OVERALL CERTIFICATE For accounts with typed signatures Companies Act 2014

South Infirmary – Victoria University Hospital

129505

27th April 2020

Ended 31 December 2019

Company Name:

Financial Year:

Date:

Company Number:

CERTIFICATE:	•				
WE HEREBY CERTIFY that all documents which are required under Part 6 of the Companies Act 2014 to be annexed to this annual return, have been so annexed, and that they are true copies of the originals laid, or to be laid, before the relevant general meeting, or presented to the member(s).					
Signature:	For and on behalf of L&P Trustee Services as Company Secretary	Signature:	Director		
Name:	Nicola Keogh (Typed or block capitals)	Name:	Michael Hall (Typed or block capitals)		

Date:

27th April 2020

REPORTS AND FINANCIAL STATEMENTS SOUTH INFIRMARY - VICTORIA UNIVERSITY HOSPITAL COMPANY LIMITED BY GUARANTEE

FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

REPORTS AND FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

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DIRECTORS AND OTHER INFORMATION

DIRECTORS

Mr M Hall (Chairman)

Dr B Creedon (Vice Chairman)

Dr M Phelan
Mr R Newenham
Rev E W Hunter
Dr J Bourke
Mr J Jermyn
Mr R O'Connell
Prof Deirdre Murray
Ms Gillian Keating
Ms Catherine Desmond

COMPANY SECRETARY

L&P Trustee Services Limited

75 St. Stephen's Green

Dublin 2

INDEPENDENT AUDITOR

Deloitte Ireland LLP

Chartered Accountants and Statutory Audit Firm

No. 6 Lapp's Quay

Cork

BANKER

Allied Irish Banks pic

66 South Mall

Cork

SOLICITORS

Ronan Daly Jermyn 2 Park Place City Gate Park Mahon Point

Cork

REGISTERED OFFICE

Old Blackrock Road

Cork T12 X23H

REGISTERED NO. OF INCORPORATION

129505

CHARITIES REGULATORY AUTHORITY NO.

20027025

CHY NO.

10543

COUNTRY OF INCORPORATION

Ireland

CHAIRMAN'S STATEMENT

I am pleased to present the 2019 annual report of the South Infirmary - Victoria University Hospital. The Hospital is predominantly an elective surgical Hospital and a tertiary referral centre for ear, nose and throat ("ENT"), Dermatology and Elective Orthopaedics.

During 2019, a total of 39,059 (2018: 38,950) inpatients and day patients were treated in our hospital (4,847 inpatients and 34,212 day patients). The activity for 2019 shows a marginal increase of 109 patients over 2018.

Our outpatient attendances totaled 70,856 - new 26,429 and return 44,427 (2018: 25,211 - new and return 44,577). The increase of 2% is due to additional clinics funded by the National Treatment Purchase Fund (NTPF).

Our allocation of funds from the Health Service Executive to cover the net cost of operational services for the year was €58.8m (2018: €58.3m). There was an operating activities surplus of €30k in 2019 (2018: operating surplus of €124k). We received a capital funding allocation of €200k for facilities upgrade and €545k for medical equipment replacement.

Fundraising

I wish to congratulate and thank all those associated with our ongoing fundralsing campaigns. Income received during the financial year was €65,215. The income raised is ring-fenced, recorded in a separate bank account and used exclusively for hospital development purposes as approved by the Trustees of the Charity. Expenditure of €108,470 was incurred on the purchase of medical equipment and facility improvements.

The balance of restricted funds from fundraising on hand at 31 December 2019 is €166,790. Fundraising is an essential element in the provision of facilities and equipment and I wish to acknowledge the very generous support which was received from our friends and supporters during the financial year. A number of successful fundraising initiatives were organized by the Friends of the SIVUH and I wish them continued success for future activities.

Conclusion

I would like to thank my fellow Board members for the giving of their time and experience, especially those on a voluntary basis, in ensuring the successful running and development of the Hospital. It is indeed an honour to be re-elected as Chairman and to have been associated with the ongoing advances during the financial year.

As an elective hospital we are uniquely positioned to make a significant contribution to the evolution of healthcare in the South/South West region. We are actively committed to working with the South/South West Hospital Group (SSWHG) and the Department of Health towards the development of a new elective hospital for the region.

I would like to compliment our Chief Executive, Management Team and the Hospital's Executive Management Board for the continued enhancement of patient services throughout the financial year and the ongoing work to improve the patient experience at this historical facility. I would also like to acknowledge the Immense contribution of all staff to the success of the Hospital.

I would like to express my thanks to the General Practitioners for continuing to refer their patients to us, to our visiting medical consultants and to our chaplains for the continued support and attention that they give to our patients.

I wish to conclude by expressing thanks to the Minister for Health, his officials and the South/SouthWest Hospital Group (SSWHG) for their financial support during the financial year, both in respect of revenue and capital projects.

Michael Hall Chairman

Date: 27th April 2020

DIRECTORS' REPORT

The directors present their annual report and the audited financial statements of the company for the financial year ended 31 December 2019.

ACTIVITIES

The principal activity of the company continues to be the provision of general hospital services. The directors do not anticipate that the principal activity of the company will change in the foreseeable future.

OUR MISSION

We at the South Infirmary – Victoria University Hospital ("SIVUH") are committed to providing the highest quality service to ail our patients in a friendly, safe and caring environment. We endeavour to provide an effective, efficient service in a timely manner with equal access for all our patients. We aim to provide individual patient centered care to each patient and their families and promote patient participation in their care. We encourage good interpersonal relationships. We promote staff and service development through education, motivation and encouragement, We are committed to providing an effective learning environment for future health service staff.

HOSPITAL DEVELOPMENTS

Ophthalmology Outpatients Department at SIVUH

This project received a Capital Allocation in 2019 and a building contractor was appointed. The site was handed over to the contractor at the end of 2019 and building works have commenced. HSE Estates are managing the build phase of the project.

Clinical Director

Ms Michelle Murphy was appointed to the post of Clinical Director following the resignation of Mr Eamonn O'Connell. The Board would like to thank Mr O'Connell for his contribution over the previous 2 years.

Consultant Appointments during 2019

Ms Sarah Moran - Consultant Ophthalmic Surgeon Mr Padhraig McLoughlin - Consultant Orthopaedic Surgeon

Ms Emer Aherne - Consultant Geriatrician

Ms Ann Boyapatl - Consultant Dermatologist

New Elective Hospital

The Board is committed to HSE plans for a new elective hospital for the region. During 2019 a project Board was set up, chaired by Prof Geraldine McCarthy, chairperson of the South/South West Hospital Group. The project has identified four main workstreams. The CEO, Helen Donovan, is representing the hospital on the New Elective Hospital Service Redesign Workstream.

RISKS AND UNCERTAINTIES

As is required by company law the Directors consider and report to you on the risks and uncertainties facing us. The principal risks relate to the continuation of adequate funding of the hospital by the exchequer via the Health Service Executive for the level and quality of services being provided by the hospital and the level of cost increases facing the economy in particular in the Healthcare sector. The ability of the exchequer to fund Health sector cost inflation in the short term seems adequate, but current political and economic uncertainty in the local and European economy, is a source of concern.

The company is providing increasingly complex medical procedures, with the associated underlying clinical risks for patients, reflecting the developments of its core specialities and the general advancement of medical knowledge and practices.

The company is dependent upon skilled and competent staff in order to maintain activity levels and to ensure a safe delivery of service to patients. Adherence to the European Working Time Directive and the supply of skilled clinical staff pose challenges in this regard.

DIRECTORS' REPORT (CONTINUED)

RISKS AND UNCERTAINTIES - continued

In common with other hospitals the principal financial risk is the cost of running the hospital and maintaining agreed service levels in line with the budgetary allocation provided by the HSE, particularly in the context of the demand for elective acute care. The Board recognises the considerable challenges faced in the current economic climate. However, they are confident that through proactive management of the budgetary allocation these risks do not impact on the operation of the company as a going concern.

