

Consolidated Annual Financial Statemente

For

Leopardstown Park Hospital Board

For The Year Ended 31/12/2019

Table of	Contents	Page
Title Page		1
Table of	Contents	2
	nformation	3
Governa	nce Statement and Board Members' Report	4,5,6,7,
Auditors	Report	9.10
Certificati	on of Chief Executive Officer and Chairperson	11
Statemen	t on Internal Control	12,13,14
Stalemen	t of Accounting Policies	15 &16
Financial	Statemente	
Forms:		
Form 1	Income & Expenditure Account (Non-Capital)	17
Form 2	Income & Expanditure Account (Capital)	18
Form 3	Balance Sheet	10
Form 4	Cash Flow Statement	20
Notes:		
Note 1	Income & Expanditure (Non-Capital)	21 & 22
Note 2	Insurance	23
Note 3	Miscellaneous Non-Capital Expenditure on	23
	Capital Projects	
Note 4	Miscollaneous Expenses	23
Note 5	Analysis of Patient Income	24
Note B	Income from External Agencies	24
Nate 7	Other Income (Non-Capitel)	24
Note 8	Summary Pay Analysis (Mamorandum Only)	25
Note 9	Reconciliation of Expenditure to cost of services (Memorendum Only)	25
Note 10	Statement of advances and balances due from	26
	HSE (Non-Capital & Capital)	20
Note 11	Purchase of Equipment and Vahides from	28
	non-capital account (Capitalised)	40
Note 12	Schedule of Fixed Assets and Depreciation	27
Note 13	Debtors	28
Note 14	Stocka	28
Note 15	Creditors	28
Note 18	Bank Icans - Greater than one year	29
Note 17	Capitalisation Account	29
Note 18	Notes to the Cash Flow Statement	29
Note 19	Analysis of change in Net Debt	30
Note 20	Reconciliation of net cash inflow to	30
	movement in Net Oabt	
Vote 21	Board Members-Disclosure of Interests	30
Vole 22	LPH Foundation	30
Vote 23	Board members- Expenses	31
Note 24	Board Members - Attendence at board meetings	31
Vote 25	CEO's Remuneration	31
iote 26	Premises	31
lote 27	Pension Levy	31
lote 26	Consolidation	32
lote 29	Reserves	32
lote 30	Post Balance Sheet Event covid 19	32
lote 31	Approval of Financial Statements	32

General information

Board Members

Mr. Anthony Morris
Mr. Cents Dut
Mr. Frances NI Fhiennohedha
Ma. Mary Farrety
Mr. Clars Davin
Mr. Dolff Medigen
Mr. John Bressi
Mr. Eugeno F. Mages - Charperson
Mr. Detmot Megen
Mr. Detmot Megen
Mr. Detmot Megen
Mr. Helen O'yelf

Appointed 16th February 2021
Responded 16th February 2021
Responded 16th February 2021
Appointed 16th February 2021
Term of office completed 4th September 2020

Chief Executive Me. Ann Marie O'Grady

Hatel Office:

Fownek, Duban 18

Main Bankers:

Uleter Bank Ireland Lid 27/35 Main Street, Blackrook, Co Dublin

Auditors:

The Comptroller & Auditor General Sa Meyor Street Upper, Oublin 1

Solicitors:

Hayes Solicitors, Lavery House, Earlsfort Terrace, Cublin 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 Board by reference to the annual plan and budget was carried out on 23rd January 2020.

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 2019 and its income and expenditure for 2019.

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 6. The table below details the appointment period for current members:

Board Structure				
Board Member	Role	Date Appointed		
Eugene F. Magee	Chairperson	19 th November 2015		
Dermot Magan	Ordinary Member	15th September 2015		
Helen O'Neill	Ordinary Member	15th September 2015		
Frances NI Fhlannachdha	Ordinary Member	15th September 2015		
Denis Duff	Ordinary Member	15th September 2015		
Diane Duggan	Ordinary Member	15th September 2015		
Elizabeth Cogan	Ordinary Member	15th September 2015		

A Board self evaluation was carried out at the end of 2019 and reported at Board meeting of the 27 February 2020.

The Board has established four Committees, as follows:

1. Audit Committee: Comprises two Board members and four independent members, one of which is the independent Chairperson. The role of the Audit 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 Committee provides the internal audit reports to the Board after having been reviewed by the Audit Committee and reports to the Board formally in writing annually.

The Audit Committee met 4 times in 2019 and the members of the Committee are as follows:

Members of Audit Committee 2019	
Mr. Martin Cowley - Chalman	
Mr. Dermot Magan	
Ms. Helen O'Neill	
Mr. Ray Henry - temporary leave in 2019	
Mr. Mulris O'Ceidigh resigned 5 June 2019	
Ms. Kate Brennan	

2. Integrated Quality, Safety and Risk Committee: This comprises one Board member, two independent members, one of whom is the independent Chairperson, the other the Hospital's risk advisor and eight 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 2019 and the members of the Committee are as follows:

Members of Integrated Quality, Bafety and Risk Commi	itao
INS Civille Adams (Independent Castonstants	1100
IMS MBIV Connolly (Risk Advisor)	
Ma Elizabeth Cogan - Board member**	
Ms Ann Marie O'Grady	
Dr Joseph Yazback	
Mr Adrian Ahein	
Ms. Florence Hogan	
Ms Paula Carraher	
Ms. Nicola Keogh	
Mr. Flachre McCabe	
** Non-executive members	

