FINANCIAL STATEMENTS

FOR

ST. JAMES'S HOSPITAL

FOR THE YEAR ENDED 31st DECEMBER 2025

TABLE OF CONTENTS

GENERAL INFORMATION	3
GOVERNANCE STATEMENT AND BOARD MEMBERS REPORT	4-8
AUDITOR'S REPORT	9-11
CERTIFICATION OF CHIEF EXECUTIVE OFFICER AND CHAIRPERSON	12
STATEMENT ON INTERNAL CONTROL	13-17
STATEMENT OF ACCOUNTING POLICIES	18-20
NON-CAPITAL INCOME & EXPENDITURE ACCOUNT	21
CAPITAL INCOME & EXPENDITURE ACCOUNT	22
BALANCE SHEET	23
CASH FLOW STATEMENT	24
NOTES TO THE FINANCIAL STATEMENTS	25-39

GENERAL INFORMATION

Board Members	Catherine Mullarkey (Chairperson) Prof. Juliette Hussey (resigned effective 26th September 2025) Hilary Coates (resigned effective 16th December 2025) Kieran Ryan (appointed as Vice Chairperson 26th September 2025) Garry Burke (resigned effective 27th March 2025) Brian Murray (resigned effective 23rd April 2025) Cllr. Patrick Kinsella Aideen Cardiff Prof. Desmond Fitzgerald Prof. Orla Sheils Cllr. Ciarán Ó Meachair (appointed 26th February 2025) Jonathan Lew (appointed 18th April 2025) Geraldine Ruane (appointed 21st October 2025) Prof. Paul Browne (appointed 24th November 2025) Jenny Fisher (appointed 17th February 2026)
Address	St. James's Hospital James's Street Dublin 8 Ireland D08 NHY1
Telephone Number	01- 4103000
Bankers	Bank of Ireland Group Head Office Baggot Plaza 27-33 Upper Baggot St. Dublin D04 VX58
Auditor	Comptroller and Auditor General 3A Mayor Street Upper Dublin 1 D01 PF72
Solicitors	A&L Goodbody Solicitors 25 N Wall Quay North Wall Quay Dublin 1 D01 H104

GOVERNANCE STATEMENT AND BOARD MEMBERS REPORT

YEAR ENDED 31st DECEMBER 2025

Governance

The Board is required by the St. James's Hospital Board (Establishment) Order 1971, to prepare financial statements for each financial year which properly present the state of affairs of St. James's Hospital and of its income and expenditure for that period. The Board 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. A Code of Conduct for Board members is in place.

The regular day-to-day management, control and direction of St. James's 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 St. James's Hospital. A Schedule of Matters Reserved for approval by the Board is in place together with Delegated Levels of Authority which ensures a clear understanding that defines the delegated thresholds being given by the Board to the Executive.

Board Responsibilities

In preparing those statements, under section 21 of the St. James's Hospital Board (Establishment) Order 1971, the Board is required to:

- select suitable accounting policies and then apply them consistently
- make judgements and estimates that are reasonable and prudent
- disclose and explain any material departures from applicable accounting standards laid down by the Minister of Health, and
- prepare the financial statements on the going concern basis unless it is inappropriate to presume that St. James's Hospital will continue in existence. The Hospital is dependent on adequate annual funding from the Health Service Executive for its continued operation (Page 8).

The Board is responsible for keeping adequate accounting records which disclose with reasonable accuracy at any time the financial position of St. James's Hospital and to enable the Board to ensure that the financial statements comply with the Order and with the accounting standards laid down by the Minister for Health. The Board is also responsible for safeguarding the assets of St. James's Hospital and hence for taking reasonable steps for the prevention and the detection of fraud and other irregularities.
St. James's Hospital operates under a Section 38 Service Level Agreement with the Health Service Executive (HSE) and the nature and range of activities undertaken by the Hospital and funding thereof is agreed with the HSE under the provisions of the Section 38 Service Level Agreement.

The Board considers that the financial statements of St. James's Hospital properly present the financial performance and the financial position of St. James's Hospital at 31st December 2025.

Board Structure

The Board consists of a Chairperson, a Vice Chairperson and nine ordinary members, all of whom are appointed by the Minister for Health. The members of the Board are appointed for a period of five to six years and can be re-appointed thereafter. The Board meets on a regular basis. The table below details the initial appointment date to the board for current members. Kieran Ryan was appointed as Vice Chairperson effective from 26th September 2025.

Board member	Role	Date Appointed
Catherine Mullarkey	Chairperson	14/05/2019
Kieran Ryan	Vice Chairperson	17/11/2022
Cllr. Patrick Kinsella	Ordinary member	12/08/2024
Aideen Cardiff	Ordinary member	12/08/2024

Prof. Desmond Fitzgerald	Ordinary member	11/09/2024
Prof. Orla Sheils	Ordinary member	11/09/2024
Cllr. Ciarán Ó Meachair	Ordinary member	26/02/2025
Jonathan Lew	Ordinary member	18/04/2025
Geraldine Ruane	Ordinary member	21/10/2025
Prof. Paul Browne	Ordinary member	24/11/2025
Jenny Fisher	Ordinary member	17/02/2026

In line with the Code of Practice for the Governance of State Bodies an External Board Effectiveness Review was completed and finalised in Q2 2023 and discussed by the Board. An internal annual self-assessment evaluation of the Board's and its committees was undertaken in 2025, the outcomes of which were discussed by the Board.

Gender Balance in Board Membership

In so far as practicable, the Minister endeavours to ensure that among the members of the Board there is an equitable balance between men and women. For 2025, the Board has met the Government's target of a minimum of 40% representation of each gender in the membership of State Boards.

The Board has established the following Committees:

Audit and Risk Committee: comprised of up to four Board members and one external member in 2025. The role of the Audit and Risk Committee is to support the Board in relation to its responsibilities for issues of risk, control and governance and associated assurance. The Audit and Risk Committee is independent of 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 and Risk Committee reports to the Board after each meeting, and formally in writing annually.

The members of the Audit and Risk Committee in 2025 were: Jonathan Lew (appointed as member 27th June 2025 and as Chairperson 1st October 2025), Aideen Cardiff, Cllr. Patrick Kinsella, Brian Murray (resigned 23rd April 2025), Mary O'Connor (external member, resigned 16th April 2025), Kieran Ryan (resigned as Chairperson 1st October 2025 and as member 12th November 2025) and Joe McQuaid (appointed as external member 28th November 2025). There were eight meetings of the Audit and Risk Committee in 2025.

Finance Committee: comprised of three Board members and two external members in 2025. The purpose of the Finance Committee is to support and provide oversight to the Board and the Executive Management in meeting the Hospital's financial commitments. The Committee is responsible for oversight of all matters relating to the financial affairs of the Hospital encompassing the areas of strategic financial planning, resource management, financial monitoring and policy related issues and to provide timely advice to the Board on areas within its remit.

The 2025 members of the Finance Committee were: Prof. Orla Shiels (appointed as Chairperson 27th June 2025) Garry Burke (Chairperson) (resigned 27th March 2025), Lionel Alexander (appointed as external member 31st January 2025), Jonathan Lew (appointed 27th June 2025), Caroline O'Brien (resigned as external member 25th May 2026) and Catherine Mullarkey. There were five meetings of the Finance Committee in 2025. Geraldine Ruane was appointed as a member on 27th March 2026.

Quality, Safety & Risk Committee: comprised of four Board members and one external member in 2025. The purpose of the Quality, Safety and Risk Committee is to support the Board by ensuring that systems are in place to deliver safe, effective care, to learn from risk and incidents, and to improve quality outcomes for patients.

