

Quality Account

Reporting period April 2022 to March 2023



*because
you matter*

**St Nicholas
Hospice Care**

A Registered Charity No. 287773

Inspected and rated

Outstanding 

 **Care Quality
Commission**

Contents

Our Quality Account provides an overview of our services and information about the quality of St Nicholas Hospice Care's clinical care. This is our opportunity to share with you information about how well we have delivered services in the past year which are safe, effective, caring, responsive and well-led. We also highlight our priorities for the coming year which are based on our Strategic Plan. Some sections and statements in this document are mandatory for inclusion.

Sections	Page
Part One: Introduction	3
Introduction by Chief Executive - Linda McEnhill	3
Board of Trustees, commitment to quality	5
About us: Vision, Mission and Values	8
Part Two: Priorities for improvement and statements of assurance from the Board (in regulations)	9
Future priorities for improvement 2023-2024	9
Priorities for improvement from 2022-2023	14
Manadatory statements of assurance from the Board	17
Part Three: Review of quality performance	21
Quality performance information 2022-2023	21
Quality markers we have chosen to measure	29
Other quality initiatives	33
Statement from Regulators	35

Part One: Introduction

Introduction by Chief Executive

Welcome to our Quality Account for 2022-23, which aims to give patients, families and funders a clear picture of the ways in which we continuously seek to improve and enhance our services, always keeping the patient at the centre of all we do and always driven to align with the Care Quality Commission's (CQC) domains of safe, caring, responsive, effective and well-led.

The account covers a period of significant change at St Nicholas Hospice Care. I took up leadership of the Hospice in December 2021, joining our Clinical Services Director and was followed by Directors of Income Generation and Corporate Services in spring 2022.

Despite the continued financial and recruitment challenges which all hospices currently face, St Nicholas Hospice Care has continued to 'strive for something better' as articulated in the clinical strategy which our Clinical Strategy Group has developed. Underpinning this is our new organisational strategy, which saw a refresh of our Vision, Mission and Values developed with our staff over some months as part of an externally facilitated, continuous improvement programme. We are proud to say that we CARE and that the values of Compassion, Accountability, Respect and Equity are at the heart of all that we do.

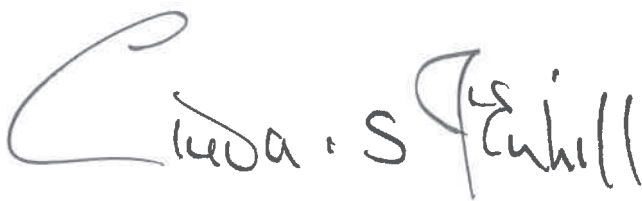
We continue to strive to improve the evidence of our impact in our data and to give our staff, volunteers and service users a voice. So, we are delighted to have relaunched our 'Have your say' stakeholder group within the timescale of this report.

New situations require new skills, and I am proud of our staff who have undertaken training in economic assessment to be able to demonstrate the value and impact of what we do for our beneficiaries, but also in reducing or avoiding costs within the Hospice and for the wider system. New situations also require new models of care and, with a history of striving for something better through innovation, our Bereavement in Care Homes project, which has focused on Covid related bereavement of staff, residents and family members, has resulted in good outcomes for those impacted and a deepened understanding for our staff and volunteers; the work continues.



My thanks are due to all of our staff and volunteers for all that they do to make a difference every single day and our local community and the Integrated Care Board for their continued financial support, which makes all of this possible.

This Quality Account follows the model requirement set out in the regulations by the Department of Health. To the best of my knowledge, the information reported herein is accurate and a fair representation of the quality of care provided by St Nicholas Hospice Care.



Linda McEnhill
Chief Executive Officer



The Board of Trustees, commitment to quality

On behalf of the Board of Trustees, I am delighted to present the 2022-23 Quality Account. I am pleased to see the progress made during the last 12 months, including work on our stated priorities for this period, reported in the Trustees' Report and Annual Account 2021-22.

Our community has once again stood by us this year, providing funds and giving of their time and talents to support their local Hospice.

Donations from individuals, local organisations, businesses and trusts ensured all our services remained available for people who needed them. I am grateful for their commitment and kindness.

I recognise the challenges that continue to affect the health and social care sector generally, and therefore I am grateful for our staff and volunteers' continued commitment and determination to provide exceptional care, they are an inspiration.