 Finance Committee This comprises three Board members and an independent member who is the independent Chairperson. 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 maelings of the Committee in 2019 The members of this committee are as follows:

mornoora di vito	Finance Committee
r Anthony Morris - Chairman	
Ms Frances NI Fhlennchadha	
fir Dermot Magan	
Ar. Denis Duff	
at tooling Diffi	

4. Veterans' Committee: The inaugural meeting of this Committee took place on 15 August 2019 it comprises two Board members one of which is the Chairperson and two nominees from the Leopardslown Park Hospital Trust. There was 1 meeting of this committee in 2019. The members of this committee are as follows:

	Members of the Veterans' Committee
Prof Helen O'Neill - Chairperson	
Mr Denis Dulf	
Major Ed Hillan	
Or 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 2019 is set out below including the fees and expenses received by each non- executive member:	Board	Audit Committee	Integrated Quality, Safety & Risk Committee	Finance Committee	Veterans' Committee	Fzes 2019* "No fees are payable	Expenses 2019 These are noted in Note 22 of AFS
No of Meetings 2019	8	-		-			
Mr. Eugene F.Magea	8	-		- 0			
Mr Dermot Magen	8	7					510
Ms. Diana Duggan	6		$\overline{}$	3			
Ms. Elizabeth Cogan	6						
Prof. Helan O'Neill	5	- 4	- 4				
Ms. Frances NI Fhlannchadha	6				1		
Mr. Denis Duff	8						
Mr. Martin Cowley				3	1		572
Mr. Ray Henry	-	0					
Ms. Kate Brennan		2					
Mr Muirts O'Ceidigh		- 2					
Mr. Anthony Morris		- 3					
Me. Elaine Keane			-				
Major Ed Hillan			3				
Dr Anne Managemery	_				1		

Key Personnel Changes

There were no changes in key personnel in the year 2019

Disclosures Required by Code of Practice for the Governance of State Bodies (2016)
The Board is responsible for ensuring that Leopardstown Park Hospital has compiled 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*

	2019	2018
	€'000	€'000
Legal advice	53	
Human Resources	48	
Other	39	
Total consultancy costs	140	

*Consultancy costs include the cost of external advice to management and excludes outsourced 'business-as-usual'

Legal Costs and Settlements

The hospital did not incur any additional legal costs other than those incurred in relation to general legal advice as disclosed under consultancy costs above

Travel and Subsistence Expenditure

Travel and subsistence expenditure is categorised as follows.

	2019 €	2018
Dom	estic	
Board	1,082	1.780
Employees	1,432	1,780 3,144
Interna	tional	
Board	0	0
Employees	0	0
Total	2,514	4,924

Hospitality Expenditure

The hospital did not incur any hospitality expenditure in relation to staff or clients in 2019.

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 2019, Leopardstown Park Hospital has compiled 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:

The Hospital Strategy was finalised in late 2019 and is for submission to the Minister for comment in early 2020 prior to publication

On behalf of the Board

Date <u>19/3/2/</u>



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 2019 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 2019 and its income and expenditure for 2019
- 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.

Andrew Harkness

For and on behalf of the

Comptroller and Auditor General

12 April 2021

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 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.

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.

I also 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.

Certification of Chief Executive Officer and Chairperson

for the Year Ended 31st December 2019

We cartify that the consolidated financial statements of the Leopardstown Park Hospitel Board for the year ended 31st December 2019 as set out herein are in agreement with the accounting records and have been drawn up in accordance with the accounting standards as taid down by the Minister for Health.

These financial statements, which comprise pages 17 to 32 and the statement of accounting policies, pages 15 to 16, properly presents the state of affairs of the hospital at 31st December 2019 and of its income and expenditure and cash flow for the year then ended.

Signed

Date 19/3 21

Signed

Statement on Internal Control

Scape 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 2019 and up to the date of approval of the financial statements except for the internal control issues outlined below.

Capacity to Handle Rlak

Leopardstown Park Hospital Board has an Audit Committee with financial and audit expertise comprising two Board members and four external members, one of whom is the Chairman. The Committee met four times in 2019. 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 Committee focuses on more corporate related risks. The AuditCommittee 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. 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 miligate 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,
- there are systems simulate ensuring the security of the information and communication technology systems,
- there are systems in place to safeguard the assets

Origoing 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

- · 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 sanior management of periodic and annual performance and financial reports which indicate performance against budgets/forecasts.

Procurament

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

Review of Effectiveness

We 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 Committee which oversees their work, and the senior management within Leopardstown Park Hospital Board responsible for the development and maintenance of the internal financial

We confirm that in April 2020 the Board conducted an annual review of the effectiveness of the internal controls for 2019.

internal Control Issues

Internal Control Issues

The Board is fully committed to implementing public propurament guidelines. I,PH 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 propurament processes. I,PH'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) Procurament 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 2019, LPH incurred expenditure of £280k (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 oxpenditure of expok (exct. VAT) in relation to goods and services where the procedures did not fully comply with produrement rules and guidelines. These were in the areas of maintenance, agency staffing and supplies. Significant process had been made in relation into compliance in 2019 as new contracts both came into affect and were put in place through HSE frameworks, tendering in conjunction with HSE, OGP and other group procurement processes along with LPH specific tender competitions. In 2019 fire safety works to the value of €1,008k were tendered and procured under the permitted derogation for urgent works

Signed

Mr. Anthony Morris- Chairman

Date 1931

Statement of Accounting Policies

Basis of Accounting

The financial statements have been prepared on an accruals basis under the historical cost convention, in accordance with the accounting standards taid down by the Minister for Health. In accordance with Sec 1 8.1 of the Accounting Standards for Voluntary Hospitals, Loopardstown 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 patient.

