907</b>
<b>Other Income</b>			
Superannuation		176	188
Other Payroll Deductions		54	57
Income from External Agencies	6	113	113
Meals on Wheels		0	17
Canteen receipts		22	20
Transport Income		5	3
Other Income (Non-Capital)	7	51	8
<b>Total Income</b>		<b>1,880</b>	<b>2,313</b>
<b>Net Expenditure (Including Fair Deal funding)</b>		<b>8,903</b>	<b>7,699</b>
<b>Net Expenditure (Excluding Fair Deal funding)</b>		<b>14,924</b>	<b>14,770</b>



**Note 2 Insurance**

**Medical Defence**

Consultants  
NCHD's

**Other**

Public Liability  
Employers Liability  
Property  
Other

	2022 €'000	2021 €'000
	0	0
	0	0
	0	0
	3	2
	0	0
	25	22
	12	15
	40	39

**Note 3 Miscellaneous Non-Capital Expenditure on Capital Projects**

Land  
Buildings  
Work in Progress  
Equipment  
Vehicles  
Other

	2022 €'000	2021 €'000
	0	0
	0	0
	0	0
	0	0
	0	0
	0	0
	0	0

**Note 4 Miscellaneous Expenses**

Security  
Publications  
Memberships / Subscriptions  
Interest on Late Payment  
Education / Training  
Shop / Restaurant Purchases  
Other

	2022 €'000	2021 €'000
	139	132
	2	4
	69	54
	0	0
	37	18
	0	0
	27	6
	274	214

**Note 5 Analysis of Patient Income**

	2022 €'000	2021 €'000
<b><u>In-Patients</u></b>		
Statutory In-Patient Charges	0	0
Private / Semi Private Charges	0	0
Long Stay Charges	1,437	1,904
Other In-Patient Charges	0	0
	<b>1,437</b>	<b>1,904</b>
<b><u>Out-Patients</u></b>		
Statutory Accident & Emergency Charges	0	0
Other Out-Patient Charges	22	3
	<b>22</b>	<b>3</b>
 Total Patient Income	 <b>1,459</b>	 <b>1,907</b>

**Note 6 Income from External Agencies**

	2022 €'000	2021 €'000
Government Funding	0	0
HSE- Community Healthcare Organisation 6 Carman Centre Grant	113	113
HSE- Community Healthcare Organisation 6 Transport Grant	0	0
HSE-Additional Funding	0	0
HSE - Training Grants	0	0
	<b>113</b>	<b>113</b>

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. HSE Additional funding income in respect of 2021 has been reclassified on the same basis as the current year under Form 1.

**Note 7 Other Income (Non Capital)**

	2022 €'000	2021 €'000
Shop / Restaurant Sales	0	0
Car Parking	0	0
Public Telephones	0	0
Pharmacy / Stores Sales- Staff & Patients	4	6
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	47	2
Equity Dividend Received	0	0
Interest Received	0	0
	<b>51</b>	<b>8</b>

**Note 8 Range of Total Employee Benefits**

		Note	2022 €'000	2021 €'000
Basic Pay	Basic		8,717	8,716
Overtime	Overtime		45	71
Premium Pay	Weekend		1,193	1,166
Shift Allowance			0	0
Holiday / Public Holiday premiums			0	0
Higher Degree			0	0
Special Nursing			0	0
On Call / Standby	On Call		0	2
PRSI Employer	PRSI		1,003	1,038
Travel Allowance	Allowance		285	294
Agency Costs	Agency		1,029	1,071
			12,272	12,358
Number of WTE equivalents (excluding agency)			193.18	205.78

Amount paid to Department of Public Expenditure, NDP Delivery and Reform, in 2022 single scheme contributions was €207,926 (2021 €226,282).

**Note 8b Range of Total Employee Benefits**

		Number of Employees	
From	To	2022	2021
€60,000	- €69,999	18	15
€70,000	- €79,999	2	4
€80,000	- €89,999	4	1
€90,000	- €99,999	1	1
€100,000	- €109,999	0	0
€110,000	- €119,999	1	1

**Note 8c Key Management Personnel Compensation**

Key management personnel compensation

The compensation paid to key management in 2022 was €325k (2021: €284k). 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 2022 (2021: €0k)

**Note 9 Reconciliation of Expenditure to Cost of Services (Memorandum Only)**

(Memorandum Only)

		2022 €'000	2021 €'000
Net Expenditure- Current Year	Form 1	12,636	14,020
<b><u>Deduct</u></b>			
Purchase of Equipment & Vehicles from Non-Capital	11	0	0
Funding of Capital Projects & Balances from Non-Capita		0	0
Loan Repayments- Principal Only		0	0
Total Deductions		0	0
<b>Sub-Total</b>		12,593	14,020
<b><u>Add</u></b>			
Depreciation Charge for the Year	12	249	236