Due to the age of the buildings the hospital is dependent on the HSE annual capital allocation for facility upgrade works. Likewise, due to continued developments in medical equipment technology advancements there is significant dependence on the capital funding received from the HSE for replacement of medical equipment.

The strategic direction of the Health Service Executive in the Southern region may have major implications for the hospital and the company in the medium term.

RESULTS AND DIVIDENDS	2019 €	2018 €
Surplus after tax from operating activities for the financial year Retained earnings brought forward	30,423 5,065,635	124,054 <u>4,941,581</u>
Retained earnings carried forward	<u>5,096,058</u>	<u>5,065,635</u>

Details are set out on page 12.

The company has no shareholders therefore it does not pay a dividend.

DIRECTORS AND SECRETARY

The directors and secretary who served at any time throughout the financial year were as follows:

Mr M Hall (Chairman)
Dr B Creedon (Vice Chairman)
Dr M Phelan
Mr R Newenham
Mr J Kelly (resigned 24th June 2019)
Pr J Bourke
Mr J Jermyn
Mr J O'Leary (RIP 23rd October 2019)
Mr R O'Connell
Prof Deirdre Murray
Ms Gillian Keating (appointed 25th February 2019)
Ms Catherine Desmond (appointed 16th December 2019)

Our Board member and Chairperson of the Audit Committee, Mr Joseph O'Leary, sadiy passed away on 23rd October 2019. Mr O'Leary made a valuable contribution since his appointment to the Board on 29th May 2017.

DIRECTORS' AND SECRETARY'S INTEREST IN SHARES

The directors and secretary who held office at or during the financial year end did not hold any interests in the company at the start or end of the financial year. The company is limited by guarantee. It does not have share capital.

DIRECTORS' REPORT (CONTINUED)

ACCOUNTING RECORDS

The measures that the directors have taken to ensure compliance with Section 281 to 285 of the Companies Act, 2014, are the employment of appropriately qualified accounting personnel and the maintenance of computerised accounting systems. The company's accounting records are maintained at the company's registered office at Old Blackrock Road, Cork.

TRANSACTIONS INVOLVING DIRECTORS

There were no contracts nor arrangements with directors of any significance in relation to the business of the company, as defined in the Companies Act, 2014, at any time during the financial year ended 31 December 2019.

TAXATION STATUS

The hospital has been granted charitable status by the Revenue Commissioners of Ireland.

FINANCIAL RISK MANAGEMENT

The hospital's operations do not expose it to significant financial risks (e.g. effect of changes in debt market prices, foreign exchange risk, credit risk, liquidity risk and interest rate risk). Consequently, the directors have decided that a risk management programme to manage the financial exposures of the hospital is not necessary.

GOING CONCERN

The Board of Directors is pleased to report that the Hospital generated a surplus of €30,423 in the current financial year and that it had net current assets and net assets amounting to €5,262,848 at the financial year end date.

Notwithstanding the positive net assets position attained at the end of 2019, the company continues to be dependent on the determination of annual grant allocations from the Health Service Executive ("HSE") to meet the majority of its annual operating costs. The company's management is working closely with the HSE with the aim of ensuring that the company operates within budget for 2020 and future years and accordingly management is confident that the HSE will be in a position to provide sufficient funds to enable the company to continue in operation for at least one financial year from the date of approval of the financial statements. The company is also dependent on the financial support of its bankers to provide on-going overdrafts to allow the company access to funds when required.

The Board of Directors, having reviewed cash flow projections and budgetary expectations for the forthcoming financial year, is satisfied that adequate resources will be available to the company to allow it to continue trading for a period of at least one financial year from the date of signing of these financial statements.

Accordingly, the directors consider it appropriate to prepare the financial statements on a going concern basis.

STATEMENT ON RELEVANT AUDIT INFORMATION

In the case of each of the persons who are directors at the time this report is approved in accordance with Section 332 of the Companies Act 2014:

- (a) So far as each director is aware, there is no relevant audit information of which the company's statutory auditors are unaware, and
- (b) Each director has taken all the steps that he or she ought to have taken as a director in order to make himself or herself aware of any relevant audit information and to establish that the company's statutory auditors are aware of that information.

POLITICAL DONATIONS

The Electoral Act, 1997, requires companies to disclose all political donations to any individual party over €5,079 in value made during the financial year. The directors, on enquiry, have satisfied themselves that no such donations in excess of this amount have been made by the company.

DIRECTORS' REPORT (CONTINUED)

SUBSEQUENT EVENTS

Since the financial year end there has been a global pandemic outbreak of coronavirus, COVID-19. This has been assessed by the directors and management of the hospital as a non-adjusting event. Given the current level of uncertainty surrounding the event no financial estimate that may arise can be quantified. The directors and management have considered the impact of this event on the hospital subsequent to the financial year end and are confident that the hospital will continue to provide medical services as required and without significant disruption or financial impact.

PROMPT PAYMENT OF ACCOUNTS ACT, 1997 (As Amended)

The directors acknowledge their responsibility for ensuring compliance with the Prompt Payment of Accounts Act, 1997, as amended by the European Communities (Late Payment in Commercial Transactions) Regulations, 2012. Procedures have been implemented to identify dates upon which invoices fall due for payment and for payment to be made on such dates. The directors use their best endeavours to ensure that the company has complied with the provisions of the Act. The interest paid under the terms of the regulations amounted to €Nil (2018: €Nil).

DIRECTORS' COMPLIANCE STATEMENT

The directors acknowledge that they are responsible for securing the company's compliance with its relevant obligations.

The directors confirm that;

- a) A compliance policy statement has been drawn up that sets out the policies that in our opinion are appropriate to the company, in respect of its relevant obligations;
- b) Appropriate arrangements or structures are in place that are, in our opinion, designed to secure material compliance with the company's relevant obligations; and
- c) During the financial year, the arrangements or structures referred to in (b) have been reviewed.

AUDIT COMMITTEE

The Audit Committee held 2 meetings throughout the financial year. The members of the sub-committee were re-elected at the Board meeting on 24th June 2019. Ms Catherine Desmond was appointed Chairperson of the audit committee on her appointment to the Board of Directors on 16th December 2019.

AUDITOR

The auditor, Deloitte Ireland LLP, Chartered Accountants and Statutory Audit Firm, continues in office in accordance with Section 383 (2) of the Companies Act, 2014.

Approved by the Board and signed on its behalf by:

Michael Hall

Bernard Creedon

Date: 27th April 2020

DIRECTORS' RESPONSIBILITIES STATEMENT

The directors are responsible for preparing the directors' report and the financial statements in accordance with the Companies Act 2014.

Irish company law requires the directors to prepare financial statements for each financial year. Under the law, the directors have elected to prepare the financial statements in accordance with FRS 102 The Financial Reporting Standard applicable in the UK and Republic of Ireland Issued by the Financial Reporting Council ("relevant financial reporting framework"). Under company law, the directors must not approve the financial statements unless they are satisfied that they give a true and fair view of the assets, liabilities and financial position of the company as at the financial year end date and of the profit or loss of the company for the financial year and otherwise comply with the Companies Act 2014.

In preparing those financial statements, the directors are required to:

- select suitable accounting policies for the Company Financial Statements and then apply them consistently;
- make judgements and estimates that are reasonable and prudent;
- state whether the financial statements have been prepared in accordance with the applicable
 accounting standards, identify those standards, and note the effect and the reasons for any
 material departure from those standards; and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that the company will continue in business.

The directors are responsible for ensuring that the company keeps or causes to be kept adequate accounting records which correctly explain and record the transactions of the company, enable at any time the assets, liabilities, financial position and profit or loss of the company to be determined with reasonable accuracy, enable them to ensure that the financial statements and directors' report comply with the Companies Act 2014 and enable the financial statements to be audited. They are also responsible for safeguarding the assets of the company and hence for taking reasonable steps for the prevention and detection of fraud and other irregularities.