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 chect 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 lixed assets in the belance 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.

Lend 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 assats are hold under ficence 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

Depraciation is charged directly to the capitalisation account and is provided on tangible fixed assets recognised in the behance 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 spart 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 improvement and development of the Hospital and its services and specifically excludes the cost of day to day operations. The sum of € 1 million of the Foundations funds has been designated by the Board as being restricted as a contribution towards 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.

Consolidated Non-Capital Income and Expenditure Account for the year ended 31st December 2019.

	Note	2019 €'000	2018 €'000
Cumulative Non-Capital Deficit/(Surplus) brought forward from the previous year		96	130
<u>Pay</u> Salaries Superannuation and Gratuities	1	12,365 1,618	12,521 1,811
Non-Pay		13,981	14,132
Diraci Patient Care	11	835	567
Support Services	1	1,460	1,011
Financial and Administrative	1	990	980
Gross Expenditure for the year including deficit/(surplus)	E	3.094	2,548
brought forward from provious year		17,171	16,810
Income	ď	3,200	3,311
Net Expenditure for the year	E	13.971	13,499
Determination-Notified for the year (from HSE)		5,983	5,828
HSE Fair Deal/Saver Grant	1	7,720	7,777
		13,703	13,403
Deficit/(Surplus) for the year carried forward to the following year		268	89

With the exception of fixed asset depreciation which is dealt with through the Capitalisation Account, all recognized gains and losses for the year ended 31st December 2019 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 taid down by the Minister for Health & Children, were approved by the Board on 18th March 2021.

On behalf of the Board

Signed

n-Marin Grady-CEO

Date:

Date

Consolidated Capital Income and Expenditure Account for the year ended 31st December 2019 Form 2

Ann allege Aler Nachitthat 5019			
form 2	Г	2019	2018
Capital Income Sources	Note	€,000	€000
HSE CHO8-Minor Capital Grant		اه	o
HSE Estates-Minor Capital Infrastructural Works	1	اة	230
HSE Estates- Capital grant	- 1	100B	200
HSE Energy Grant		0	49
Other		13	100
Total Capital Income	L		
		1021	379
Capital Expanditure			
Buildings	_	8841	
Vehicle		889	0
Equipment	1	33	66 27
Capital Expenditure- Capitalised			
	- 1	917	93
Capital Expanditure- Not Capitalised		125	252
Total Capital Expanditure		3000	
		1042	345
Transferred to Restricted Funds	_	21[(34)
Opportune (Durantum Later of the	_	6.71	(0.0)
Opening (Surplus)/Deficit from previous year		0	0
Closing (Surplus)/Deficit C/F to following year		01	
	1	u	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 2019 have been included in the Income and Expenditure Account. The net dehcili(surplue) 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 fall down by the Minister for Heelth & Children, were approved by the Board on 18th March 2021.

On behalf of the Board

Signed

Ms Anni May Grady- GEO

_

<u> 17</u>/

Signed

Mr. Anthony Morris - Chalman

Dale

Dale:

Consolidated Balance Sheet as at 31st December 2019 Form 3

		20401	20/21
Fixed Assets	22750	2019	2018
Tangible Assets	Note	€'000	€,000
guiling Wasers	12	6,024	5,332
		6,024	5,332
Command Name	7.00		
Current Assets Debtors	2077		
	13	1,558	1,505
Stock	14	69	60
Cash in hand and bank balances		1,511	1,585
		3,128	3,140
Conditions Assessed Assessed			
Creditors- Amounts falling due within one year Creditors			
2000-mana -	15	1,312	1,178
Loans and overdraft	-	274	227
		1,586	1,405
Net Current Assets	_		
Her Oditetti Varris		1,542	1,735
Total Assets Less Current Liabilities		7 500	7 007
	L	7,566	7,087
Creditors- Amounts falling due after more than			
one year			
Bank Loans	16	01	0
		7,566	7,087
	L	7,000	7,007
Capital and Reserves			
Non-Capital Income & Expenditure Account	r		
Surplus/(Deficit)		(000)	4000
Restricted Funds	100	(268)	(96)
Capitalisation Account		1,810	1,831
Organization Appoint	17	6,024	5,332
	29	7,566	7,087

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 18th March 2021

On behalf of the Boar

Signed

Ma. Ann Marie D'Grady- CEO

Date:

19/3/21 19/3/21

Signed

Mr Anthony Morris - Chairman

Date:

Consolidated Cash Flow Statement for the year ended 31st December 2019 Form 4

Note €'000	400
<u> </u>	
13	34
(017)	103
	(69)
	(262)
Lincol	(311)
(1120)	(374)
	68
	270
1000	345
r	
01	0
(121)	(59)
	(50)
	91
(121)	(20)
	(100) (100) (100) (100) (1120) (1121) (1121) (1122) (1122) (1122) (1122) (1122) (1122)

The financial statements, which include the ecounting 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 18th March 2021

Non-Capital Income and Expenditure -Details Note 1

Pay	Note	2018 €000	2018 €000
Management / Administration Medical / Dantal I (NCHD's)	r	1,021	1,030
Medical / Dental II (Consultants) Nursing	- 1	7,945	7,961
Paramedical Catering & Housekeeping / Support Services		789	815 2,513
Maintenance / Technical	-	12,383	0
Pensions & Refunds Gratuities / Lump Sums	r	1,257	12,521 1,188 423
Others	-	1,618	1,611
		13,981	14,132
Non-Equ		10,001	14,132