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

		2022 €'000	2021 €'000
<b><u>Non-Capital</u></b>			
Total notified non-capital determination for the year		6,852	7,594
Less: Remittances from HSE Non-Capital in the year		5,490	6,400
Balance due from HSE in respect of the year		1,362	1,194
Balance due from HSE re Previous year(s) as at 1st Jan.		1,194	854
Less: Remittances from HSE in year re previous year(s)		(1,194)	(854)
Balance due from HSE re Previous year(s) as at 31st Dec.		0	0
<b>Total Balance of Approved Non-Capital Determination Due From HSE</b>	13	1,362	1,194
<b><u>Fair Deal</u></b>			
Money follows the patient invoiced to HSE		6,021	7,071
Less: Remittances from HSE Fair Deal in the year		5,589	6,504
Balance due from HSE in respect of the year		432	567
Balance due from HSE re Previous year(s) as at 1st Jan.		567	636
Less: Remittances from HSE in year re previous year(s)		(567)	(636)
Balance due from HSE re Previous year(s) as at 31st Dec.		0	0
<b>Total Balance of Fair Deal Due from HSE</b>		432	567
<b><u>Additional Funding</u></b>			
Total Grant notified by HSE for the year		2,331	750
Less: Remittance from HSE in the year		(1,810)	(750)
Balance due from HSE in respect of the year		521	0
<b>Total Balance of additional Funding Due from HSE</b>		521	0

		2022	2021
		€'000	€'000
<b>Capital</b>			
Total Capital Grant notified by HSE for the year		1,408	1,106
Less: Remittances from HSE Capital in the year		(1,202)	(1,106)
Balance due from HSE in respect of the year	13	206	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.		206	0
<b>Total Balance of Capital Grants Due From HSE</b>	13	206	0
<b>Gross Total Due from HSE Capital, Fair Deal &amp; Non-Capital</b>		2,521	1,761

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

	2022	2021
	€'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	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
<b>Cost of Valuation at 01/01/2022</b>	9,095	1,192	234	1,995	12,516
Transfer from Work-in -Progress	0	0	0	0	0
<b>Sub-Total</b>	9,095	1,192	234	1,995	12,516
Additions from Capital	0	109	0	1,307	1,416
Additions from Non-Capital	0	0	0	0	0
Disposals during the year at Gross Book Value	0	(106)	(32)	0	(138)
Revaluations	0	0	0	0	0
<b>Cost / Valuation at 31/12/2022</b>	9,095	1,195	202	3,302	13,794
<b>Accumulated Depreciation at 01/01/2022</b>	3,223	1,118	205	0	4,546
Depreciation charge for year	182	48	19	0	249
Disposals during the year at Gross Book Value	0	(106)	(32)	0	(138)
<b>Accumulated Depreciation at 31/12/2022</b>	3,405	1,060	192	0	4,657
<b>Net Book Amount at 31/12/2022</b>	5,690	135	10	3,302	9,137
<b>Net Book Amount at 31/12/2021</b>	5,872	74	29	1,995	7,970



**Note 13 Debtors**

	Note	2022 €'000	2021 €'000
HSE- Revenue Grant Due	10	1,362	1,194
HSE- Capital Grant Due	10	206	0
HSE- Fair Deal Grant Due	10	432	567
HSE- Additional Funding	10	521	0
HSE Debtors		2,521	1,761
Patients (Closing Ledger Balance)		182	214
Less: Provision for bad & doubtful debts		(127)	(126)
Other		(8)	(2)
Prepayments		89	72
Non-HSE Debtors		657	158
Total		2,657	1,919

**Note 14 Stocks**

	2022 €'000	2021 €'000
Drugs & Medicines	29	26
Medical Gases	0	0
Medical & Surgical Supplies	7	7
Sterile Supplies	0	0
Provisions	2	4
Laundry / Cleaning	5	7
Bedding / Clothing	0	0
Furniture / Crockery	0	0
Heat / Power/ Light Supplies	0	0
Maintenance Supplies	0	4
Office Supplies	2	14
Computer Supplies	0	0
Shop	0	0
	45	62

**Note 15 Creditors**

	2022 €'000	2021 €'000
Creditors- Capital	206	0
Creditors- Non-Capital	749	1,155
Creditors -Taxation	240	276
Creditors -Wages and Salaries	755	546
Creditors -Other	44	164
	1,994	2,141

**Note 16 Bank Loans - Greater than one year**

	2022 €'000	2021 €'000
Bank Loans	0	0
Deficit Bank Loan Account	0	0
Deficit-Financing Account	0	0
	0	0

**Note 17 Capitalisation Account**

	2022 €'000	2021 €'000
Balance at beginning of year	7,970	7,065
<b>Additions</b>		
Capital Expenditure	1,416	1,139
Non-Capital Expenditure	0	0
Sub-Total Additions	9,386	8,204
<b>Less:</b>		
Disposals (Cost less Depreciation)	0	0
Revaluations	0	0
Depreciation for the year	249	234
Sub-Total deductions	249	234
<b>Balance at year-end</b>	<b>9,137</b>	<b>7,970</b>