The 2025 members of the Quality, Safety & Risk Committee were: Kieran Ryan (appointed as member 27th June 2025 and as Chairperson 1st October 2025), Prof. Desmond Fitzgerald, Brian Murray (resigned 23rd April 2025), Cllr. Ciarán Ó Meachair (appointed 28th November 2025), Prof. Juliette Hussey (resigned as board member and member of Quality, Safety & Risk Committee 26th September 2025 and appointed as external member 28th November 2025) and Hilary Coates (resigned 1st October 2025). There were four meetings of the Quality, Safety & Risk Committee in 2025. Prof. Paul Browne was appointed as a member on 27th March 2026.

Nominations Committee: comprised of four Board members. The purpose of the Nominations Committee is to ensure that the Board and its committees have the right mix of skills, experience, independence, and diversity, and that appointments and renewals are managed in a transparent and orderly way.

The 2025 members of the Nominations Committee were: Catherine Mullarkey (Chairperson), Kieran Ryan, Garry Burke (resigned 27th March 2025), Prof. Orla Shiels (appointed 27th June 2025), Hilary Coates (resigned 1st October 2025) and Jonathan Lew (appointed 1st October 2025). There were three meetings of the Nominations Committee in 2025.

Schedule of Attendance, Fees and Expenses

A schedule of attendance at the Board, Audit & Risk Committee and Finance Committee meetings for 2025 is set out below noting that the composition of the Board and its Committees changed during 2025 and accordingly members may not have been in office for all meetings. The schedule of attendance below records the amount of meetings attended by each member out of the number of meetings each member was eligible for . The Statutory Instrument does not allow for payment of fees for Board members. The Statutory Instrument does allow for the reimbursement of appropriate expenses. No expenses were claimed by any Board member during 2025.

	Board	Audit and Risk Committee	Finance Committee	Quality, Safety and Risk Commitee	Nominations Committee
Number of meetings	**7**	**8**	**5**	**4**	**3**
Catherine Mullarkey	7/7	-	5/5	-	3/3
Brian Murray	2/2	3/3	-	1/2	-
Prof. Juliette Hussey	5/6	-	-	3/3	-
Hilary Coates	6/6	-	-	3/3	1/1
Garry Burke	1/1	-	2/2	-	-
Kieran Ryan	6/7	8/8	-	2/2	3/3
Lionel Alexander	-	-	3/5	-	-
Cllr. Patrick Kinsella	4/7	4/8	-	-	-
Aideen Cardiff	6/7	5/8	-	-	-
Prof. Desmond Fitzgerald	7/7	-	-	4/4	-
Prof. Orla Sheils	6/7	-	5/5	-	2/3
Mary O'Connor	-	2/2	-	-	-
Caroline O'Brien	-	-	5/5	-	-
Cllr. Ciarán Ó Meachair	3/6	-	-	-	-
Jonathan Lew	4/5	3/3	2/2	-	2/2
Geraldine Ruane	1/1	-	-	-	-
Prof. Paul Browne	1/1	-	-	-	-

Key Personnel Changes

Key changes in board members are noted on page 4. There were no changes in key management personnel during 2025.

Consultancy Costs

Consultancy costs include the cost of external advice to management and exclude outsourced 'business-as-usual' functions.

	2025	2024
	€'000	€'000
Legal advice	214	141
Public relations/marketing	138	144
IT consultancy	131	430
Building related services	112	24
Human resources and pensions	87	88

Strategic planning and business improvement	69	238
Tax and financial advisory	8	31
Other	24	6
Total Consultancy Costs*	**783**	**1,102**
Consultancy costs capitalised	-	-
Consultancy costs charged to the non-capital income and expenditure account	783	1,102
Total	**783**	**1,102**

Legal costs borne by the hospital are costs incurred in relation to general legal advice received by the Hospital and they are disclosed in Consultancy costs above. Legal costs and services in respect of medical negligence claims are managed by the State Claims Agency without recourse to the hospital.

*Note the presentation of the 2024 comparative figures has been amended in the 2025 financial statements in line with the Code of Practice for the Governance of State Bodies (2016).

Legal Costs and Settlements

There were no legal settlements requiring disclosure in 2025 under the Code of Practice for the Governance of State Bodies (2016).

Key Management Personnel

Key management consists of the Board, the CEO and senior management reporting directly to the CEO, including the Chief Operations Officer and fourteen Director level management personnel. The total value of employee benefits for key management personnel is set out below. Note that no remuneration was paid in relation to the members of the Board during 2025 (2024: €Nil).

	2025	**2024**
	€'000	**€'000**
Salary	2,850	2,853
Total	**2,850**	**2,853**

This does not include the value of retirement benefits earned in the period. The key management personnel are members of either Local Government Superannuation Scheme or Single Public Pension Scheme and their entitlements in that regard do not extend beyond the terms of the model public service pension scheme.

There were no termination payments made to key management personnel during 2025 (2024: €nil).

Hospitality Expenditure

The income and expenditure account includes the following hospitality expenditure:

	2025	**2024**
	€'000	**€'000**
Staff hospitality	97	76
Board hospitality	1	1
Total	**98**	**77**

Travel and Subsistence Expenditure

Travel and subsistence expenditure is categorised as follows:

	2025 €'000	2024 €'000
Domestic		
Board	-	-
Employees	801	779
International		
Board	-	-
Employees	164	84
Total	**965**	**863**

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. St. James's Hospital was in full compliance with the Code of Practice for the Governance of State Bodies for 2025 with the exception of the items listed within the Statement on Internal Control.

Going Concern

The Hospital is funded by means of an annual revenue allocation from the Health Service Executive ("HSE") and remains dependent on adequate annual funding from the HSE to enable it to continue to provide services. The bank-overdraft facility is authorised by the HSE and is utilised throughout the year. The opening budget for 2026 is less than the forecast outturn for 2026.

These conditions indicate the existence of a material uncertainty relating to the events or conditions that may cast significant doubt upon the Hospital's ability to continue as a going concern. The Hospital continues to proactively engage with the HSE and the Minister for Health in respect of the budget for 2026 and the going concern risk that this imposes. The HSE has confirmed its intention to fund the Hospital for 2027 and beyond on the basis of an agreed scope and quantum of services as set out in the annual Service Arrangement.

On behalf of the Board

Date: 31/7/26.

Catherine Mullarkey, Chairperson

Date: 31/7/26

Kieran Ryan, Vice Chairperson

Ard Reachtaire Cuntas agus Ciste
Comptroller and Auditor General

Report for presentation to the Houses of the Oireachtas

St James's Hospital

Opinion on the financial statements

I have audited the financial statements of St James's Hospital for the year ended 31 December 2025 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 non-capital income and expenditure account
- the capital income and expenditure account
- the balance sheet
- the cash flow statement and
- the related notes.

In my opinion, the financial statements

- properly present the state of affairs of St James's Hospital at 31 December 2025 and its income and expenditure for 2025, and
- have been prepared in the form prescribed under section 21 of the St James's Hospital Board (Establishment) Order 1971, and in accordance with the Accounting Standards for Voluntary Hospitals approved by the Minister for Health.

Basis of opinion on financial statements

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 St James's 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

St James's 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.

Non-compliant procurement

The statement on internal control discloses that, in 2025, St James's Hospital continued to incur significant expenditure where the procedures followed did not comply with relevant public procurement guidelines. The hospital's overall procurement of goods and services in 2025 totaled €291 million. Based on a review of a sample of purchases, the hospital has estimated that 14% of its 2025 procurement was non-compliant. The comparable estimated rate of non-compliant procurement in 2024 was also 14%.

Services provided through St James's Hospital employees' company

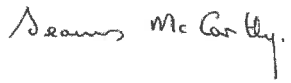
The statement on internal control discloses that in 2025, St James's Hospital paid €514,000 to a company involved in providing certain medical services on an 'in-sourcing' basis. €456,000 of this was not subject to an open competitive process.