Non-Pay

Diract Patient Cura
Drugs & Medicines
Medical Gases
Medical & Surgical Supplies
Other Medical Equipment
Other Medical Equipment Supplies

Support Services
Catering Equipment
Cataring 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 & Subaistence
Transport of Patients
Vehicle Purchases
Vehicles Supplies

159	174
4	5
287	304
0	0
107	152
557	635

Г	0	0
н	417	418
1	227	215
1	o	0
1	238	201
1	28	27
1	238 28 21 0	201 27 17
1	0	0
1	451	17
1	0	o
1	20	38
1	2	6
1	52	52
1	o	o
!	15	20
Г	1.469	1,011

Bank Interest Overdraft Bank Charges Other	Financial & Administrative	Note	2019 €'000	2018 €'000
Other Insurance-Medical Defence Insurance-Other Audit Legal Office Expenses (Rent & Rates, Postage & Telephone) Office Supplies / Contract On Professional Services Adjustment to Doubtful Debts provision Miscellanaous Expenses Miscellanaous Expenses Total Non-Pay Total Gross Expanditure Income Fair Deal Funding Money follows the patient Patient Income In-Patients Debta Professional Superannuation Superannuation Debta Professional Superannuation Superannuation Superannuation Debta Professional Superannuation Superannuat				
Other Insurance Audit				
Insurance-Medical Defence 2 38 38 38 38 38 38 38	Bank Charges			0 3
Insurance - Other			1 1	
Audit Legal		2	ام ا	0
Legal Legal 28 2 2 2 3 3 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		2		35
Office Expenses (Rent & Rates, Poetage & Telephona) Office Supplies / Contracts On Office Supplies / Contract On Professional Services Adjustment to Doubtful Debts provision Miscellanaous Expenses Adjustment to Doubtful Debts provision Miscellanaous Expenditure on Capital Projects Adjustment to Doubtful Debts provision Miscellanaous Expenditure and Capital Projects Adjustment to Doubtful Debts provision Miscellanaous Expenditure Adjustment to Doubtful Debts provision Adjustment to Doubtful Tooley Ad				22
Office Supplies / Contracts On 94 10 Computer Supplies / Contract On 94 10 Professional Services 273 233 Adjustment to Doubtful Debts provision 20 56 Misc Non-Capital Expenditure on Capital Projects 3 0 0 Miscellanaous Expenses 4 311 266 BS0 980 Total Non-Pay 3.094 2.545 Total Gross Expenditure 7.770 17.777 Total Gross Expenditure 5 2.287 2.179 Patient income Pair Deal Funding Money follows the patient 5 2.335 2.231 Superannuation Pher Payroll Deductions 5 2.335 2.231 Superannuation 244 685 Seales neceipte 3 3 3 3 1 246 Seales on Wheels 29 25 Seales neceipte 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3 3	Legal			71
Computer Supplies / Contract On Computer Supplies / Contract On Professional Services Adjustment to Doubtful Debts provision Misc Non-Capital Expenditure on Capital Projects Miscellaneous Expenditure on Capital Projects Miscellaneous Expenditure Miscellaneous Expenditure Miscellaneous Expenditure Total Non-Pay Total Non-Pay Total Gross Expenditure Total Gross Expenditure 17,076 16,680 Income Patient Income Patient Income Patients Dut-Patients 5 2,287 2,179 A8 52 Dither Income Superannuation Dither Payroll Deductions Total Gross Expenditure 1230 244 585 Dither Income Superannuation Dither Payroll Deductions Total Gross Expenditure 1230 244 585 Total Gross Expenditure 17,770 17,777 184 185 185 185 185 185 185 185 185 185 185	Office Expenses (Rent & Rates, Postage & Telephone)			102
Professional Services Adjustment to Doubtful Debts provision Misc Non-Capital Expenditure on Capital Projects Adjustment to Doubtful Debts provision Miscellaneous Expenses Total Non-Pay Total Non-Pay Total Gross Expanditure Income Fair Deal Funding Money follows the patient Patient Income n-Patients Dut-Patients 5 2,335 2,231 Ditter Income Superannuation Ditter Payroll Deductions Tocome from External Agencies Feals on Wheels Income Stanten receipts Feals on Wheels Feals on Wheels Feals on Wheels Feals Income Stanten receipts Feals on Wheels Feal	Computer Contracts On			103
Adjustment to Doubtful Debis provision Misc Non-Capital Expenditure on Capital Projects Miscellaneous Expenses Total Non-Pay Total Non-Pay Total Gross Expanditure Tota	Professional Services		102	106
Miscellaneous Expenditure on Capital Projects Miscellaneous Expenses Total Non-Pay Total Gross Expanditure Total Gross Expanditure Income Fair Deal Funding Money follows the patient 7,720 7,777 Patient Income n-Patients Dut-Patients 5 2,287 2,179 A8 52 Ditter Income Superannuation Ditter Payroll Deductions reasport Fayroll Deductions reasport Income ther income (Non-Capital) 7 14 otal Income \$ 3,200 3,311 at Expenditure (Including Fair Deal funding) at Expenditure (Expluding Fair Deal funding)	Addressed to Develor Date and the		273	239
Total Non-Pay 3.094 2.548	Misc Non-Ceoled Evenediture on Control Control		20	50
Total Non-Pay 3,094 2,546 Total Gross Expanditure 17,076 16,666 Income Fair Deal Funding Money follows the patient 7,720 7,777 Patient Income In-Patiente 5 2,287 2,179 Add 52 Other Patiente 5 48 52 Other Income 2,335 2,231 Superannuation 2,335 2,231 Superannuation 2,330 2,44 Fair Deal Funding 6,550 2,550 Other Payroll Deductions 68 72 Fair Deal Funding 7,777 Total Money follows 1,550 2,550 The Patient Income 68 72 Fair Deal Funding 7,777 Total Income 7,777 Total Gross Expanditure 1,544 Total Income 7,776 16,686 Total Funding 1,544 Total Income 7,777 Total Gross Expanditure 1,544 Total Income 7,777 Total Gross Expanditure 1,544 Total Income 1,544 Total I	Miscellaneous Expenditure on Capital Projects		0	0