Deloitte Ireland LLP Chartered Accountants & Statutory Audit Firm

INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF SOUTH INFIRMARY - VICTORIA UNIVERSITY HOSPITAL

Report on the audit of the financial statements

Opinion on the financial statements of South Infirmary - Victoria University Hospital (the 'company')

In our opinion the financial statements:

- give a true and fair view of the assets, liabilities and financial position of the company as at the financial year ended 31 December 2019 and of the surplus for the financial year then ended; and
- have been properly prepared in accordance with the relevant financial reporting framework and, in particular, with the requirements of the Companies Act 2014.

The financial statements we have audited comprise:

- the Profit and Loss Account:
- · the Balance Sheet;
- · the Statement of Changes in Equity;
- · the Cash Flow Statement; and
- the related notes 1 to 26, including a summary of significant accounting policies as set out in note 2.

The relevant financial reporting framework that has been applied their preparation is the Companies Act 2014 and FRS102 "The Financial Reporting Standard applicable in the UK and Republic of Ireland" issued by the Financial Reporting Council ("the relevant financial reporting framework").

Basis for opinion

We conducted our audit in accordance with International Standards on Auditing (Ireland) (ISAs (Ireland)) and applicable law. Our responsibilities under those standards are described below in the "Auditor's responsibilities for the audit of the financial statements" section of our report.

We are independent of the company in accordance with the ethical requirements that are relevant to our audit of the financial statements in Ireland, including the Ethical Standard issued by the Irish Auditing and Accounting Supervisory Authority, and we have fulfilled our other ethical responsibilities in accordance with these requirements. We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our opinion.

Conclusions relating to going concern

We have nothing to report in respect of the following matters in relation to which ISAs (Ireland) require us to report to you where:

- the directors' use of the going concern basis of accounting in preparation of the financial statements is not appropriate; or
- the directors have not disclosed in the financial statements any identified material uncertainties that may
 cast significant doubt about the company's ability to continue to adopt the going concern basis of
 accounting for a period of at least twelve months from the date when the financial statements are
 authorised for issue.

Other information

The directors are responsible for the other information. The other information comprises the information included in the reports and financial statements, other than the financial statements and our auditor's report thereon. Our opinion on the financial statements does not cover the other information and, except to the extent otherwise explicitly stated in our report, we do not express any form of assurance conclusion thereon.

In connection with our audit of the financial statements, our responsibility is to read the other information and, in doing so, consider whether the other information is materially inconsistent with the financial statements or our knowledge obtained in the audit or otherwise appears to be materially misstated. If we identify such material inconsistencies or apparent material misstatements, we are required to determine whether there is a material misstatement in the financial statements or a material misstatement of the other information. If, based on the work we have performed, we conclude that there is a material misstatement of this other information, we are required to report that fact.

We have nothing to report in this regard.

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Deloitte.

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INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF SOUTH INFIRMARY - VICTORIA UNIVERSITY HOSPITAL

Responsibilities of directors

As explained more fully in the Directors' Responsibilities Statement, the directors are responsible for the preparation of the financial statements and for being satisfied that they give a true and fair view and otherwise comply with the Companies Act 2014, and for such internal control as the directors determine is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

In preparing the financial statements, the directors are responsible for assessing the company's ability to continue as a going concern, disclosing, as applicable, matters related to going concern and using the going concern basis of accounting unless the directors either intend to liquidate the company or to cease operations, or have no realistic alternative but to do so.

Auditor's responsibilities for the audit of the financial statements

Our objectives are to obtain reasonable assurance about whether the financial statements as a whole are free from material misstatement, whether due to fraud or error, and to issue an auditor's report that includes our opinion. Reasonable assurance is a high level of assurance, but is not a guarantee that an audit conducted in accordance with ISAs (Ireland) 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 ISAs (Ireland), we exercise professional judgment and maintain professional scepticism throughout the audit. We also:

- 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 our 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.
- 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 company's internal control.
- Evaluate the appropriateness of accounting policies used and the reasonableness of accounting estimates and related disclosures made by the directors.
- Conclude on the appropriateness of the directors' use of the going concern basis of accounting and, based
 on the audit evidence obtained, whether a material uncertainty exists related to events or conditions that
 may cast significant doubt on the company's ability to continue as a going concern. If we conclude that a
 material uncertainty exists, we are required to draw attention in our auditor's report to the related
 disclosures in the financial statements or, if such disclosures are inadequate, to modify our opinion. Our
 conclusions are based on the audit evidence obtained up to the date of the auditor's report. However,
 future events or conditions may cause the entity (or where relevant, the group) to cease to continue as
 a going concern.
- Evaluate the overall presentation, structure and content of financial statements, including the disclosures and whether the financial statements represent the underlying transactions and events in a manner that achieves fair presentation.

We 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 the auditor identifies during the audit.

This report is made solely to the company's members, as a body, in accordance with Section 391 of the Companies Act 2014. Our audit work has been undertaken so that we might state to the company's members those matters we are required to state to them in an auditor's report and for no other purpose. To the fullest extent permitted by law, we do not accept or assume responsibility to anyone other than the company and the company's members as a body, for our audit work, for this report, or for the opinions we have formed.

Deloitte.

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INDEPENDENT AUDITOR'S REPORT

TO THE MEMBERS OF SOUTH INFIRMARY - VICTORIA UNIVERSITY HOSPITAL

Report on other legal and regulatory requirements

Opinion on other matters prescribed by the Companies Act 2014

Based solely on the work undertaken in the course of the audit, we report that:

- We have obtained all the information and explanations which we consider necessary for the purposes of our audit.
- In our opinion the accounting records of the company were sufficient to permit the financial statements to be readily and properly audited.
- The financial statements are in agreement with the accounting records.
- In our opinion the information given in the directors' report is consistent with the financial statements and the directors' report has been prepared in accordance with the Companies Act 2014.

Matters on which we are required to report by exception

Based on the knowledge and understanding of the company and its environment obtained in the course of the audit, we have not identified material misstatements in the directors' report.

We have nothing to report in respect of the provisions in the Companies Act 2014 which require us to report to you if, in our opinion, the disclosures of directors' remuneration and transactions specified by law are not made.

Honor Moore

LOON MOOL

For and on behalf of Deloitte Ireland LLP Chartered Accountants and Statutory Audit Firm No. 6 Lapp's Quay

Cork

Date: 5 May 2020

PROFIT AND LOSS ACCOUNT FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

	Notes	Operating activities 2019 €	Restricted funds 2019 €	Total 2019 €	Total 2018 €
INCOME - continuing operations					
Patient receipts Health Service Executive Determination Pension contributions and levy Other receipts Fundraising Income	4	10,426,665 58,772,123 2,947,672 2,894,920 	- - - 6 <u>5,215</u> 65,215	10,426,665 58,772,123 2,947,672 2,894,920 <u>65,215</u> 75,106,595	10,793,255 58,337,069 3,168,033 2,885,734 185,395 75,369,486
EXPENDITURE					
Staff costs Other operating expenses Utilisation of fundraising income	5	(51,534,623) (23,462,042) ————————————————————————————————————	(108,470)	(51,534,623) (23,462,042) (108,470) (75,105,135)	(51,782,580) (23,265,087) (150,911) (75,198,578)
OPERATING SURPLUS/(DEFICIT) - continuing operations		44,715	(43,255)	1,460	170,908
Interest payable and similar charges	7	(14,292)	<u>-</u>	(14,292)	(12,370)
SURPLUS/(DEFICIT) BEFORE TAXATION	8	30,423	(43,255)	(12,832)	158,538
Taxation on surplus/(deficit)	9			-	
SURPLUS/(DEFICIT) AFTER TAXATION		<u>30,423</u>	<u>(43,255)</u>	(12,832)	<u>158,538</u>