The supplier of the services was an unlimited company owned by some members of the hospital's staff.

The statement on internal control refers to actions being taken by the hospital in relation to this procurement, and to in-sourcing and out-sourcing activity in the hospital.

Out-of-time claims to insurers

The statement on internal control also discloses that private insurers rejected or were expected to reject claims by St James's Hospital submitted during 2025 to the value of €259,000, on the basis that the Hospital had not finalised its claims within the required one-year timeframe. €58,000 (22%) of the Hospital's lost claim value was due to patients not having signed required claims forms. The remaining €201,000 (78%) of the Hospital's lost claim value was due to the absence of consultants' signatures.



Seamus McCarthy
Comptroller and Auditor General

31 July 2026

Appendix to the report

Responsibilities of Board members

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

- the preparation of annual financial statements in the form prescribed under section 21 of the St James's Hospital Board (Establishment) Order 1971, 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 St James's 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 St James's 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 St James's Hospital to cease to continue as a going concern.

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

I report by exception if, in my opinion,

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

Information other than the financial statements

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

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

Reporting on other matters

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

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

CERTIFICATION OF CHIEF EXECUTIVE OFFICER AND CHAIRPERSON

FOR THE YEAR ENDED 31st DECEMBER 2025

We certify that the financial statements of St. James's Hospital for the year ended 31st December 2025 as set out herein are in agreement with the accounting records and have been drawn up in accordance with the accounting standards as laid down by the Minister for Health.

The financial statements on pages 21 to 39, which have been prepared under the accounting policies set out on pages 18 to 20 properly present the state of affairs of the Hospital at 31st December 2025 and of its income, expenditure and cash flow for the year then ended.

Signed: _____ Date: 31/7/26

Mary Day, Chief Executive Officer

_____ Date: 31/7/26

Catherine Mullarkey, Chairperson

ST. JAMES'S HOSPITAL BOARD

Statement on Internal Control ('SIC')

Scope of responsibility

1. St. James's Hospital Board acknowledges its responsibility for reviewing and ensuring the effectiveness of the organisation's system of internal controls.

2. The management of the Hospital through the Chief Executive Officer ('the CEO') is responsible for monitoring the system of internal control and providing assurance to the Board.

3. The responsibility takes account of the requirements of the Code of Practice for the Governance of State Bodies 2016 ('the Code').

Purpose of the system of internal control

The system of internal control is designed to reduce rather than eliminate risk and such a system can provide only reasonable and not an absolute assurance that assets are safeguarded, transactions are authorised and properly recorded, and that material errors or irregularities are either prevented or would be detected in a timely manner.

The system of internal control, which accords with guidance issued by the Department of Public Expenditure, Infrastructure, Public Service Reform and Digitalisation, has been in place in St. James's Hospital ('the Hospital) for the year ended 31 December 2025 and up to the date of approval of the financial statements.

Capacity to Handle Risk

The Hospital has an Audit and Risk Committee ('ARC') comprising up to four Board members in 2025 (one of whom is the Chair) and one external member, with financial, audit, risk and ICT expertise. The ARC met eight times in 2025. The Hospital has established an internal audit function which conducts a programme of works agreed with the ARC.

The Board, through its subcommittees, has developed a risk management policy which sets out its risk exposure, the risk management processes in place and details the role and responsibilities of staff in relation to risk. The policy has been issued to all staff members who are expected to work within the Hospital'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

The Hospital has implemented a risk management system which seeks to identify and report key risks and the management actions being taken to address and, to the extent possible, to mitigate those risks.

A corporate risk register is in place which identifies the key risks facing the Hospital, these have been identified, evaluated and graded according to their significance. The register is reviewed and updated by management, considered by the ARC twice per year and presented to the Board. The outcome of these assessments is used to plan and allocate resources to ensure risks are managed to an acceptable level.

The Hospital uses an electronic risk register platform for managing its directorate and department level risks. This risk register details the controls and actions needed to mitigate risks and responsibility for operation of controls assigned to specific staff.

The following is a description of the key procedures, which have been put in place by the Hospital designed to provide effective internal financial control:

1. There is an established organisation structure with clearly defined lines of responsibility.

2. The CEO and her staff have responsibility for the implementation and maintenance of the system of internal financial controls.

3. A devolved budgetary structure is in place, with monthly budget versus actual expenditure reporting mechanism and the identification of accountable officers.

4. The financial procedures of the Hospital include the following:
   - Protocols around segregation of duties.
   - Requirement to comply with Public Procurement Guidelines.
   - A goods and services expenditure authorisation control process which includes Delegated Levels of Authority.
   - Employment vacancy approval process in relation to recruitment.
   - Requirement to comply with government travel and subsistence policies.
   - Requirement to comply with Prompt Payment legislation.
   - Requirement to comply with obligations under tax law.

5. The adequacy of financial controls in place is monitored by the internal audit function on the basis of a detailed audit programme formulated on an assessment of potential risk.

6. A professionally qualified Internal Auditor is head of the internal audit function. The Head of Internal Audit reports to the CEO on administrative and budgetary matters and to the Chairperson of the ARC on all matters relating to internal audit work and reports.

7. An ARC, chaired by a member of the Hospital Board and attended, as required, by senior executive team members , is in place.

8. The Hospital has a Protected Disclosure policy and appropriate procedures in place to enable workers to disclose information in relation to wrongdoing in accordance with the principles and practices authorised in Protected Disclosures Act 2014. A Protected Disclosure Report is published annually on the Hospital's public website.

9. A written Code of Conduct is in place for all employees.

Ongoing Monitoring and Review

Formal procedures which 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. The Board hasconfirmed that the following ongoing monitoring systems are in place:

- Key risks and related controls have been identified and processes have been put in place to monitor the operation of those key controls and report any identified deficiencies.
- Reporting arrangements have been established at all levels where responsibility for financial management has been assigned, and
- There are regular reviews by senior management of periodic and annual performance and financial reports which indicates performance against budget/forecasts.
- All Board subcommittees meet regularly to review areas that fall under their specific remit and to provide advice and feedback to the Board.
- The CEO and Executive Management Group ('EMG') meet as part of normal business every month.

Procurement

The Board has confirmed that the Hospital has procedures in place to ensure compliance with current procurement rules and guidelines. Matters arising regarding controls over procurement are highlighted under internal control issues in the next section.

Public Pay Policy

The Board has confirmed that the Hospital has procedures in place to ensure compliance with public pay policy and the Department of Health Consolidated Pay Scales for the health sector for all employees including the CEO. Matters arising regarding controls over payroll are highlighted under internal control issues in the next section.

Review of Effectiveness

The Board has confirmed that the Hospital has procedures to monitor the effectiveness of its risk management and control procedures. The Hospital's monitoring and review of the effectiveness of the system of internal control is informed by the work of internal and external auditors and the ARC which oversees their work and the senior management within the Hospital for the development and maintenance of the internal control framework.

The Board has confirmed that it has conducted a review of the effectiveness of the internal financial controls at the Hospital for the financial year 2025. The review took into account:

- ARC minutes and reports.
- Recommendations from internal audit review reports.
- Status of the recommendations of previous year's report on the Review of Effectiveness of the System of Internal Control.
- Recommendations from the 2023 external audit management letter.

Internal Control Issues

Set out below is the list of processes where issues in internal controls were identified during the course of the review:

A. Procurement
Excluding salaries, St. James's Hospital incurred annual expenditure of €291m on goods and services during 2025. In March 2026, the Hospital prepared a Procurement Compliance assessment for 2025, based on a sample of goods receipts reviewed, which highlighted a compliance rate of 86% (€254m) by value (2024: €234m, 86%). Please note that this exercise was compiled on a high-level basis and the results have not been fully verified on an audit basis.