**Note 18 Notes to the Cash Flow Statement**

	2022 €'000	2021 €'000
(Deficit)/Surplus (Non-Capital)	371	(109)
Add back deficit / (surplus) brought forward	109	90
Deficit / (Surplus) for current year	480	(19)
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	17	10
(Increase)/Decrease in HSE Debtors (Non-Capital)	(746)	(263)
(Increase) in Non-HSE and Non-Health Board Debtors	0	(85)
Increase/(Decrease) in Non-Capital Creditors	(139)	651
Net Cash Inflow/(Outflow) from Operating Activities	(388)	294



**Note 19 Analysis of change in Net Debt**

	At 1st. Jan-22 €'000	Cash Flow €'000	Non Cash Changes €'000	At 31st Dec-22 €'000
Cash in Hand & Bank Balances	1,806	(396)	0	1,410
Bank Overdraft	0	0	0	0
	1,806	(396)	0	1,410
Loans	0	0	0	0
Debt due within one year	0	0	0	0
Debt due after one year	0	0	0	0
	0	0	0	0
Finance Lease: within one year	0	0	0	0
Finance Lease: From two to five years	0	0	0	0
	0	0	0	0
	1,806	(396)	0	1,410

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

	2022 €'000	2021 €'000
Increase/(decrease) in cash in the year	(396)	270
Cash Inflow / (outflow) from increase / (decrease) in debt and lease financing	0	0
Changes in net debt resulting from cash flow	(396)	270
New finance leases taken out in the year	0	0
Changes in net debt	0	0
Net debt at beginning of year	1,806	1,536
Net debt at end of year	1,410	1,806

**Note 21 Board Members – Disclosure of Interests**

The Board adopted procedures in accordance with guidelines issued by the Department of Public Expenditure, NDP Delivery 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 2022, the Foundation provided income of €46,463 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	2022	2021
Mr. A. Morris	0	0
Ms. D. Mulligan	0	0
Mr. J. Brassil	0	0
Ms. C. Davin	0	0
Mr. D. Duff	29	0
Ms. M. Farrelly	0	0
Ms. F. Ni Fhlannchadha	0	0
<b>Total</b>	<b>29</b>	<b>0</b>

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

Board members received fees of €29 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
<b>No of Meetings 2022</b>	<b>8</b>	<b>8</b>
Mr. Anthony Morris	8	4
Mr. John Brassil	8	4
Ms. Ciara Davin	8	7
Ms. Dóirín Mulligan	8	8
Ms. Mary Farrelly	8	8
Ms. Frances Ni Fhlannchadha	8	7
Mr. Denis Duff	8	8

**Note 25 CEO's Remuneration**

	2022 €'000	2021 €'000
Basic Pay	118	115
Employers PRSI	3	3
<b>Total</b>	<b>121</b>	<b>118</b>

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 2022 an amount of €199k in ASC (2021: €189k) was deducted and forms part of the determination for the year. Amount paid to the Department of Public Expenditure, NDP Delivery and Reform, in 2022 single scheme contributions (SPSPS) was €207,926 (2021 €226,282).

**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.

**Note 29 Reserves**

	<b>Non Capital Income &amp; Expenditure</b>	<b>Restricted Reserves</b>	<b>Capital Reserves</b>	<b>Total</b>
	<b>€'000</b>	<b>€'000</b>	<b>€'000</b>	<b>€'000</b>
<b>At 1 January 2022</b>	(109)	1,747	7,970	9,608
Non Capital Income & Expenditure Deficit	480			480
Restricted Funds Deficit		0		0
Capitalised Fixed Assets movement			1,167	1,167
<b>At 31 December 2022</b>	<b>371</b>	<b>1,747</b>	<b>9,137</b>	<b>11,255</b>

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

In 2022, the impact of Covid-19 virus on services and costs of providing ongoing services safely continued to be significant. These were not provided for within the funding envelope initially allocated at the start of 2022. Costs and loss of income continued to be tracked with the HSE in 2022 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 12 NHSS and 2 respite bed reduction was required in 2022 as part of submitted compliance plan to the Regulator. In addition the Regulator (Health Information & Quality Authority -HIQA) paused admissions for respite and NHSS beds until further refurbishment works have been completed. These works were in progress in 2022 and expected to be concluded by Q3 2023 and will be subject to inspection by the Regulator at two points in time when Phase 1 is concluded (Q2) and Phase 2 (Q3). There is a significant reduction in total 2022 income projected as a result. This was the subject of discussions with the HSE and financial support was forthcoming.

**Note 33 Approval of Financial Statements**

The Financial Statements were approved by the Board on 30<sup>th</sup> March 2023.