BALANCE SHEET AS AT 31 DECEMBER 2019

	Notes	2019 €	2018 €
FIXED ASSETS			
Tangible fixed assets	10	<u>36,037,776</u>	<u>36,497,216</u>
CURRENT ASSETS			
Stocks Allocations receivable Debtors Cash at bank and in hand	11 12 13 14	1,808,964 7,047,887 3,077,067 <u>1,872,982</u> 13,806,900	1,671,922 8,396,583 3,197,649 1,404,046 14,670,200
CREDITORS (Amounts falling due within one financial year)	15	(8,544,052)	(9,394,520)
NET CURRENT ASSETS		<u>5,262,848</u>	<u>5,275,680</u>
TOTAL ASSETS LESS CURRENT LIABILITIES		41,300,624	41,772,896
CAPITAL GRANTS	16	(36,037,776)	(36,497,216)
NET ASSETS		<u>5,262,848</u>	<u>5,275,680</u>
REPRESENTED BY: Retained earnings Restricted funds	17 24	5,096,058 166,790 5,262,848	5,065,635 210,045 5,275,680

The financial statements were approved by the Board of Directors on $\underline{27^{th} \, April \, 2020}$ and authorised for issue on $\underline{27^{th} \, April \, 2020}$. They were signed on its behalf by:

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Michael Hall

Bernard Creedon

Date: 27th April 2020

STATEMENT OF CHANGES IN EQUITY

	•		
	. Retained	Restricted	
	earnings	funds	Total
	€	€	€
Balance at 1 January 2018	4,941,581	175,561	5,117,142
Surplus for the financial year	<u>124,054</u>	<u>34,484</u>	<u> 158,538</u>
Balance at 31 December 2018	5,065,635	210,045	5,275,680
Balance at 1 January 2019	5,065,635	210,045	5,275,680
Surplus/(deficit) for the financial year	<u>30,423</u>	(43,255)	(12,832)
Balance at 31 December 2019	<u>5,096,058</u>	<u>166,790</u>	<u>5.262.848</u>

The Restricted funds comprise of donations and fundraising receipts which are subject to expenditure restrictions agreed with the fund representatives.

CASH FLOW STATEMENT FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

		4	
		2019	2018
	Notes	€	€
		_	•
NET CASH INFLOW/(OUTFLOW) FROM OPERATING			
ACTIVITIES	18	735,642	(579,680)
			. , .
CASH FLOWS FROM INVESTING ACTIVITIES			
Purchase of tangible fixed assets		<u>(1,298,903)</u>	(1.091,041)
NET CASH OUTFLOW FROM INVESTING			
ACTIVITIES			
WOITATITES		(1,298,903)	(1,091,041)
NET CASH FLOWS FROM FINANCING			
ACTIVITIES		•	
Bank interest receivable	7	_	669
Fundralsing capital grants	16	95.978	113,697
HSE capital grants	16	979,474	720,977
Restricted fund activities		<u>(43,255)</u>	<u> 34,484</u>
NET CASH INFLOW FROM FINANCING ACTIVITIES		1,032,197	060 027
		1,032,137	<u>869,827</u>
INCREASE/(DECREASE) IN CASH AND CASH EQUIVALENTS		<u>468,936</u>	(800,894)
			· · · · · · · · · · · · · · · · · · ·
CASH AND CASH EQUIVALENTS AT			
BEGINNING OF FINANCIAL YEAR		<u>1,404,046</u>	2,204,940
CACH AND CACH POLICIAL TAIRS AT THE			
CASH AND CASH EQUIVALENTS AT END OF FINANCIAL YEAR			
OF FINANCIAL YEAR		<u>1.872,982</u>	<u>1,404,046</u>
RECONCILIATION TO CASH AT BANK AND			
IN HAND			
Cash at bank and in hand at end of financial year	14	1,872,982	1 404 046
The state of the s	. .∓	1,0/2,304	1,404,046
		1,872,982	1,404,046
			<u> </u>

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

1. GOING CONCERN

The Board of Directors is pleased to report that the Hospital generated a surplus of €30,423 from operating activities in the current financial year (2018: surplus of €124,054) and that it had net current assets and net assets amounting to €5,262,848 at the financial year-end date (2018: €5,275,680).

Notwithstanding the positive net asset position attained at the end of 2019, the Hospital continues to be dependent on the determination of annual grant allocations from the Health Service Executive ("HSE") to meet the majority of its annual operating costs. The Hospital's management are working closely with the HSE with the aim of ensuring that the Hospital operates within budget for 2020 and future financial years and accordingly management have agreed the 2020 HSE allocation and are confident that the HSE will be in a position to provide sufficient funds to enable the Hospital to continue in operation for at least one financial year from the date of approval of the financial statements. The Hospital is also dependent on the financial support of its bankers to provide on-going overdrafts to allow the Hospital access to funds when required.

The Board of Directors, having reviewed cash flow projections and budgetary expectations for the forthcoming year, is satisfied that adequate resources will be available to the Hospital to allow it to continue trading for a financial period of at least one financial year from the date of signing of these financial statements.

Accordingly, the directors consider it appropriate to prepare the financial statements on a going concern basis.

2. STATEMENT OF ACCOUNTING POLICIES

The principal accounting policies are summarised below. They have all been applied consistently throughout the financial year and the preceding financial year.

GENERAL INFORMATION AND BASIS OF PREPARATION

The South Infirmary-Victoria University Hospital Limited is a company incorporated in Ireland under the Companies Act 2014. The address of the registered office is Old Blackrock Road, Cork, T12 X23H. The nature of the company's operations and its principal activities are set out in the directors' report. The company's registered number is 129505 and it is a company limited by quarantee.

The financial statements have been prepared under the historical cost convention and in accordance with the Companies Act 2014 and Financial Reporting Standard 102 (FRS 102) issued by the Financial Reporting Council.

The functional currency of the company is considered to be Euro because that is the currency of the primary economic environment in which the company operates.

INCOME

Income includes the invoice value of services provided by the Hospital. Income from road traffic accident claims is accounted for on a cash receipts basis.

Other income receipts are earned from the car park, canteens and other miscellaneous services and are recognised as the services are provided.

The Health Service Executive (HSE) determination is the excess of the expenditure over income determination and is receivable from the HSE (provided that the Hospital operates within the agreed allocation) and is treated as income in the financial statements.

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

2. STATEMENT OF ACCOUNTING POLICIES - continued

TANGIBLE FIXED ASSETS

Tangible fixed assets are stated at cost less accumulated depreciation. Expenditure on buildings and other capital Items is financed by capital and revenue grants from the Health Service Executive and from fundraising activities. Assets financed by revenue grants are included as expenditure in the profit and loss account and are also capitalised with a matching revenue grant that is amortised to income on the same basis as the related assets are depreciated. The cost of equipment and developments to the properties used by the company have been incorporated into the financial statements. The company occupies properties in accordance with the details outlined in Note 10.

Depreciation is provided on all tangible fixed assets, other than freehold land, at rates calculated to write off the cost or valuation, less estimated residual value, of each asset on a straight-line basis over its expected useful life, as follows:

Buildings

2.5% straight line

Plant and equipment

10% straight line

Land is not depreciated.

IMPAIRMENT OF ASSETS

Assets are assessed for indicators of impairment at each balance sheet date. If there is objective evidence of impairment, an impairment loss is recognised in profit or loss as described below.

Non-financial assets

An asset is impaired where there is objective evidence that, as a result of one or more events that occurred after initial recognition, the estimated recoverable value of the asset has been reduced to below its carrying amount. The recoverable amount of an asset is the higher of its fair value less costs to sell and its value in use.

Where indicators exist for a decrease in impairment loss, the prior impairment loss is tested to determine reversal. An impairment loss is reversed on an individual impaired asset to the extent that the revised recoverable value does not lead to a revised carrying amount higher than the carrying value had no impairment been recognised.

Financial assets

If at the end of the reporting period, there is objective evidence of impairment (including observable data about loss events), the company recognises an impairment ioss in profit or loss immediately. For financial assets carried at amortised cost, the amount of impairment is the difference between the asset's carrying amount and the present value of estimated future cash flows, discounted at the financial asset's original effective interest rate.

For financial assets carried at cost less impairment, the Impairment loss is the difference between the asset's carrying amount and the best estimate of the amount that would be received for the asset if it were to be sold at the reporting date.