A Corporate Procurement Plan for 2023-2025, as envisaged by the Code of Practice for the Governance of State Bodies was approved and adopted in 2023. A revised Corporate Procurement Plan for 2026-2028 was approved and adopted in 2026.

B. Prompt Payments
During 2025, the average days for supplier payments were greater than the required 30-day payment requirement for public bodies to pay suppliers, as per Prompt Payment legislation. This issue was also raised in previous SICs. Challenges such as cash flow pressures and inflationary pressures are identified as the main areas which have impacted the ability to be compliant in the area. The annual review on prompt payments for 2025 will be completed by the Finance Department and presented to the ARC in 2026 accordingly.

C. Risk Management
During 2025, work continued to progress and strengthen Enterprise Risk Management framework in the Hospital. The key actions and improvements were:

- Inclusion of the risk appetite type when risks are raised in the electronic risk register platform.
- All existing risks have had the risk appetite applied to them for consistency.
- Risks escalated to the HSE are now recorded in the internal risk register platform for track and trace purposes, and
- The risk summary report for the Hospital Board refers to open and monitored risks to align with the reporting framework used by the HSE.

An internal audit review was also completed on the risk management framework during 2025. The implementation of recommendations made in this report are tracked through quarterly follow up review process.

D. Fixed Assets
In previous SICs, it was noted that a system of tagging and verifying locations to the fixed asset register, for all fixed assets in St. James's Hospital was in the process of being implemented. During 2025, progress was noted in relation to aspects of the fixed asset register disposals recording process, with further development expected to continue in 2026.

E. Debt Management
In previous SICs, it was noted that improvements were required in relation to the process around debt management. Significant improvements were made in recent years, with further progress achieved in 2025 in relation to one large agency debtor. The Finance Department will continue the efforts to follow up on the remaining outstanding debt in 2026. A write off policy will be finalised in 2026.

F. Stock Management
In previous SICs, issues were noted with regard to the lack of visibility of stock used to the final point of consumption. Notable progress was made in this area in recent years whereby Scan for Safety was rolled out in 9 theatres, South Dublin Surgical Hub and Endovascular Suite by year-end 2025. Scan for Safety was introduced in the day ward theatres on site in Q2 2026 and phase 2 of the project is currently being further developed.

G. Third Party User Access Management
An internal audit review was completed in 2024, in relation to third party user access management, which identified a number of control improvement recommendations in relation to authentication and access management. Progress was made in 2025 which included drafting an IT Vendor Management Policy. A Third-Party Access and Incident Response Plan is in draft and a Cyber Supply Chain Risk Management Strategy is in place.

H. Major Emergency Planning
In previous SICs, it was noted that improvements were required in relation to documenting Event Specific Plans (ESPs) within the Hospital. ESPs have been developed and are held on the Major Emergency Plan web share file, which is accessible to ESP owners. The Hospital's Major Emergency Management Policy has been drafted and IT Business Continuity and Disaster Recovery Plans are in development.

I. Insurance Claim Forfeit
During 2025, claims to an estimated value of €0.259m, in respect of claims for the year ended 31 December 2025, were submitted to a private insurer for payment and were either rejected, or expected to be rejected, on the basis that the fully collated claim forms, as signed off by all participating parties, or the queries arising thereon, were not submitted nor addressed within the required timeframe in accordance with underlying agreements.

This equates to 1% of 2024 private charges. As noted in the 2024 SIC, these submissions are complex and varied in nature, requiring multiple inputs and query resolution prior to payment. Enhanced controls were introduced by the Hospital in 2025 to further support this area.

J. Insourcing and Outsourcing
Insourcing and Outsourcing refers to the practice of engaging third-party providers to deliver Hospital services. Insourcing generally means that the services are delivered using the Hospital's facilities. St. James's Hospital utilises both of these services to deliver certain key activity within the Hospital.

In 2025, €0.514m was paid to one vendor of which €0.456m was not subject to an open competitive procurement process (2024: €1.399m). This vendor is owned by members of St. James's Hospital staff. The use of this vendor, as well as the assignment of work, was approved independently by the Hospital CEO and Chief Operating Officer (COO). The services provided by this vendor were both essential and time-sensitive, primarily supporting follow-up diagnostic procedures for cancer patients in the Hospital. The Hospital provided information on insourcing and outsourcing activity to the HSE as part of a detailed HSE national review in Q2 2025 and implemented the HSE national guidelines on insourcing, issued in Q3 2025.

A tender was completed for a number of the services provided by this vendor in 2024 and the HSE completed the Procurement of the remaining services in Q1 2026.

K. Follow Up Reviews
The implementation status of prior years' recommendations, including the ageing of outstanding actions, was reviewed by the ARC in 2025. Revised target dates were agreed and enhanced tracking arrangements were put in place. This area remains a key focus for the ARC and management.

Prior Year Internal Control Issues

In addition to those prior year issues already addressed, issues were also noted in the 2024 Statement on Internal Control in relation to the following:

- **Cyber security:** The Hospital has continuously highlighted and requested additional funding from the HSE to develop appropriate controls to mitigate cyber security risk. The HSE Office of the CISO has strengthened its capability and resourcing throughout 2025 to provide funding for some specific cyber security initiatives.
  The Hospital continues to highlight the remaining requirements in this area and monitor this risk within its own operations.

- **Vendor Review:** The 2023 SIC highlighted the outcome of a detailed analysis that was completed on a number of vendors providing services to the Hospital in relation to recent case law. This review concluded that a number of individuals, categorised as vendors, were more appropriately classified as providing these services under a contract of service as opposed to a contract for service. As a result, these payments were not aligned to the Department of Health Consolidated Salary Scales. The HSE were notified of these instances and a business case was submitted accordingly. These payments continued to ensure the continuation of this essential service, with the final payment for these services completed in Q1 2026, relating to services provided in 2025. A payment of €0.213m arising from the outcome of this review was finalised in Q4 2025, of which €0.171m related to tax paid to the Revenue Commissioners, with the balance relating to associated interest.
- **Goods receipting:** An internal audit review in 2024 considered the ageing of a number of items within the goods receipts balance in the accounts, which was in turn reviewed as part of the 2024 Financial Statements. Further assessment was finalised prior to completion of the 2025 Financial Statements.

Signed: C. Mullarkey Date: 31/7/26.

Catherine Mullarkey, Chairperson

STATEMENT OF ACCOUNTING POLICIES

1 Accounting Convention

The financial statements are prepared in accordance with the accounting standards for voluntary Hospitals laid down by the Minister for Health.

2 Income Recognition

Revenue grants are received from the Health Service Executive towards the net annual running costs of the Hospital. The amount recognised as income represents the final funding allocation which the HSE confirmed it will make available to the Hospital for the current year, together with the additional superannuation contributions deducted from staff salaries which, by agreement with the Department of Health, are retained by the Hospital.

Patient income is recognised in respect of services delivered to patients who have been discharged from Hospital.

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

3 Fixed Assets

(i) All fixed asset acquisitions, regardless of source of funds, (except if it is less than €3,800 per item out of non-capital funds or computer equipment costing €1,270 or less) in accordance with the accounting standards laid down by the Minister of Health, are capitalised.

(ii) The basis of valuation of the Hospital's fixed assets is as follows:

Land: As advised by the Department of Health.

Buildings: Valuation or cost, less accumulated depreciation.

Equipment: Cost, less accumulated depreciation.

Vehicles: Cost, less accumulated depreciation.

4 Depreciation

Fixed assets are depreciated in compliance with prescribed accounting standards laid down by the Minister for Health. The depreciation, which is matched by an equivalent amortisation of the capitalisation account, is not charged against the income and expenditure account.