Total Non-Pay 3,094 2,548 Total Gross Expanditure 17,076 16,686 Income Fair Deal Funding Money follows the patient 7,720 7,777 Patient Income n-Patients 5 2,287 2,179 Other Income 2,335 2,231 Other Income 2,335 2,231 Other Payroll Deductions 68 72 Total Gross Expanditure (Section 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	sesiminous Exhaitsas	4		250
3,094 2,541			880	980
## Part Deal Funding Money follows the patient	Total Non-Pay		3.094	2,548
Fair Deal Funding Money follows the patient 7,720 7,777 Patient Income n-Patients 5 2,287 2,179 Out-Patients 5 48 52 Other Income uperannuation ther Payroil Deductions todame from External Agencies 6 494 685 sensen receipts 29 25 sensen receipts 33 31 stearn Income ther Income (Non-Capital) 7 7 14 Otal Income State I	Total Gross Expanditure		17,076	16,680
Patient Income Patient				
Patient Income Patient	Income			
Patient Income In-Patients Dut-Patients Dut-Patients Dut-Patients Differ Income Superannuation Differ Payroll Deductions Toome from External Agencies Feals on Wheels Sanisen receipts Sanisen re	=7.17=			
n-Patients 5 2.287 2.179 Dut-Patients 5 48 52 Dither Income 2.335 2.231 Dither Payroll Deductions 68 72 Island Texternal Agencies 68 72 Island Texternal Agencies 68 72 Island Texternal Agencies 72 29 25 Island Texternal Agencies 74 29 25 Island Texternal Agencies 75 33 31 Island Texternal Agencies 77 14 Island Texternal Agencies 8 33 31 Island Texternal Agencies 9 33 31 Island Texternal Agencies 9 33 31 Island Texternal Agencies 9 33 331 Island Texternal Agencies 9 330 3311 Island Texternal Agencies 9 330 3311 Island Texternal Agencies 9 330 3311	Fair Deal Funding			
Dut-Patiente 5 2,87 2,179 6 6 6 6 6 6 6 6 6	Fair Deal Funding		7.720	7,777
Distribution	Fair Deal Funding Money follows the patient Patient Income		7.720	7,777
2,335 2,231	Fair Deal Funding Money follows the patient Patient Income In-Patients	6		
Superannuation 230 244	Fair Deal Funding Money follows the patient Patient Income n-Patients		2,287	2,179
Other Payroll Deductions	Fair Deal Funding Money follows the patient Patient Income n-Patiente Out-Patiente		2,287 48	2,179 52
Context Payor Deductions 68 72	Fair Deal Funding Money follows the patient Patient Income In-Patients Out-Patients Other Income		2,287 48	2,179 52
Reals on Wheels 29 25 25 25 25 25 25 25	Fair Deal Funding Money follows the patient Patient Income n-Patients Out-Patients Other Income Superannuation		2,287 48 2,335	2,179 52 2,231
tentien receipts 29 25 reasport income 33 31 ther income (Non-Capital) 7 7 14 otal income 3200 3,311 et Expenditure (including Fair Deal funding) 6,155 5,592	Fair Deal Funding Money follows the patient Patient Income In-Patiente Dut-Patiente Other Income Superannuation Other Payoni Deductions		2,287 48 2,335	2,179 52 2,231 244
remaport income framport income ther income (Non-Capital) otal income et Expenditure (Including Fair Deal funding) at Expenditure (Excluding Fair Deal funding)	Fair Deal Funding Money follows the patient Patient Income in-Patiente Out-Patiente Other Income Superannuation Other Psyroli Deductions noome from External Agencies	5	2,287 48 2,335 230 68	2,179 52 2,231 244 72
otal Income (Non-Capital) otal Income 3.200 3.311 et Expenditure (Including Fair Deal funding) 6.155 5.592	Fair Deal Funding Money follows the patient Patient Income In-Patients Out-Patients Other Income Superannuation Other Payroll Deductions Income from External Agencies Itelas on Wheels	5	2,287 48 2,335 230 68 484	2,179 52 2,231 244 72 685
otal Income 3.200 3.311 et Expenditure (Including Fair Deal funding) 6.155 5.562	Fair Deal Funding Money follows the patient Patient Income In-Patients Out-Patients Other Income Superannuation Other Payroll Deductions noome from External Agencies Jeals on Wheels Jenleen receipts	5	2,287 48 2,335 230 68 484 29	2,179 52 2,231 244 72 685 25
et Expenditure (Including Fair Deal funding) 8.155	Fair Deal Funding Money follows the patient Patient Income In-Patiente Out-Patiente Other Income Superannuation Other Payroll Deductions noome from External Agencies Seales on Wheels Seales on receipts Fansoort Income	6	2,287 48 2,335 230 68 484 29 33	2,179 52 2,231 244 72 685 25 31
at Expenditure /Excluding Soir Deal front	Fair Deal Funding Money follows the patient Patient Income n-Patients Dut-Patients Dither Income superannuation Other Payroli Deductions noome from External Agencies Teals on Wheels anteen receipts reneport Income tither Income (Non-Capital)	6	2.287 48 2.335 230 68 484 29 33 6	2,179 52 2,231 244 72 585 25 31 9
at Expenditure /Excluding Fair Deal front	Fair Deal Funding Money follows the patient Patient Income n-Patients Dut-Patients Dither Income superannuation Other Payroli Deductions noome from External Agencies Teals on Wheels anteen receipts reneport Income tither Income (Non-Capital)	6	2,287 48 2,335 230 68 484 29 33 8 7	2,179 52 2,231 244 72 685 25 31 9
	Fair Deal Funding Money follows the patient Patient Income n-Patiente Dut-Patiente Dut-Patiente Dither Income Superannuation Other Payroli Deductions noome from External Agencias teals on Wheels canteen receipts cansport Income other Income other Income (Non-Capital)	6	2.287 48 2.335 230 68 484 29 33 6 7	2,179 52 2,231 244 72 685 25 31 9 14