Where indicators exist for a decrease in impairment loss, and the decrease can be related objectively to an event occurring after the impairment was recognised, the prior impairment loss is tested to determine reversal. An impairment loss is reversed on an individual impaired financial asset to the extent that the revised recoverable value does not lead to a revised carrying amount higher than the carrying value had no impairment been recognised.

CAPITAL GRANTS

Capital grants from the Health Service Executive are treated as deferred credits and are amortised to income on the same basis as the related assets are depreciated. In addition, capital receipts include fundraising proceeds and revenue grants applied for capital expenditure.

STOCKS

Stocks are stated at the lower of cost and net realisable value. Cost comprises the purchase price including transport and other directly attributable costs. Cost is calculated using the FIFO (first-in, first-out) method. An allowance is made for obsolete, slow-moving or defective items where appropriate.

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

2. STATEMENT OF ACCOUNTING POLICIES - continued

PENSIONS

Eligible employees of the Hospital are members of either the Voluntary Hospitals Superannuation scheme operated by the Health Service Executive or, since 2013, the Single Public Service Pension Scheme operated by the Department of Public Expenditure and Reform.

Voluntary Hospitals Superannuation Scheme

The Voluntary Hospitals Superannuation Scheme is a defined benefits pension scheme which is administered, funded and underwritten by the Department of Health. The company acts as an agent in the operation of the scheme and does not make any contributions to the scheme. Contributions are received from eligible employees only.

In accordance with the service plans agreed with the Department of Health, pension contributions received may be offset against pension payments made and the surplus or deficit each financial year forms part of the funding for the company. The directors consider that the company has no responsibility for any liability that falls due as a result of any potential under-funding of the scheme.

Contributions received from employees who are members of the scheme are credited to the profit and loss account as they are received. Pension payments made under the Scheme are charged to the profit and loss account as they fall due.

Single Public Service Pension Scheme

The Single Public Service Pension Scheme ("Single Scheme") is the defined benefit pension scheme for pensionable public servants appointed on or after 1 January 2013 in accordance with the Public Service Pension (Single Scheme and Other Provisions) Act 2012. Deductions made from employees under the Single Scheme are remitted by the company to the Department of Public Expenditure and Reform.

In accordance with Section 44 of the Public Service Pensions (Single Scheme and Other Provisions) Act 2012, all future payments made under the Single Scheme shall be paid out of funds provided by the state.

The company has deemed that any future liability in respect of the Single Scheme would be offset by an equivalent asset in the form of state funding.

FOREIGN CURRENCIES

The Euro is the functional currency of the company. Transactions in foreign currencies are recorded at the rate of exchange ruling at the transaction date. Assets and liabilities denominated in foreign currencies are translated into Euro at the exchange rate ruling at the balance sheet date, with the corresponding gain or loss taken to the Profit and Loss account.

FINANCIAL INSTRUMENTS

Financial assets and financial liabilities are recognised when the company becomes a party to the contractual provisions of the instrument.

Financial liabilities and equity instruments are classified according to the substance of the contractual arrangements entered into. An equity instrument is any contract that evidences a residual interest in the assets of the company after deducting all of its liabilities.

Financial assets and liabilities

All financial assets and liabilities are initially measured at transaction price (including transaction costs), except for those financial assets classified as at fair value through profit or loss, which are initially measured at fair value (which is normally the transaction price excluding transaction costs), unless the arrangement constitutes a financing transaction. If an arrangement constitutes a financing transaction, the financial asset or financial liability is measured at the present value of the future payments discounted at a market rate of interest for a similar debt instrument.

Financial assets and liabilities are only offset in the statement of financial position when, and only when there exists a legally enforceable right to set off the recognised amounts and the company intends either to settle on a net basis, or to realise the asset and settle the liability simultaneously.

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

3. CRITICAL ACCOUNTING JUDGEMENTS AND KEY SOURCES OF ESTIMATION UNCERTAINTY

In the application of the company's accounting policies, which are described in note 2, the directors are required to make judgements, estimates and assumptions about the carrying amounts of assets and liabilities that are not readily apparent from other sources. The estimates and associated assumptions are based on historical experience and other factors that are considered to be relevant. Actual results may differ from these estimates.

The estimates and underlying assumptions are reviewed on an ongoing basis. Revisions to accounting estimates are recognised in the financial period in which the estimate is revised if the revision affects only that financial period, or in the financial period of the revision and future financial periods if the revision affects both current and future financial periods.

Critical judgements in applying the company's accounting policles

The critical sources of estimation relate to the provisioning for bad or doubtful debts, the estimation of the useful lives of tangible assets and the estimation of pension obligations.

Provisions

Provisions are recognised when the company has a present obligation (legal or constructive) as a result of a past event, it is probable that the company will be required to settle the obligation, and a reliable estimate can be made of the amount of the obligation. Provisions primarily include provisions for bad debts.

Useful economic lives

The useful economic lives of tangible assets are key assumptions concerning the future at the reporting date, that have a significant risk of causing a material adjustment to the carrying amounts of the assets within the next financial year.

Pensions

The company provides pension schemes to its employees under the voluntary hospitals superannuation scheme and the single public service pension scheme. On the basis that the directors have considered that the company has no obligation to provide funding for any future payments, they have deemed it appropriate not to record a related pension liability.

4. HEALTH SERVICE EXECUTIVE DETERMINATION

The Hospital is a voluntary hospital, and the majority of its services are provided to patients funded by the Health Service Executive. Accordingly, the Hospital receives an annual subvention of funds from the Health Service Executive to cover the costs of these services. The HSE subvention accounts for 78% (2018: 78%) of the total operating income for the hospital.

5.	STAFF COSTS	2019 No.	2018 No.
The av (includ	The average number of persons employed by the company (including directors) during the financial year was as follows:-	140,	NO.
	Management & Administration	185	178
	Medical/Dental	78	76
	Nursing	300	300
	Paramedical	74	73
	Support Services/Other Patient & Client Care	<u>135</u>	137
		772	7 <u>64</u>

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

5.	STAFF COSTS - continued	2019	
	Staff costs are comprised of:-	€	€
	Start costs are comprised of:-		
	Wages and salaries	43,165,388	42,883,559
	Pensions and refunds	3,664,684	3,623,139
	Gratuitles and lump sums	631,368	1,222,124
	Social insurance costs	4,073,183	4,053,758
		<u>51,534,623</u>	51,782,580
6.	DIRECTORS' REMUNERATION AND KEY	2010	2010
0.	MANAGEMENT REMUNERATION	2019 €	2018 €
	Aggregate emoluments to directors in respect of qualifying services	<u>681,501</u>	<u>536,436</u>
	Other than as disclosed above, other disclosures required by 2014 are Nil (2018: Nil).	S.305/306 of the	Companies Act
	The directors' remuneration relates to remuneration for 5 Remuneration is not paid in respect of services as a director qualifying services provided to the company.	directors (2018 but is paid in r	: 5 directors). espect of other
	The remuneration of key management amounts to €525,118 (26	018: €507,772).	
7.	INTEREST PAYABLE AND SIMILAR CHARGES	2019	2018
		€	€
	Bank charges	14,292	13,039
	Bank interest receivable		(669)
		<u>14,292</u>	<u> 12,370</u>
8.	SURPLUS/(DEFICIT) BEFORE TAXATION	2019	2018
		€	€
	The surplus/(deficit) for the financial year is stated after (crediting)/charging:		
	Medical consultants' payroll settlement liability	(202,148)	2,147,796
	HSE allocations for payroll settlement liability	202,148	(2,147,796)
	Depreciation of tangible fixed assets	1,758,343	1,651,058
	Grant amortisation	(1,758,343)	(1,651,058)
	Auditor's remuneration		
	Audit of individual accounts (including VAT)	<u>36,637</u>	38,936

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

9. TAXATION ON SURPLUS/(DEFICIT)

No taxation liability arises as the company is a charitable body, that has been granted a tax exemption by the Revenue Commissioners, and its entire funds are committed to the objectives of the charity.