Depreciation is calculated at the following rates:

(a) Land: No depreciation

(b) Buildings: 2.5% reducing balance

(c) Equipment:

Medical Equipment	14.3% - 20% Straight Line
Technical Equipment	14.3% - 25% Straight Line
Computer Equipment	33.33% Straight Line

(d) Motor Vehicles: 20% Straight Line

5 Capital Income and Expenditure Account

In line with the Minister for Health's Accounting Standards, funding for all capital projects and the related expenditure is dealt with through the capital income and expenditure account. The balance on this account represents the surplus/deficit of funding of capital projects.

6 Capitalisation Account

The capitalisation account represents the unamortised balance of funds applied for the purchase of fixed assets. The amortisation of this account is matched by depreciation and is not charged to the income and expenditure account.

7 Stocks of Consumable Stores

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

8 Debtors

Known bad debts are written off and appropriate provision is made for any debts which appear doubtful. This provision is computed by reference to an age analysis of all outstanding debts.

9 Pensions

Eligible St. James's Hospital employees are members of various defined benefit superannuation schemes. Pensions are paid to former employees by the Hospital. The Hospital is funded by the state on a pay-as-you-go basis for this purpose. The grant from the State in respect of pensions is included in income. Pension payments under the schemes are charged to the income and expenditure account when paid. Contributions from employees who are members of the schemes are credited to the income and expenditure account when received.

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. Payments from employees are paid over monthly on their behalf to the Department of Public Expenditure, Infrastructure, Public Service Reform and Digitalisation.

No provision is made in respect of accrued pension benefits payable in future years under the pension scheme. This continues to be the treatment adopted by St. James's Hospital Board following the accounting standards of the Minister for Health.

10 Patients' Property

(a) Monies received by the Hospital from or on behalf of long-stay patients for safekeeping are kept in accounts separate from the Hospital's accounts. Such accounts are collectively called the Patients' Property Accounts.

(b) Such monies are not the property of the Hospital and are administered by the Hospital on behalf of the patients.

(c) These funds are held on behalf of the patients in current and deposit bank accounts.

(d) The Hospital incurs some administration costs in connection with these accounts which it does not recoup.

11 Contingent Liabilities

There were no material contingent liabilities at 31st December 2025.

12 Related Parties

Minister for Health

The Minister is a related party of the Hospital as they underwrite the assets and liabilities of the Hospital and appoints the Board.

St. James's Hospital Foundation

St. James's Hospital Foundation Limited was established to raise donations on behalf of the Hospital, to assist in local community fundraising activities and to disburse income received for the benefit of the Hospital. It also manages some research/education funds on behalf of members of the Hospital and departments. The Foundation is a company limited by guarantee and a charity and produces separate financial statements. Note 26 sets out the main transactions with the Foundation in 2025.

The results of the Foundation are not consolidated with the Hospital financial statements on the basis that the Hospital does not exercise control over the activities of the Foundation with control defined as the ability to direct or have the power to direct the Foundation's financial and operating procedures.

13 Research Grants

The Hospital receives funding from a number of sources in relation to research activity. The Hospital incurs costs in relation to these activities. The research income and expenditure are not recognised in the income and expenditure account with the exception of any administration overheads recouped by the Hospital from these funds. Unspent balances are included as a creditor in Note 16 and the related funds are included in bank balances in Note 19.

St. James's Hospital

NON-CAPITAL INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31st DECEMBER 2025

Form 1	Note	2025 € '000	2024 € '000
CUMULATIVE NON-CAPITAL DEFICIT BROUGHT FORWARD FROM THE PREVIOUS YEAR		2,813	15,791
PAY			
Salaries	1	468,664	441,642
Superannuation and Gratuities	1	37,763	31,702
		506,427	473,344
NON-PAY			
Direct Patient Care	1	178,700	164,290
Support Services	1	80,672	70,144
Financial and Administrative	1	31,339	32,550
		290,711	266,984
GROSS EXPENDITURE FOR THE YEAR **Includes deficit brought forward from previous year**		799,951	756,119
INCOME	1	69,312	70,658
NET EXPENDITURE FOR THE YEAR		730,639	685,461
DETERMINATION - Notified for the year from HSE		(732,298)	(682,648)
(SURPLUS) / DEFICIT FOR THE YEAR C/F TO FOLLOWING YEAR		(1,659)	2,813

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 2025 have been included in the Income and Expenditure Account. The net (surplus) / deficit in both years arises from continuing operations.

The financial statements, which include the accounting policies and notes, which were drawn up in compliance with the accounting standards laid down by the Minister for Health, were approved by the Board on 31st July 2026.

On behalf of the Board:

Signed: _____ Dated: 31/7/26

Mary Day, Chief Executive Officer

Signed: _____ Dated: 31-7-26

Catherine Mullarkey, Chairperson

St. James's Hospital

CAPITAL INCOME & EXPENDITURE ACCOUNT FOR THE YEAR ENDED 31st DECEMBER 2025

Form 2	Note	2025 € '000	2024 € '000
CAPITAL INCOME SOURCES			
HSE - Capital Grant		17,424	20,857
Grants Other;			
Cherry Orchard Hospital		-	320
St. James's Hospital Foundation		195	-
TOTAL CAPITAL INCOME		17,619	21,177
CAPITAL EXPENDITURE			
Buildings	13	1,593	1,532
Work-in-Progress	13	12,467	11,689
Equipment	13	9,633	8,239
Vehicles		-	-
Land		-	-
Other		-	-
Capital Expenditure - Capitalised		23,693	21,460
Capital Expenditure - Not Capitalised		734	40
TOTAL CAPITAL EXPENDITURE		24,427	21,500
OPENING (SURPLUS) FROM PREVIOUS YEAR		(15,825)	(16,148)
CLOSING (SURPLUS) C/F TO FOLLOWING YEAR		(9,017)	(15,825)

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 2025 have been included in the Income and Expenditure Account. The net (surplus) / deficit in both years arises from continuing operations.

The financial statements, which include the accounting policies and notes, which were drawn up in compliance with the accounting standards laid down by the Minister for Health, were approved by the Board on 31st July 2026.

On behalf of the Board:

Signed: Mary Day — Dated: 31/7/26

Mary Day, Chief Executive Officer

Signed: C. Mullarkey — Dated: 31/7/26

Catherine Mullarkey, Chairperson

St. James's Hospital

BALANCE SHEET AS AT 31st DECEMBER 2025

Form 3	Note	2025 € '000	2024 € '000
FIXED ASSETS			
Tangible Assets	13	301,245	291,879
		301,245	291,879
CURRENT ASSETS			
Debtors	14	101,848	105,690
Stocks	15	31,972	28,261
Cash in Hand and Bank Balances		8,832	-
		142,652	133,951
CREDITORS - AMOUNTS FALLING DUE WITHIN ONE YEAR			
Creditors	16	(131,976)	(118,733)
Bank Loans and Overdraft		-	(2,206)
NET CURRENT ASSETS		10,676	13,012
TOTAL ASSETS LESS CURRENT LIABILITIES		311,921	304,891
CREDITORS - AMOUNTS FALLING DUE AFTER MORE THAN ONE YEAR			
Bank Loans		-	-
		311,921	304,891
CAPITAL AND RESERVES			
Non-Capital Income & Expenditure Account Surplus / (Deficit)		1,659	(2,813)
Capital Income & Expenditure Account Surplus		9,017	15,825
Capitalisation Account	17	301,245	291,879
		311,921	304,891

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 31st July 2026.