The Trustees are required, under the Health Act 2009, to prepare a Quality Account for each financial year as St Nicholas Hospice Care is part funded by the NHS.

The Department of Health has issued guidance on the form and content of the annual Quality Account (which incorporates the legal requirements in the Health Act 2009 and the National Health Service (Quality Account) Regulations 2010 (as amended by the National Health Service (Quality Account) Amendment Regulations 2017).

In preparing the Quality Account, the Trustees are required to take steps to satisfy themselves that:

- The Quality Account presents a balanced picture of the Hospice's performance over the period covered;
- The performance information reported in the Quality Account is reliable and accurate;
- There are proper internal controls over the collection and reporting of the measures of performance included in the Quality Account, and these controls are subject to review to confirm that they are working effectively in practice;
- The data underpinning the measures of performance reported in the Quality Account is robust and reliable, conforms to specified data quality standards and prescribed definitions, and is subject to appropriate scrutiny and review; and
- The Quality Account has been prepared in accordance with Department of Health guidance.

The Trustees confirm that to the best of their knowledge and belief they have complied with the above requirements in preparing the Quality Account.



Charles Simpson, Chair of the Board of Trustees



About Us

St Nicholas Hospice Care is a local independent charity, serving communities within West Suffolk and Thetford. We provide high-quality palliative care to individuals who are nearing the end of their lives, and bereavement support to their significant others and to people in our communities. We place people and their families at the centre of all we do and strive to deliver responsive and accessible care that meets their individual needs and wishes.

In addition to providing care, the Hospice also works to educate and support communities in developing their understanding of end-of-life issues. We help build mutual support and resilience among community members so those facing dying and death can remain independent for as long as possible and do not feel alone.

We work with other health and social care providers to share expertise and advice, and to collaborate on innovative solutions that improve care for individuals and their families.

The services that St Nicholas Hospice Care delivers are always underpinned by our Core Values and the Key Lines of Enquiry (KLOE) set out by the Care Quality Commission (CQC). All decisions we make and processes we develop follow the five KLOEs of Safe, Caring, Effective, Responsive and Well-led.



St Nicholas Hospice Care

Mission, Vision and Core Values

Our vision, mission and values help drive the direction of St Nicholas Hospice Care, providing clarity of purpose and motivation for supporters, volunteers and staff alike.

Vision:

Everyone in our communities has support, dignity and choice when facing dying, death and grief.

Mission:

We strive for something better in the provision of high-quality, specialist palliative care, emotional and practical support, so that no-one in West Suffolk and Thetford has to face dying, death and grief alone.

Values:

Compassion,
Accountability,
Respect
and Equity.

Part Two: Priorities for improvement and statements of assurance from the Board.

This Quality Account primarily centres around assessing the quality aspects of clinical care and the associated support services required for its provision. However, it does not comprehensively include the fundraising and administrative functions of the organisation although these areas are clearly integral to the clinical care and services we provide.

Future priorities for improvement - 2023-2024

The Board of Trustees is dedicated to ensuring the provision of high-quality care that is safe, effective, and tailored to the needs of service users. Additionally, the Board actively promotes the ongoing development and enhancement of the Hospice's services.

The future priorities for improvement have been developed by staff and leaders based on learning and feedback across the St Nicholas Hospice Care Clinical Strategy Group. They have also been shared with the Have Your Say stakeholder group and are identified alongside the Care Quality Commission (CQC) Key Lines of Enquiry indicators, as follows:

- Caring
- Responsive
- Effective
- Well-led
- Safe

The top five priorities for STNH are as follows.

Future priority for improvement one

Data Quality – Using data to support service design and demonstrate patient outcomes.

Why did we identify this priority?

We are aware of the need to improve the quality of our data to demonstrate impact and outcomes and to effectively design services.

How will this be achieved?

We are investing in training to enable our staff to use digital systems effectively. This will enable us to design services in response to population need and demonstrate outcomes and the impact of our services with the development of a dashboard.

How will this be monitored and measured?

A suite of performance indicators and outcomes will be developed to support monitoring of this priority. This will also be monitored at quarterly governance meetings.

Future priority for improvement two

Sustainable Workforce – Use creative solutions and opportunities to develop and deliver the workforce of the future.

Why did we identify this priority?

The workforce challenge across the health and social care sector continues; it is important to consider how we address this issue by ensuring that the Hospice is an employer of choice for those who wish to develop a career in specialist palliative care. We also recognise and value the support of volunteers, who contribute enormously to the organisation and our beneficiaries. We are committed to ensuring that this group receives good support, which recognises their skills and talents.