Ingurance Note 2

Specificat Defense	2019 €000	2018 €'000
Medical Defence Consultants NCHD's	0	0
Other Public Liability	- 0	- 1
Employers Liability Property Other	0 21 14	0 21 13
	38	35

Miscellaneous Non-Capital Expenditure on Capital Projects Note 3

Lend	
Buildings	
Work in Progres	H
Equipment	
Vahioles	
Other	

	2019 €'000	2018 €'000
Т	0	D
	0	0 0 0
	0	0
	٥	0
	0 0	0
	ا٥	0
П	0	D

Miscellaneoue Expenses Note 4

Security	
Publication	6
Membershi	ps / Subscriptions
	Late Payment
Education /	
	aurant Purchases
Other *	

2019	2018
€,000	€000
175	180
7	8
50	50
0	0
87	13
0	0
12	1
311	280

Analysis of Patient Income Note 5

	Nata	2019 €000	2018 €000
In-Patients Statutory in-Patient Charges Private / Semi Private Charges Long Stay Charges Other In-Patient Charges		0 0 2,267 0	0 0 2,178 0
Out-Patients		2.287	2,179
Statutory Accident & Emergency Charges Other Out-Patient Charges		0 48	0 52
		48	52
Total Patient Income		2,335	2,231

Income From External Agencies Note 6

St.James's Hospital
HSE-Eastern Region- Carman Centre Grant
HSE-Eastern Region- Transport Grant
HSE-Additional Funding
HSE-Refund of Agency Costs
HSE-Grant towards Energy Efficiency Works (nett of refund)
Energy grant
Dept of Arts

2019	2018
€000	€,000
45	81
113	113
22	22
314	488
0	0
0	0
0	0
0	0
494	685

External agency income comprises of income in respect of the provision of services not funded through the HSE revenue, fair deat or capital allocation mechanism. The Board provides a number of bads for the exclusive use of St.James's Hospital. The HSE- Eastern Region provides funding for the operational costs of a day centre.

Other Income (Non-Capitel) Note 7

Shop / Restaurant Selea
Car Parking
Public Telephones
Pharmacy / Stores Seles- Staff & Patients
Recoverables
Insurance Claims
FAS Grents
Rant / Licences / Franchises, etc.
PP Admin. Charges
Fund-raising- Non-Cupital only
Sundries
Equily Dividend Received
Interest Received

2019	
€,000	
0	1
0	0
٥	0
4	9
0	0
0	0
0	0
0	0
0	0
0	0
3	4
Ď	0
0 0 4 0 0 0 0 0 0 0	900000000000000000000000000000000000000
7	14

2019 2018

Summary Pay Analysis (Memorandum Only) Note 8

	Note	2010	2018 @000
Basic	-		8,577
Overline	1	PERSONAL PROPERTY.	00
	1		1,157
- Parallian Inc		1,103	1,107
Course I com	- 1	9	0
entil(2))[d	- 1	9	9
		9	이
0-0-0	1	9	0
	- 1	Control of the last	11
	- 1	1,010	889
Allowance	- 1	300	284
Agency	- 1	1,293	1.414
		12,383	12,522
ts (excluding agency)	_	210.78	208 51
	Overlime Weekend emiluma On Call PRSt Allowance	Basic Overline Weekend remluma On Call PRSt Allowance Agency	Basic 5,622 Cverlime 5,522 Weekend 1,163 emiluma 0 On Call 10 PRS: 1,010 Allowance 300 Agency 1,383

Amount paid to DPER in 2019 single scheme contributions was €173,235 (2018 €149,617)

Range of Total Employee Benefits Note 86

	_	Number of Employee	29
From	Το	2018 20	18
€80,000	• €89,999	8	8
€70,000	- €79,000	1 2	5
€80,000	- €89,899	اه ا	-1
€90,000	€89,899	1 3	.1
€100,000	- £109,689	2	i

For the purposes of this disclosure, short-term employee benefits in relation to services rendered during the reporting period include satary, overtime allowances and other payments madeon behalf of the employee, but exclude employers PRSI

Key management personnel compensation Note 8c

The compensation paid to key management in 2019 was €305k (2018; €315k)