On behalf of the Board:

Signed: _____ Dated: 31/7/26

Mary Day, Chief Executive Officer

Signed: _____ Dated: 31/7/26

Catherine Mullarkey, Chairperson

CASH FLOW STATEMENT
FOR THE YEAR ENDED 31st DECEMBER 2025

Form 4	Note	2025 € '000	2024 € '000
Net Cash Inflow / (Outflow) From Operating Activities	18	24,053	(2,445)
RETURNS ON INVESTMENTS AND SERVICING OF FINANCE			
Interest Paid on Loans and Overdraft		(1)	(118)
Interest Received		-	-
Net Cash (Outflow) / Inflow From Servicing of Finance		(1)	(118)
CAPITAL EXPENDITURE			
Expenditure from HSE Capital (Ref. Capital I&E A/C)		(23,693)	(21,460)
Add back unpaid Capital Expenditure		2,279	716
		(21,414)	(20,744)
Capital Expenditure - Not Capitalised		(734)	(40)
Payments, from Non-Capital, re Acquisition of Fixed Assets (net of trade-ins)		(6,567)	(5,725)
		(28,715)	(26,509)
Net Cash (Outflow) / Inflow Before Financing		(4,663)	(29,072)
FINANCING			
HSE Capital grant received		15,506	22,474
Receipts from Other Sources - Acquisition of Fixed Assets		195	320
Increase in Bank Loans / Borrowings during the year		-	-
		15,701	22,794
Capital element of Finance Lease rental and Loan repayments		-	-
Cash Inflow / (Outflow) from movement in Debt and Liquid Resources		-	-
Net Cash Inflow From Financing		15,701	22,794
Net Cash Inflow / (Outflow)		11,038	(6,278)
Changes in Net Cash / (Debt)		11,038	(6,278)

NON-CAPITAL INCOME AND EXPENDITURE - DETAILS
NOTES TO THE FINANCIAL STATEMENTS
Note 1

	2025 €'000	2024 €'000
PAY		
Management / Administration	47,601	45,248
Medical / Dental I (NCHDs)	53,321	51,466
Medical / Dental II (Consultants)	91,105	84,058
Nursing	154,671	146,087
Paramedical	65,456	59,199
Catering & Housekeeping / Support Services / Porters	51,383	51,079
Maintenance / Technical	5,127	4,505
	468,664	441,642
Pensions & Refunds	28,746	26,914
Gratuities / Lump Sums	9,017	4,788
	37,763	31,702
	506,427	473,344
NON-PAY		
DIRECT PATIENT CARE		
Drugs and Medicines	39,906	36,890
Blood / Blood Products*	58,536	55,614
Medical Gases	598	502
Medical & Surgical Supplies / External Procedures	70,279	67,998
Other Medical Equipment	2,350	2,639
Other Medical Equipment Supplies / Contracts On	7,031	647
	178,700	164,290

*Figure includes €42.1 million (2024: €43.0m) of Clotting Factor Concentrates (CFC) which are used for the purpose of treating coagulation disorders for which St. James's Hospital manages the National Budget following the enactment of the Clotting Factor Concentrates and Other Biological Products Act 2012.

SUPPORT SERVICES		
X-Ray / Imaging Equipment	-	24
X-Ray / Imaging Supplies / Contracts On	4,804	4,607
Laboratory Equipment	1,986	1,271
Laboratory Supplies / Contracts On	26,805	23,069
Catering Equipment	60	63
Catering Provisions / Contracts On	4,791	4,653
Heat, Power & Light	9,009	8,243
Laundry, Cleaning & Washing Supplies / Contracts On	13,054	11,517
Furniture, Crockery & Hardware	936	703
Bedding & Clothing	4,980	2,961
Maintenance Equipment	13	90
Maintenance Materials Supplies / Contracts On	6,102	5,294
Buildings	-	14
Travel & Subsistence	965	839
Transport of Patients	545	476
Vehicles Purchased	-	-
Vehicles Supplies / Contracts On	184	154
Security	6,438	6,166
	80,672	70,144

Note 1 ***(continued)***

	Note	2025 € '000	2024 € '000
FINANCIAL AND ADMINISTRATIVE			
BANK INTEREST			
Overdraft		1	118
Capital Loan		-	-
Bank Charges		47	102
OTHER			
Insurance	2	698	685
Audit		89	81
Legal		214	141
Office Expenses (Rent & Rates, Postage & Telephone, etc.)		6,089	6,861
Office Supplies / Contracts On		473	527
Computer Equipment / Software		5,339	1,395
Computer Supplies / Contracts On		8,262	7,345
Professional Services		4,451	4,715
Bad Debts Written Off		13,027	3,960
Adjustment to Doubtful Debts Provision		(9,509)	1,656
Miscellaneous Expenses	4	2,158	4,964
		31,339	32,550
TOTAL NON-PAY		290,711	266,984
TOTAL GROSS EXPENDITURE		797,138	740,328
INCOME			
PATIENT INCOME			
In-Patient	5	(29,318)	(33,104)
Out-Patient	5	(696)	(711)
		(30,014)	(33,815)
OTHER INCOME			
Superannuation		(9,126)	(9,161)
RTA Receipts		(263)	(115)
Income from External Agencies	6	(19,783)	(18,499)
Canteen Receipts		(949)	(964)
Other Income (Non-Capital)	7	(9,177)	(8,104)
TOTAL INCOME		(69,312)	(70,658)
NET EXPENDITURE		727,826	669,670

INSURANCE
Note 2
OTHER

	2025 € '000	2024 € '000
Public Liability	26	26
Property	507	490
Other	165	169
	698	685

MISCELLANEOUS NON-CAPITAL EXPENDITURE ON CAPITAL PROJECTS
Note 3

		2025 € '000	2024 € '000
Buildings		-	14
Work-in-Progress		-	-
Equipment		6,567	5,711
Vehicles		-	-
	13	6,567	5,725

MISCELLANEOUS EXPENSES
Note 4

	2025 € '000	2024 € '000
Publications etc.	33	39
Membership / Subscriptions etc.	306	289
Interest / Compensation on Late Payments	430	644
Education / Training	858	3,175
Other	531	817
	2,158	4,964

ANALYSIS OF PATIENT INCOME Note 5	2025 € '000	2024 € '000
IN-PATIENTS		
Statutory In-Patient Charges	-	11
Private / Semi Private Charges	(25,077)	(28,968)
Long Stay Charges*	(3,681)	(3,578)
Other In-Patient Charges	(560)	(569)
	(29,318)	(33,104)
OUT-PATIENTS		
Statutory Accident & Emergency Charges	(696)	(711)
	(696)	(711)
TOTAL PATIENT INCOME	(30,014)	(33,815)

* Figure includes €2.7m (2024: €3.0m) billed to the HSE in respect of the Nursing Home Support Scheme.

INCOME FROM EXTERNAL AGENCIES Note 6	2025 € '000	2024 € '000
Pathology	(11,112)	(11,084)
Other*	(8,671)	(7,415)
	(19,783)	(18,499)

* Figure includes €5.3m (2024: €5.3m) billed to the HSE for the provision of mental health services.

OTHER INCOME (NON-CAPITAL) Note 7	2025 € '000	2024 € '000
Car Parking	(1,882)	(1,676)
Pharmacy External Sales	(6,000)	(5,232)
Rents / Licences / Franchises, etc.	(1,228)	(1,120)
Sundries	(67)	(76)
	(9,177)	(8,104)

St. James's Hospital

SUMMARY PAY ANALYSIS (Memorandum Only)
Note 8

	2025 € '000	2024 € '000
Basic Pay	403,916	374,892
Overtime	10,803	11,132
Premium Pay	21,215	19,842
Shift Allowance	397	380
Holiday / Public Holiday Premiums	2,615	2,467
Higher Degree	3	3
Special Nursing	5,273	4,846
On Call / Standby	15,854	15,090
PRSI Employer	44,095	40,573
Travel Allowance	571	1,439
Other**	1,685	2,680
	506,427	473,344

*The total number of staff employed (WTE) at year end was 5,289 (2024: 5,184).
**There were no staff members in receipt of severance payments in 2025 (2024: €Nil).