10.	TANGIBLE FIXED ASSETS			ant & ment Total	
		£ana & Danamgs €	Equipment €	€	
	Cost	£	ę.	·	
	At 1 January 2019	40,590,142	26,334,756	66,924,898	
	Additions	<u>289,306</u>	1,009,597	1,298,903	
	At 31 December 2019	<u>40,879,448</u>	<u>27,344,353</u>	<u>68,223,801</u>	
	Accumulated depreciation				
	At 1 January 2019	10,247,141	20,180,541	30,427,682	
	Depreciation charge for the financial year	876,775	<u>881,568</u>	<u>1,758,343</u>	
	At 31 December 2019	<u>11,123,916</u>	21,062,109	<u>32,186,025</u>	
	Net book value				
	At 31 December 2019	<u>29,755,532</u>	<u>6,282,244</u>	<u>36,037,776</u>	
	At 31 December 2018	30.343,001	<u>6,154,215</u>	<u>36,497,216</u>	

Tangible fixed assets that have been funded by the Minister for Health are the property of the company, but may not be disposed of or applied to any other purpose without the Minister's prior consent.

11.	STOCKS	2019 €	2018 €
	Stocks	1.808.964	1.671.922

The costs of inventories recognised as an expense during the financial year was $\in 14,222,790$ (2018: $\in 14,359,900$). In the opinion of the directors, the replacement cost of stocks does not differ materially from the amounts shown here.

12. ALLOCATIONS RECEIVABLE

The amount due from the Health Service Executive represents the unpaid part of the approved allocation for 2019 and it also includes the remaining amounts due from the HSE in respect of the amounts payable to the Medical Consultants, and those in receipt of pensions, following the High Court decision in June 2018 in relation to the terms of the Consultants Contract 2008.

SOUTH INFIRMARY-VICTORIA UNIVERSITY HOSPITAL NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

13.	DEBTORS	2019	2018
	Due within one financial year:-	€	€
	Amounts receivable (net of bad debt provision) Prepayments and other debtors	1,858,045 1,219,022	2,261,177 <u>936,472</u>
		<u>3,077,067</u>	<u>3,197,649</u>
14.	CASH AT BANK AND IN HAND	2019 €	2018 €
	General funds Restricted funds	1,706,192 <u>166,790</u>	1,194,001 210,045
		<u>1,872,982</u>	<u>1,404,046</u>
15.	CREDITORS (Amounts falling due within one financial year)	2019 €	
	Trade creditors Capital accrual Accruals	1,546,998 132,435 <u>6,864,619</u>	84,194
		<u>8,544,052</u>	<u>9,394,520</u>
	At 31 December 2019 the PAYE/PRSI liability was €1,456,991 payable was €1,027 (2018: €27,658).	(2018: €1,107,	864) and VAT
	The capital accrual relates to capital grants received at the finan utilised.	cial year end that	are yet to be
16.	CAPITAL GRANTS This comprises the following:	2019 €	2018 €
	Grants received Capital grants from the HSE (and predecessor organisations) at 1 January.	46,377,600	45,656,623
	Revenue grants from the HSE (and predecessor organisations) at 1 January Fundralsing receipts	18,496,040 2,051,258	18,239,673 1,937,561
	Total grants received at 1 January Capital grants allocated during the financial year Fundraising capital grants allocated during the financial year Revenue grants from the HSE during the financial year	66,924,898 979,474 95,978 	65,833,857 720,977 113,697 256,367
	Grants received at 31 December	68,223,801	66,924,898
	Cumulative amortisation at 1 January Amortisation during the financial year	(30,427,682) (1,758,343)	(28,776,624) (1,651,058)
	Capital grants at 31 December	36,037,776	36,497,216

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

17. SHARE CAPITAL AND OTHER RESERVES

The company is limited by guarantee, not having a share capital. It is guaranteed by Members to the extent of €1.269738 per Member.

Other reserves

Retained earnings represent the cumulative surplus at the financial year end.

18.	RECONCILIATION OF OPERATING SURPLUS FOR THE FINANCIAL YEAR TO NET CASH INFLOW/(OUTFLOW) FROM OPERATING ACTIVITIES	2019 €	2018 €
	Operating surplus for the financial year	44,715	136,424
	Bank Charges	(14,292)	(13,039)
	Add back purchase of revenue funded fixed asset additions	223,451	256,367
	(Increase)/decrease in stocks	(137,042)	58,665
	Decrease/(increase) in debtors	1,469,278	(3,092,767)
	(Decrease)/increase in creditors and accruals	<u>(850,468)</u>	2,074,670
	NET CASH INFLOW/(OUTFLOW) FROM OPERATING		
	ACTIVITIES	735,642	(579.680)

19. CAPITAL COMMITMENTS

Capital commitments outstanding at the financial year end amounted to €57,736 (2018; €nii).

20.	FINANCIAL INSTRUMENTS	2019	2018
	The carrying values of the company's financial assets and liabilities are summarised by category below:	€	€
	Financial assets Measured at undiscounted amount receivable Trade Debtors (note 13)	<u>1,858,045</u>	<u>2,261,177</u>
	Financial liabilities Measured at undiscounted amount payable Trade Creditors amounts falling due within one financial year (note 15)	<u>1,546,998</u>	2,367,907
	The company's income, expense, gains and losses in respect of financial instruments are summarised below:		
	Interest income on financial liabilities cost (note 7)	<u> </u>	<u>(669)</u>

21. RELATED PARTY TRANSACTIONS

There were no related party transactions during 2019 that require disclosure in the financial statements (2018: Nil). Remuneration for key management personnel and directors' remuneration is disclosed in Note 6.

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

22. PENSIONS

Eligible employees of the Hospital are members of the Voluntary Hospitals Superannuation scheme or since 2013 the Single Public Service Pension Scheme (SPSS). The Voluntary Hospitals Superannuation scheme is a defined benefits pension scheme which is administered, funded and underwritten by the Department of Health. The company acts as an agent in the operation of the scheme and does not make any contributions to the scheme. Contributions are received from eligible employees only.

In accordance with the service plan agreed with the Department of Health, pension contributions received may be offset against pension payments made and the surplus or deficit of contributions each year forms part of the funding for the company.

The directors believe that the funds required in the future to pay current liabilities, as they arise in the future, will be provided by the Department of Health under the Voluntary Hospitals Superannuation Scheme, 1969. The directors have arrived at this opinion having taken into account precedent set on the closure of certain other healthcare facilities in recent years where pension payments (including retirement lump sum payments) have been honoured by the Department of Health.

A new Single Public Service Pension Scheme (Single Scheme) commenced with effect from 1 January 2013. The Scheme applies to all pensionable first time entrants to the Public Service, as well as former public servants returning to the Public Service after a break of more than 26 weeks. Benefits are calculated by reference to "referable amounts" for each year's service that are uprated by the CPI as notified by the Minister. All contributions deducted from members wages/salaries are remitted to the nominated bank account of the Department of Public Expenditure and Reform and not credited to the Profit and Loss Account. In the opinion of the directors, the Department of Public Expenditure and Reform ("DPER") is responsible for this Single Scheme and payments arising under this scheme to retiring employees are payable by the State.

As at the financial year ended 31 December 2019 €26,854 (2018: €Nil) was payable to DPER.

On the basis of the above, the directors believe that it is not necessary for the financial statements of the company to include a liability at the balance sheet date in respect of the pension entitlements accrued to that date by employees of the company, nor the other disclosure requirements of FRS 102 Section 28 - Employee Benefits because the directors believe that the liabilities rest with the Department of Health and the Department of Public Expenditure and Reform. The above issue is similar to that applying in the majority of other publicly funded hospitals in Ireland.

In accordance with the accounting policy, contributions received from employees of €1,642,791 (2018: €1,589,287) were credited to the profit and loss account and pension payments of €3,664,684 (2018: €3,623,139) and lump sum payments of €631,368 (2018: €1,222,124) were charged to the profit and loss account.