Key management personnel includes Chief Executive, HR Manager, Deputy CEO/Financial Accountant, Resident and Patient Services Manager, Director of Nursing

A termination payment of less than €10k was made in 2019 (2016: €0k)

Recarcisation of Expenditure to Cost of Services (Memorandum Only) Note 9

	1	€000	€.000
Net Expenditure- Current Year Deduct	Form 1	13,878	13,389
Purchase of Equipment & Vehicles from Non-Capital Funding of Ceatal Projects & Balances from Non-Capital Loan Repayments- Principal Only Total Deductions	11	0	0 0 0
Sub-Total Add		13,875	13,389
Deprecision Charge for the Year	12	220	203
Running Cost of Service		14,095	13,572

Statement of Advances & Balances Due from HSE.			
Non-Capital & Capital			
Note 10	Note	2019	201
920 (920 1270)	,,,,,,	6,000	600
Non-Gapital	-	120001	600
Total notified non-capital determination for the year	1	C 200	
LOSS: ROMINARCES from HSF Non-Control to the user	- 1	5,739	5,29
Balance due from HSE in respect of the year		5.033	4.64
Balance due from HSE re Previous year(s) as at 1st Jan.		708	65
Lass: Remitiances from USE to the Youngs; as at 1st Jan.		853	49
Less: Remittances from HSE in year re previous year(s)		(653)	(499
Balance due from HSE re Previous year(s) as at 31st Dec.	L	0	
Total Balance of Approved Non-Capital Determination Due			
From HSE		708	653
	_	2019	201
The angle of the	1	€.000	€00
Fair Deal		-000	200
Money follows the patient invoiced to HSE	1 .	7,720	7 77
Less: Remillances from HSF Fair Dani is the year			7,77
Balance due from HSE in respect of the year	-	7.043	7,10
Balance dua from HSE to Previous year(s) se at 1st Jan	_	677	67
Less Remiltences from HSE in year re previous year(s)		870	633
Releases due from LPS or Constitute previous year(s)		(670)	(033
Balance due from HSE re Previous year(s) as at 31st Dec		0	(
Total Balance of Fair Deal Due from HSE		677	670
Capital		2019	2018
Total Capital Grant notified by HSE for the year		000	€000
Loss: Remillances from HSE Capital in the year		.008	303
Balance due from HSE in respect of the year	-1	.008	(303)
obtained due from FISE in respect of the year		0	0
Balance due from HSE re Previous year(s) as at 1st Jan.		9	0
Balance due from HSE re Previous year(s) as at 31st Dec.		8	0
Total Balance of Capital Grants Due From HSE		0]	0
Gross Total Due from HSE Capital, Fair Deal & Non-Capital	3.	383	1,323
Purchase of Equipment and Vehicles from Non-Capital Account Capitalised)			
Note 11		2001	20000
10: 9x E		019	2018 €'000
Other Medical Equipment			
GRay / Imaging Equipment	- 1	0	0
aboratory Equipment	1	0	0
Satering Equipment		0	0
aundry Equipment	- 1	0	0
Iniciana and Carrier and	1	0	ol
laintenance Equipment		0	000
am & Garden Equipment	1	o	o)
omputer Equipment	1	0	O
ehides Purchases		0	0
		0	0

Schedule of Fixed Assets and Depreciation Note 12

Cost or Valuation at 01/01/2019
Transfer from Work-in -Progress
Sub-Total
Additions from Capital
Additions from Non-Capital
Disposals during the year at Gross Book Value
Revaluations
Cost / Valuation at 31/12/2019

Bulldin	gs E	quipment	Vehicles	Total
€0	00	€'000	€,000	€'000
7,9	11	3,038	319	11,288
	0	0	0	0
7,8	11	3,038	319	11,268
88	14	33	0	917
	0	٥	0	0
	0	-1,924	-34	-1,958
	0	0	0	0
8,79	5	1,147	285	10,227

Accumulated Depreciation at 01/01/2019
Depreciation charge for year
Disposals during the year at Gross Book Value
Accumulated Depreciation at 31/12/2019

2,684 2,986 286 5,936 176 31 13 220 0 -1,920 -33 -1,953 2,860 1,097 246 4,203

Net Book Amount at 31/12/2019

Net Book Amount at 31/12/2018

5,935	50	39	6,024
5,227	52	53	5,332

During 2019 a detailed review and reconciliation of the fixed asset register was carried out. As a result of this review a total of €1,978,926 of assets were identified as no longer in use or were below the capitalisation threshold of €3,809. The total of identified assets written off had a net book value of €4,288 and are included in the fixed asset schedule under disposals.

Debtors			
Note 13		2019	2018
NOS Bereio	Note	€'000	€.000
HSE- Revenue Grant Due	10	708	653
HSE- Capital Grant Due	10	0	
HSE- Fair Deal Grant Due	10	677	870
HSE Debtors		1,383	1,323
HSE Other Grant		0	C
Patients (Closing Ledger Balance)		330	301
Less: Provision for bad & doubtful debts	1	(196)	(180)
Other	1		
Prepayments	1	36	6 55
Non-HSE Debtors	_	175	
Total		1/5	182
lotal		1,558	1,505
Stocks			
Nate 14		0040	2010
		2019 €'000	2018
Druge & Medicines	-	28	€,000
Medical Gases	1		22
Medical & Surgical Supplies		0	0
Sterile Supplies	1	4	7
Provisions	1	0	2
Laundry / Cleaning	1	3	5
Bedding / Clothing		3	4
Furniture / Crockery		0	0
Heat / Power/ Light Supplies		0	0
Maintenance Supplies		0	٥
Office Supplies		5	4
Computer Supplies	- 1	16	8
Shop	1	0	0
	-	59	0
Creditors		28	50
Note 15		2019	2018
	1	€,000	€,000
Creditors- Capital	-	0	0
Craditors- Non-Capital		421	372
Creditors -Taxation	1	262	253
Creditors -Wages and Salaries	1	407	366
Creditors -Other	- 1	222	187
		1,312	1.178
		1,012	1.170