RECONCILIATION OF EXPENDITURE TO COST OF SERVICES

Note 9

		2025 € '000	2024 € '000
Net Expenditure - Current year	Form 1	730,639	685,461
Deduct			
Purchase of Equipment and Vehicles from Non-Capital	12	6,567	5,725
Total Deductions		6,567	5,725
Sub-Total		724,072	679,736
Add Back			
Depreciation Charge for the year		20,140	18,315
Running Cost of Service		744,212	698,051

ROAD TRAFFIC ACCIDENT MEMORANDUM ACCOUNT
Note 10

	2025 € '000	2024 € '000
Balance at 1st January	1,163	1,402
Bills issued in respect of the year	449	22
Less cash received during the year	(262)	(115)
Less waivers and other write-offs	(179)	(146)
Balance at 31st December	1,171	1,163

St. James's Hospital

STATEMENT OF ADVANCES & BALANCES DUE

Note 11	2025 € '000	2024 € '000
NON-CAPITAL		
Total notified non-capital determination for the year	732,298	682,648
Less: Remittances from HSE Non-Capital in the year	(675,190)	(621,625)
Balance due from HSE in respect of the year	57,108	61,023
Balance due from HSE re previous year(s) as at 1st January	61,023	56,895
Less: Remittances from HSE in year re previous year	(61,023)	(56,895)
Balance due from HSE re previous year(s) as at 31st December	-	-
TOTAL BALANCE OF APPROVED NON-CAPITAL DETERMINATIONS DUE FROM HSE	57,108	61,023
CAPITAL		
Total Capital Grants claimed from the HSE in the year	17,424	20,857
Less: Remittances from HSE Capital in the year	(14,647)	(19,998)
Balance due from HSE in respect of the year	2,777	859
Balance due from HSE re previous year(s) as at 1st January	859	2,476
Less: Remittances (from) HSE in year re previous year	(859)	(2,476)
Balance due from HSE re previous year(s) as at 31st December	-	-
TOTAL BALANCE OF CAPITAL GRANTS DUE FROM HSE	2,777	859
GROSS TOTAL DUE FROM HSE - CAPITAL AND NON-CAPITAL	59,885	61,882

PURCHASE OF EQUIPMENT AND VEHICLES FROM NON-CAPITAL ACCOUNT (Capitalised)

Note 12	2025 € '000	2024 € '000
Other Medical Equipment	2,350	2,640
Laboratory Equipment	1,986	1,272
Catering Equipment	60	63
Maintenance Equipment	13	90
Buildings	-	14
Computer Equipment / Software	2,158	1,622
Vehicles Purchased	-	-
X-Ray Equipment	-	24
Total Non-Capital purchases	6,567	5,725

St. James's Hospital

SCHEDULE OF FIXED ASSETS AND DEPRECIATION

Note 13

	Land	Buildings	Work-in-Progress	Equipment	Vehicles	Other	Total
	€ '000	€ '000	€ '000	€ '000	€ '000	€ '000	€ '000
COST OR VALUATION at 01/01/25	11,239	360,615	12,723	272,956	919	802	659,254
Transfers from Work-in-Progress	-	3,122	(8,823)	5,701	-	-	-
Sub -Total	11,239	363,737	3,900	278,657	919	802	659,254
Additions From Capital	-	1,593	12,467	9,633	-	-	23,693
Additions From Non-Capital	-	-	-	6,567		-	6,567
*Disposals/WriteOff's during the year at Gross Book Value	(476)	-	(278)	(24,147)	-	-	(24,901)
COST OR VALUATION at 31/12/25	10,763	365,330	16,089	270,710	919	802	664,613
ACCUMULATED DEPRECIATION at 01/01/25	-	(125,207)	-	(240,466)	(900)	(802)	(367,375)
Depreciation charge for year	-	(6,003)	-	(14,130)	(7)	-	(20,140)
*Disposals/ Write Off's - Accumulated Depreciation	-	-	-	24,147	-	-	24,147
ACCUMULATED DEPRECIATION at 31/12/25	-	(131,210)	-	(230,449)	(907)	(802)	(363,368)
NET BOOK AMOUNT at 31/12/25	10,763	234,120	16,089	40,261	12	-	301,245
NET BOOK AMOUNT at 31/12/24	11,239	235,408	12,723	32,490	19	-	291,879

*Total write-offs in 2025 amounted to €24.4m, with a net book value of €0.3m (2024: €0.3m; nil net book value)

St. James's Hospital

DEBTORS Note 14		2025 € '000	2024 € '000
HSE - Revenue Grants Due	11	57,108	61,023
HSE - Capital Grants Due	11	2,777	859
HSE Grants		59,885	61,882
HSE and other Voluntary Hospitals		11,284	18,207
LESS: Provision for bad and doubtful debts		(2,161)	(10,577)
		9,123	7,630
Patients (Closing Ledger Balance)		60,436	65,317
LESS: Provision for bad and doubtful debts Patients		(45,614)	(46,454)
		14,822	18,863
Other		20,649	18,365
LESS: Provision for bad and doubtful debts Other		(4,877)	(3,123)
		15,772	15,242
Prepayments		2,246	2,073
		32,840	36,178
		101,848	105,690

STOCKS Note 15	2025 € '000	2024 € '000
Drugs & Medicines	14,629	13,900
Blood and Blood Products	5,678	4,731
Medical Gases	78	57
Medical and Surgical Supplies	7,503	5,587
Pathology Supplies	2,787	2,707
X-Ray / Imaging	72	65
Provisions	122	103
Laundry / Cleaning	305	268
Bedding / Clothing	487	527
Heat / Power / Light Supplies	163	172
Maintenance Supplies	116	116
Office Supplies	32	28
	31,972	28,261

CREDITORS Note 16	2025 € '000	2024 € '000
Creditors - Capital	(4,389)	(2,110)
Creditors - Non-Capital	(66,866)	(62,375)
PAYE,PRSI	(13,432)	(12,894)
Wages and Salaries	(29,964)	(24,785)
Other*	(17,325)	(16,569)
	(131,976)	(118,733)

*Includes grants of €3.6m (opening balance 01.01.2025 of €4.0m, receipts of €0.8m and expenditure incurred of €1.2m) and a balance relating to the National Treatment Purchase Fund (NTPF) of €3.0m (opening balance 01.01.2025 of €3.3m, amounts invoiced to the NTPF of €6.1m and expenditure incurred of €6.4m).

St. James's Hospital

CAPITALISATION ACCOUNT Note 17	2025 € '000	2024 € '000
Balance at beginning of year	291,879	283,061
Additions		
Capital Expenditure	23,693	21,460
Non-Capital Expenditure	6,567	5,725
Sub-Total Additions	30,260	27,185
Less		
Disposals (Cost less Depreciation)	(754)	(52)
Depreciation for the year	(20,140)	(18,315)
Sub -Total Deductions	(20,894)	(18,367)
	301,245	291,879

NOTE TO THE CASH FLOW STATEMENT Note 18	2025 € '000	2024 € '000
Surplus / (Deficit) (Non-Capital)	1,659	(2,813)
Add back Surplus brought forward	2,813	15,791
Surplus for current year	4,472	12,978
Deduct Repayment of Loans and Leases (Capital element) charged against non-capital	-	-
Deduct Interest and Dividend Income	-	-
Add back purchase of equipment from Non-Capital	6,567	5,725
Add back all interest charged against Non-Capital	1	118
(Increase) in Stocks	(3,711)	(5,192)
Decrease / (Increase) in HSE Debtors (Non-Capital)	3,915	(4,128)
(Increase) in HSE Debtors	(1,493)	(1,902)
Decrease / (Increase) in Non-HSE Debtors	3,338	(499)
Increase / (Decrease) in Non-Capital Creditors	10,964	(9,545)
NET CASH INFLOW / (OUTFLOW) FROM OPERATING ACTIVITIES	24,053	(2,445)

ANALYSIS OF CHANGES IN NET DEBT
Note 19

	Balance 1st January 2025	Cash Flow	Balance 31st December 2025
	€ '000	€ '000	€ '000
Cash in Hand and Bank Balances*	-	8,832	8,832
Bank Overdraft	(2,206)	2,206	-
	(2,206)	11,038	8,832
BANK LOANS			
Debt due within one year	-	-	-
Debt due after one year	-	-	-
	-	-	-
	(2,206)	11,038	8,832

*Balance includes €3.6m (2024: €3.8m) relating to research/other grants (Note 16).