23. OPERATING LEASES

The future minimum lease payments under non-canceliable operating leases is as follows:	2019	2018
	€	€
Within one financial year Between two and five financial years Greater than five financial years	244,800 700,400 228,000	244,800 897,200 276,000
	1,173,200	<u>1,418,000</u>

NOTES TO THE FINANCIAL STATEMENTS FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

24. RESTRICTED FUNDS

The restricted funds comprise of donations and fundralsing receipts which are subject to restrictions agreed with the respective fundraising groups. The funds with a closing balance of €166,790 (2018: €210,045) are incorporated into the South Infirmary-Victoria University Hospital's financial statements through a reserve account on the Balance Sheet). The fundraising activity is separately shown on the profit and loss account for the financial year ended 31 December 2019.

25. SUBSEQUENT EVENTS

Since the financial year end there has been a global pandemic outbreak of coronavirus, COVID-19. This has been assessed by the directors and management of the hospital as a non-adjusting event. Given the current level of uncertainty surrounding the event no financial estimate that may arise can be quantified. The directors and management have considered the impact of this event on the hospital subsequent to the financial year end and are confident that the hospital will continue to provide medical services as required and without significant disruption or financial impact.

26. APPROVAL OF FINANCIAL STATEMENTS

The financial statements were approved by the Board of Directors on ___27th April 2020.

SOUTH INFIRMARY – VICTORIA UNIVERSITY HOSPITAL SUPPLEMENTARY INFORMATION

(NOT COVERED BY THE INDEPENDENT AUDITOR'S REPORT)

SCHEDULES TO THE PROFIT AND LOSS ACCOUNT FOR THE FINANCIAL YEAR ENDED 31 DECEMBER 2019

,	2019	2018
	2019	2018
INCOME	·	•
Patient receipts	10,426,665	10,793,255
Health Service Executive determination	58,772,123	58.337.069
	30,17,123	20,337,009
	69,198,788	69,130,324
	03,130,700	09,130,324
Other Receipts		
Salary deductions (pension contributions and levy)	2 042 622	3 460 033
Canteen receipts	2,947,672	3,168,033
Sundry other receipts	312,919	334,305
Car park receipts	2,143,391	2,110,789
Cai park receipts	<u>438,610</u>	<u>440,640</u>
	· -	
	<u>5,842,592</u>	<u>6,053,767</u>
	75,041,380	75,184,091
EXPENDITURE	7-2,0-1,300	73,104,031
Staff costs :		
Salaries and wages (including social security costs)	51,534,623	E1 700 C00
salaries and mages (moldaling social security costs)	31,334,023	<u>51,782,580</u>
OPERATING OVERHEADS		
Surgery and dispensary	15,748,662	15 046 025
Cleaning		15,846,825
Provisions	1,313,464	1,214,057
Light, heat and power	435,772	480,944
Repairs and renewals	586,526	599,523
Administration expenses	1,512,008	1,437,241
Postage	332,414	278,366
Telephone	271,709	286,552
	94,987	87,677
Depreciation of tangible fixed assets	1,758,343	1,651,058
Grant amortisation	(1,758,343)	(1,651,058)
Miscellaneous expenses	1,616,845	1,715,194
Bedding and clothing	29,897	8,355
Bad debts provision	872,104	741,248
Furniture and crockery	58,080	53,478
Insurance	74,714	73,614
Audit, rent and rates	313,247	227,850
Computer charges	<u>201,613</u>	<u>214,163</u>
	23.462.042	22 265 007
	4-4-TU4-U44	<u>23,265,087</u>
Interest payable and similar charges	<u>14,292</u>	12,370
CURRILIC ON ORDINARY ACTIVITIES RESORT		
SURPLUS ON ORDINARY ACTIVITIES BEFORE TAXATION		
INVALIAN	<u>30,423</u>	<u>124.054</u>

MANAGEMENT TEAM / DEPARTMENT HEADS / CONSULTANT STAFF

Chief Executive Officer Chief Finance Officer I.T. & Management Services Manager Human Resources Manager Quality and Risk Manager **Operations Officer Director of Nursing** Scheduled Care Lead for IDPP **Chief Pharmacist** Radiography Manager Physiotherapy Manager Chief Audiologist Dietetic Manager Dietetic Manager Principal Social Worker Speech & Language Therapy Manager Occupational Health Nurse Specialist Occupational Therapy Manager Procurement Compliance Officer Materials Officer Catering & Household Manager Maintenance Officer Portering Services Officer Administration Services Manager Senior Podiatrist **Bookings & Validation Manager** Reception Manager CNM2, Pathology Department

Ms Helen Donovan Mr Liam Thompson Mr Roman J. O'Connell Ms Anita Regan Mr Kieran Murphy Ms Jean O'Sullivan Ms Ruth Lernihan Ms Lynda O'Donnell Ms Nicola Shannon Ms Anne Clerkin Ms Breda Kenny Ms Shane McMahon Ms Anne Hevers Ms Linda Perrott Mr Brian Foley Ms Teresa Hanevy Ms Regina d'Arcy Ms Alleen Ryan Mr Denis Hurley Mr Colin O'Conneil Ms Pauline Hannafin Mr Jim Kennedy Mr Colm Murray Ms Mary O'Farrell Ms Susan Sheehan Mr Al Fogarty Ms Margaret O'Regan Ms Niamh Allen

CONSULTANT MEDICAL STAFF

Dr Anthony Hennessy Dr Clare Murray

Dr Stephen Mannion

Dr Jawad Mustafa

Dr Michael O'Sullivan

Dr John Bourke Dr Michelle Murphy Dr Lesley Ann Murphy Dr Catherine Gleeson

Dr Mary Bennett

Mr Andrew Dias

Mr Mohammad Habib Khan Mr Peter O'Sullivan Prof Patrick Sheahan Mr Daragh Coakley

Dr Matthew Murphy Dr Mark Phelan Dr Michael Regan

Dr Patrick McLaughlin Dr Simon Blake Dr Pauline Smiddy Dr Elena Chirlac Dr Alissa Connors Dr David Hill

Mr Adrian Ireland Ms Deirdre O'Hanion Mr Noel O'Brien Mr Fuad Aftab

Ms Sinead Fenton Mr Anthony Cullinane Ms Sarah Moran Mr Zubair Idrees Mr Eamonn O'Connell Consultant Anaesthetist Consultant Anaesthetist Consultant Anaesthetist Consultant Anaesthetist Consultant Anaesthetist

Consultant Dermatologist Consultant Dermatologist Consultant Dermatologist Consultant Dermatologist Consultant Dermatologist

Consultant Otorhinolaryngologist Consultant Otorhinolaryngologist Consultant Otorhinolaryngologist Consultant Otorhinolaryngologist Consultant Otorhinolaryngologist

Consultant Endocrinologist Consultant Rheumatologist Consultant Rheumatologist

Consultant Radiologist Consultant Radiologist Consultant Radiologist Consultant Radiologist

Consultant Radiologist (Breastcheck)*
Consultant Radiologist (Breastcheck)*

Consultant General Surgeon Consultant General Surgeon Consultant General Surgeon Consultant General Surgeon*

Consultant Ophthalmic Surgeon Consultant Ophthalmic Surgeon Consultant Ophthalmic Surgeon Consultant Ophthalmic Surgeon Consultant Ophthalmic Surgeon

^{*}Not directly employed by SIVUH

CONSULTANT MEDICAL STAFF

Mr Jason Kelly Mr Eoin O'Broin Mr Sean T. O'Sullivan Mr. Michael O'Shaughnessy Mr Jim Clover

Mr Chris Cotter Prof Duncan Sleeman

Mr Mark Dolan Mr Pat Fleming Mr Shane Guerin Prof James Harty Mr Padhraig O'Loughlin Mr Declan Reidy Mr Rehan Gul Mr David Morrissev Mr Colm Taylor Ms Sinead Boran Dr Emer Aherne

Dr John Browne Dr Damian Murphy Dr Wel Lan

Prof Seamus O'Reilly Dr Marie Murphy

Dr Terence O'Connor Prof Mary Horgan Dr Arthur Jackson Mr Michael Harney Dr Derville O'Shea Dr Joan Power Dr Deirdre O'Brien