Bank Loans- Greater than one year Note 16

Bank Loans Deficit Bank Loan Account Deficit-Financing Account

2019 €'000	2018 €000
0	0
0	0
0	0
0	0

Capitalisation Account Note 17

Balance at beginning of year Additions
Capital Expenditure
Non-Capital Expenditure

Sub-Total Additions

Lass:
Disposate (Cost less Depraciation)
Revaluations
Depraciation for the year

Sub-Total deductions

Balance at year-end

2019	2018
£000	E,000
5,332	5,443
917	92 0
6.249	5,635
6 0 220	0 0 203
225	203
6.0241	5,332

Notes to the Cash Flow Statement Note 18

(Deficit//Surplus (Non-Capitel) Add back deficit / (surplus) brought forward Deficit / (Surplus) for current year

Deduct repayment of loan (Capital Element) charges against non-capital Deduct Interest and Dividend Income Add back purchase of equipment from non-capital Add back Interest charged against non-capital (Increase)/Decrease in Stocks
Decrease in HSE Debtors (Non-Capital) (Increase) in Non-HSE and Non-Health Board Debtors Increases/(Decrease) in Non-Capital Creditors

Net Cesh Inflow/(Outflow) from Operating Activities

2019 €000	2018 €'000	
(288)	(98) 130	
(172)	34	
0	0	
0	0	
(0)	(2)	
(BO) 7	(191) 114	
134	(18)	
(100)	(63)	

Analysis of Changes in Net Debt Note 19

Cash in Hand & Bank Balances Bank Overdraft

Loans Debt due within one year Debt due after one year

Finance Lease: within one year Finance Lease: From two to five years

At 1st.	Cash	Non Cash	At 31sl
Jan-19	Flow	Changes	Dec-19
€.000	€000	€,000	€000
1,585	(74)	0	1,511
(228)	(47)	0	(273)
1,359	(121)	0	1,238
٥	٥	٥	o
٥	0	0	ŏ
0	0	0	Ō
0	0	0	0
0	0	0	0
0	0	0	٥
0	0	0	0
1,359	(121)	0	1.238

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

Increase/(Decrease) in cash in the year Cash Inflow / (Outflow) from increase / (decrease) in debt and lease financing

Changes in net debt resulting from cash flow

New Finance Leases taken out in the year Changes in Net Debt Net debt at beginning of year Net debt at end of year

2019	2018
€,000	€'000
(121)	(29)
0	0
(121)	(29)
o	0
0	0
1.359	1,388
1,238	1,359

Board Members- Disclosure of Interests Note 21

The Board adopted procedures in accordance with guidelines issued by the Department of Public Expanditure 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.

LPH Foundation Note 22

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 Doard 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 2019, the Foundation provided income of €45,919 to the Hospital in line with their objects. This income is offset against the costs as part of the financial statements consolidation process.

Soard & Committee Members- Expenses

Name	2019	2016
Mr. E. Magea	510	893
Ma. D Duggan	1 0.01	000
Mr. D. Magan	اة ا	129
Ms. E. Cogan	1 3	128
Mr. D Duff	572	486
Ms. H O'Nelli	0,5	112
Ms. F NI Fhlannchadha	1 3	182
Vir. Martin Cowley	1 2	102
Total	1.082	4 700

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, sataries etc to board members. (Article 18, subsection 1).

Board Members - Attendance at board meetings Note 24

	Scheduled	Attended
Mr E. Magoe Ma. D. Ouggan Mr. D. Magan Ms. E. Cogan Mr D. Duff Mr H. O'Nelil Me. F. Ni Fhiannohadha	8 8 8 8 8	8 8 8 6 8 5

CEO's Remuneration Note 25

	2019 €000	2018 €'000
Basic Pay Employers PRSt	110 2	104 2
Total	112	106

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.

Premiees

Note 26

The Board operatos 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

Panalon Levy Note 27

In 2019 an amount of €245k in pension levies (2018: €331k) was deducted and forms part of the determination for the year.

Consolidation

Note 28

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.

Reserves Note 29

	Non Capital Income & Expenditure €'000	Restricted Reserves €'000	Capital Reserves €'000	Total €'000
At 1 January 2019	(96)	1,831	5,332	7,067
Non Capital Income & Expenditure Deficit	(172)			(172)
Capitalised Fixed Assets movement			692	692
Restricted Reserve movement		(21)		(21)
At 31 December 2019	(268)	1,810	6,024	7,566

Note 30 Post Balance Sheet Event Covid-19

In 2020, the Covid-19 virus spread worldwide. In common with many other countries and health systems the impact of Covid on services and costs of providing ongoing services safely have been very significant. These were not anticipated within the funding envelope initially allocated at the start of 2020. As the hospital was advised in 2020 by the HSE that the Covid additional costs were to be addressed by separate funding, and additional funding was provided, there was no on going risk to the 2020 financial position.

Note 31

The Financial Statements were approved by the Board on 18th March 2021