RECONCILIATION OF NET CASH FLOW TO MOVEMENT IN NET CASH / (DEBT)
Note 20

	2025	2024
	€ '000	€ '000
Increase / (Decrease) in cash in the year	11,038	(6,278)
Cash inflow / (outflow) from Increase / (Decrease) in debt and lease repayments	-	-
	11,038	(6,278)
New Bank Loans / Borrowings	-	-
Changes in Cash / (Net Debt)	11,038	(6,278)
(Debt) / Net Cash at beginning of year	(2,206)	4,072
Net Cash / (Debt) at end of year	8,832	(2,206)

Note 21 Fund Title	Balance 1st January 2025 € '000	Receipts € '000	Payments € '000	Balance 31st December 2025 € '000
1. Prize Fund Account 1	32	-	-	32
2. Prize Fund Account 2	182	-	-	182
	214	-	-	214

These funds are held under Trust by the Hospital and are properly managed and accounted for. The Trust rules stipulate that the interest received on these deposits may be used for educational purposes such as nurse awards and educational prizes.

CAPITAL COMMITMENTS

Note 22

Capital Commitments at 31/12/2025	Expenditure incurred up to 31st December 2025 € '000	Capital Commitments 1 Yr (2026) € '000	2 - 5 Yrs (2027-2030) € '000	After 5 Yrs (2031) € '000	Total per Project € '000
Land / Buildings	11,369	6,941	180	-	18,490
Equipment	11,495	4,603		-	16,098
Total Contracted	22,797	11,464	15	-	34,276
Total Un-Contracted	67	80	165	-	312
Total	22,864	11,544	180	-	34,588

St. James's Hospital's significant capital projects are in co-ordination and with the approval of projects included in the HSE national capital plan. The capital commitments identified above are in respect to the specific funding approved at 31st December 2025 for these projects.

DIRECTORS FEES AND CEO SALARY

Note 23

	2025 € '000	2024 € '000
Fees & Expenses paid to the Board	-	-
Basic Salary - CEO - As per DOH Salary Scales		
CEO	180	155
Interim CEO	-	31
Total Basic Salary - CEO - As per DOH Salary Scales	180	186
Performance related pay scheme	-	-
Total Payments to CEO	180	186
Total Fees and CEO Salary	180	186

Note 24

	2025 € '000	2024 € '000
Additional Superannuation Contribution*	14,701	13,089
	14,701	13,089

*Additional Superannuation Contribution is payable to the HSE but is retained and forms part of the HSE determination for the year.

St. James's Hospital

SALARY BANDS TABLE

Note 25

Employees' benefits in excess of €60,000 are categorised into the following bands:

Range of total employee benefits From - To	Number of employees	
	2025	2024
€60,000 - €69,999	906	902
€70,000 - €79,999	824	628
€80,000 - €89,999	361	268
€90,000 - €99,999	144	139
€100,000 - €109,999	102	95
€110,000 - €119,999	53	47
€120,000 - €129,999	36	38
€130,000 - €139,999	28	31
€140,000 - €149,999	31	13
€150,000 - €159,999	15	20
€160,000 - €169,999	12	9
€170,000 - €179,999	13	7
€180,000 - €189,999	9	8
€190,000 - €199,999	6	7
€200,000 - €209,999	6	7
€210,000 - €219,999	10	7
€220,000 - €229,999	3	11
€230,000 - €239,999	11	5
€240,000 - €249,999	7	12
€250,000 -€259,999	10	15
€260,000 - €269,999	18	22
€270,000 - €279,999	25	37
€280,000 - €289,999	37	56
€290,000 - €299,999	59	23
€300,000 - €309,999	37	17
€310,000 - €319,999	12	8
€320,000 - €329,999	11	5
€330,000 - €339,999	2	6
€340,000 - €349,999	4	2
€350,000 - €359,999	2	-
€360,000 - €369,999	-	1
€370,000 - €379,999	1	-
€380,000 - €389,999	-	1
€390,000 - €399,999	1	-
Grand Total	2,796	2,447

RELATED PARTY TRANSACTIONS

Note 26

St. James's Hospital Foundation

The Directors of the St. James's Hospital Foundation include staff members of the Hospital. During the year, St. James's Hospital incurred expenditure of €362,000 (2024: €257,000) in relation to wages and salaries for 7 clerical personnel of the Foundation. No balance was outstanding at the end of the year in relation to these expenses.

In 2025, St. James's Hospital invoiced the Foundation for a total of €1,349,091 (2024: €981,789) in relation to the purchase of medical equipment, IT equipment and salary recoupments. At the end of the year, the Foundation owed €19,956 (2024: €16,824) to St. James's Hospital in relation to these funds.

In December 2014, the Foundation entered into an interest free loan agreement with St. James's Hospital for the purpose of furthering the objectives of the Foundation. In 2019, it was agreed that €0.15m would be repaid over a three-year period commencing that year with the remaining balance's payment terms to be agreed in July 2021. Due to the emergence of Covid-19 in March 2020, only the initial payment of €0.05m was made to the Hospital. In June 2022, the Hospital signed a revised agreement with new payment terms with the balance now repayable over a three-year period from 2022-2025. This agreement was revised further in August 2024 with the remaining balance now repayable over a five-year period from 2025-2029.

	2025 € '000	2024 € '000
Opening Balance	263	298
Loan issued	-	-
Loan repayments	(50)	(35)
Amount due	213	263

St. James's Hospital Foundation has the use of facilities within St. James's Hospital free of charge, for which the Hospital pay for the light and heat expenses in respect of these facilities.

OPERATING LEASE

Note 27

	2025 € '000	2024 € '000
Future minimum lease payments fall due as follows:		
within one year	1,518	1,679
later than one year but within five years	6,367	6,854
later than five years	16,999	16,075
Total Operating Lease Commitments	24,883	24,608

The Hospital has an agreement to lease in place with the HSE regarding Hollybrook Lodge, Community Nursing Unit for €5 annual rent. As part of the decant of the Hospital's services to facilitate the building of the National Paediatric Hospital the Hospital entered into three lease agreements. During 2025 €727,750 (2024: €727,750) was expensed to the Non Capital Income & Expenditure Account in relation to these lease payments.

Note 27 (continued)

On the 15th May 2020, the Board of St. James's Hospital approved to execute a membership agreement to support the delivery of a self funding energy upgrade for the Hospital. The agreement facilitates a contract between The Hospital and an ESCo (Energy Services Company/Framework Contractor) to finance, design, construct, install, operate and maintain the Energy Facilities and to provide certain services in connection with the EPC (Energy Performance Contract) over 20 years. (€20,395,567 is included in lease commitments above).

On the 27th November 2020, the Hospital entered into a 15 year lease agreement for office and warehouse space with rental costs of €400,000 per annum. (€3,900,523 is included in lease commitments above).

On the 2nd February 2022, the Hospital entered into a 10 year lease agreement for office space with rental costs of €99,000 per annum. (€587,194 is included in lease commitments above).