Prof Richard Greene Prof John Higgins Dr John Coulter Dr Dan McKenna Dr Cathy Burke Dr Minna Geisler Dr Mudathir Abd Elmaboud Dr Mairead O'Riordan Dr Moya McMenamin Dr Fergal McCarthy

Visiting Consultants Prof John Gallagher

Consultant Plastic Surgeon* Consultant Plastic Surgeon* Consultant Plastic Surgeon* Consultant Plastic Surgeon* Consultant Plastic Surgeon*

Consultant Oral & Maxillo Facial Surgeon* Consultant Oral & Maxillo Facial Surgeon*

Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon* Consultant Orthopaedic Surgeon *

Consultant Orthopaedic Surgeon/Paediatrics* Consultant Orthopaedic Surgeon/Paediatrics*

Consultant Orthogeriatrician*

Consultant in Pain Management/Anaesthetist* Consultant in Pain Management/Anaesthetist* Consultant in Pain Management/Anaesthetist*

Consultant Medical Oncologist* Consultant Palliative Care*

Consultant Respiratory Physician* Consultant in Infectious Diseases* Consultant Otorhinolaryngologist* Consultant Otorhinolaryngologist* Consultant Haematologist* Consultant Haematologist* Consultant Microbiologist*

Consultant Gynaecologist* Consultant Gynaecologist*

Occupational Health Physician*

*Not directly employed by SIVUH

2019 HOSPITAL ACTIVITY DETAILS IN-PATIENT AND DAY CASE DISCHARGES

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	In-Patients Discharged	Patient Days	Average Duration of Stay	No. of Day Cases	2019 Total Patients	2018 Total Patients
Surgical	296	872	2.9	4,191	4,487	4,429
Plastics	306	755	2.5	3,275	3,581	3,552
Gynaecology	83	146	1.8	906	989	974
E.N.T.	1,785	5,153	2.9	1,823	3,608	3,338
Orthopaedics	1,651	14,882	9.0	1,616	3,267	3,218
Ophthalmology	495	1,357	2.7	4,218	4,713	4,775
Medical/Rheumatology	0	0	0.0	617	617	667
Medical/Endocrinology	0	0	0.0	319	319	336
Dermatology	78	497	6.4	9,834	9,912	9,945
Oncology	0	2	0.0	3,023	3,023	2,936
Pain Relief	30	37	1.2	3,676	3,706	3,941
Oral & Maxillofacial Surgery	123	<u> 297</u>	<u>2.4</u>	<u>714</u>	<u>837</u>	<u>839</u>
Total	<u>4.847</u>	<u>23,998</u>	<u>5.0</u>	34,212	<u>39,059</u>	<u> 38,950</u>
Comparative figures (2018)	<u>4,871</u>	24,608	<u>5.1</u>	<u>34,079</u>	<u>38,950</u>	

2019 HOSPITAL ACTIVITY DETAILS OUT-PATIENTS

		•				
Service/Clinic	New Patients 2019	Recalled Patients 2019	Total I 2019	Patients 2018	Total No. 2019	of Cilnics 2018
Rheumatology/Medicine	653	1, 6 66	2,319	2,242	202	171
Surgical	2,160	4,068	6,228	6,129	788	766
E.N.T.	8,724	9,314	18,038	17,049	1,382	1,423
Orthopaedics	3,867	7,090	10,957	10,975	1,521	1,459
Pain Relief	502	2,125	2,627	2,549	279	211
Maxillofacial	709	707	1,416	1,511	144	149
Ophthalmology	22	7	29	35	17	22
Gynaecology	505	1,089	1,594	1,730	126	126
Dermatology	6,659	8,439	15,098	14,758	1,551	1,582
ENT Emergency Dept.	1,407	260	1,667	2,066	492	536
Endocrinology/Medicine	269	2,216	2,485	2,306	212	155
Plastics	713	5,192	5,905	5,776	828	752
Oncology	<u>239</u>	2,254	<u>2,493</u>	2.662	120	<u>127</u>
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Total	<u> 26,429</u>	<u>44,427</u>	<u>70,856</u>	<u>69,788</u>	7,662	<u>7,479</u>

2019 HOSPITAL ACTIVITY DETAILS OUT-PATIENTS (CONTINUED)

NOTES

- 1. Emergency Department: ED closed on 29/07/2012, Emergency 24/7 service continues for ENT.
- 2. ENT includes Audiology patients: 2,098 new patients and 1,315 returns.
- Orthopaedics activity includes Physio MSK clinics 345 sessions, 1,127 New and 290 Return patients.
- 4. Rheumatology Activity Includes CCMAC (MSK) clinics 35 sessions, 83 New and 21 Return patients.
- Pain Medicine Activity includes JGSPAIN (MSK) clinics 18 sessions, 91 New and 109 Return patients.
- 6. G.U.M. Clinics: (not shown above)

Attendance at G.U.M. clinic held at the Complex in conjunction with the HSE – Southern Region were:

2019 attendances: 6,961 2018 attendances: 6,551

 Endocrinology 2019 includes Gestational clinic previously not recorded on IPM. 48 Clinics, 54 New, 139 Return.

2019 HOSPITAL ACTIVITY DETAILS OTHER DEPARTMENTS

	2019	2018
PATHOLOGY	No.	No.
No. of patients	60,048	60,528
No. of tests points	154,278	162,644
No. of tests processed	<u>917,301</u>	<u>966,349</u>
RADIOLOGY		
No. of out-patients	25,017	23,767
No. of in-patients	<u>5,733</u>	<u>6,007</u>
Total	<u>30,750</u>	<u> 29,774</u>
OPERATING THEATRE		
General Surgery	4,569	4,611
E.N.T.	3,537	3,064
Orthopaedic	2,346	2,402
Gynaecology	2,263	2,081
Gastroscopies Plastics	1,322	1,334
Ophthalmology	3,708	3,521
Maxillofacial	4,828 <u>1,184</u>	4,907 <u>1,201</u>
· · · · · · · · · · · · · · · · · · ·	4,107	TIEVI
Total	<u>23,757</u>	<u>23,121</u>
SURGICAL MINOR OPS ROOM		
No. of procedures	<u>3,537</u>	<u>3,912</u>
ENT OPD SURGICAL PROCEDURES		
No. of procedures	<u>7.973</u>	4,519
DERMATOLOGY/EXTENDED CARE		
No. of attendances	9,235	<u>8,869</u>
DIABETES CENTRE		
Out-patients	<u>2,687</u>	<u>2,788</u>
Total	2.687	2,788
	£,407	<u> 2,700</u>

2019 HOSPITAL ACTIVITY DETAILS OTHER DEPARTMENTS (continued)

	2019 No.	2018 No.
GYNAECOLOGY/ONCOLOGY		
No. of patients No. of attendances	3,421 7,209	3,463 8.210
DIETICIAN		<u> 111 11 1</u>
No. of cases	<u>4.864</u>	<u>4,812</u>
AUDIOLOGY		
No. of attendances	<u>4,729</u>	4,297
SPEECH & THERAPY		
No. of attendances	<u>4.417</u>	<u>5,782</u>
SEXUAL ASSAULT AND TREATMENT UNIT		
No. of attendances	<u>377</u>	<u>326</u>
REASSESSMENT CLINIC		
No. of attendances	<u>900</u>	<u>911</u>
OCCUPATIONAL THERAPY		
No. of attendances In-patients No. of attendances Out-patients	2,712	2,765
,	<u>2,578</u>	<u>2,467</u>
TOTAL	<u>5,290</u>	<u>5,232</u>
PALLIATIVE THERAPY		
No. of patients	<u>132</u>	<u>134</u>
PRE ADMISSION ASSESSMENT UNIT (PAAU)		
No. of patients	<u>8,961</u>	<u>8,783</u>
PODIATRY		
No. of attendances	<u>1,191</u>	<u>1,362</u>