How will this be achieved?

We will ensure pathways of support for new and prospective staff and volunteers to develop their

careers with us by embedding developmental posts, apprenticeships and access to internal and external career development opportunities. We will ensure that our volunteers are provided with appropriate training opportunities and management support.

How will this be monitored and measured?

Clinical competencies are in development with the support of the Trainee Advanced Clinical Practitioner (ACP). Key Performance Indicators will be confirmed and reported at quarterly governance meetings. We will employ a Volunteer Co-ordinator to support the experience of volunteers who so generously give their time.

Future priority for improvement three

Widen Access – Develop our services on the basis of equity, diversity and inclusion across our community.

Why did we identify this priority?

Our vision confirms our intention to ensure that everyone in our communities has choice, dignity and support when facing dying, death and grief. We want to ensure that this is demonstrated in access to our services.

How will this be achieved?

We will increase the number of beds available on Sylvan Ward, from eight to 12. We will establish an Equality, Diversity and Inclusion (EDI) Group and a Widening Access Steering Group, which will oversee dedicated projects that seek to support individuals and groups currently underrepresented in our services. We will apply an Equality Impact Assessment (EqIA) methodology to the development of all new services to ensure they align with these aspirations and that no one is disadvantaged by the ways that we deliver our services.

How will this be monitored and measured?

This will be reported to our Integrated Care System (ICS) colleagues and to our Board of Trustees.

Future priority for improvement four

Locality Based Hospice Services – Redevelop a sustainable model of support for our beneficiaries, based within the community.

Why did we identify this priority?

Our previous model of day Hospice paused during 2020, at the start of the pandemic, and we have not yet been able to relaunch this support. We are aware of the importance of locality-based hospice care in enhancing community capacity and in building networks of support for people across our communities, for our patients and for the carers who support them.

How will this be achieved?

We will undertake an evaluation of the case for need for these services across our community, beginning with Haverhill and Thetford.

How will this be monitored and measured?

This will be monitored by our Clinical Governance Committee and reported through it to our Board of Trustees on a quarterly basis.

Future priority for improvement five

High Quality Care – Ensure robust clinical governance processes.

Why did we identify this priority?

We have renewed focus upon clinical governance as a result of internal restructuring and changes to reporting processes. We need to ensure that our reporting demonstrates our understanding, anticipation and mitigation of risk, reporting and ensuring learning from incidents.

How will this be achieved?

We will ensure that RADAR, our electronic incident reporting and monitoring system, is embedded across the organisation and that all staff have a good understanding of how to use this to support safe governance processes. We will embed clinical governance duties into key posts

and work to new NHS England Patient Safety Investigatory Response Framework (PSIRF) national guidelines.

How will this be monitored and measured?

Our clinical sub-committees will continue to monitor clinical quality and report to the Board of Trustees each quarter. Our Clinical Services Director will maintain a relationship with the CQC to ensure that they are fully sighted on our position.



Priorities for improvement from 2021/2022

The aim of the Quality Account is not only to look forward by setting future priorities for improvements, but also to look back and evidence achievements on the priorities set for the previous year.

Although this is the first year St Nicholas Hospice Care received a request to produce a separate Quality Account document, the Hospice has routinely undertaken and reported its quality improvement projects in its Trustees' Report and Annual Accounts. The following priorities are taken from the 2021-22 report's future plans section.

Priority improvement one - develop and implement our clinical strategy

Quality Domain: Responsive

How have we met this priority?

Our senior clinical team shared knowledge, skills and inspiration during several sessions, to confirm our aspirations for our clinical services, we termed this our 'North Star' (our ultimate goal and what we aspire to). Building on this we met to confirm our aspirations for the clinical service and developed our priorities for 2023/24.

This has involved a period of restructure and consolidation of senior clinical leadership, which is expected to be completed by November 2023.

Priority improvement two - review our data systems and outputs

Quality Domain: Responsive

How have we met this priority?

We have invested in extended posts within our Clinical Administration Team, reviewing their roles and responsibilities; recognising that administrative support releases clinical time to care. Our Senior Clinical Administrator will be released to complete a Data Driven Professional Programme to further

develop our use of data to support service design.

Priority improvement three - work with staff and volunteers to refresh our values and reinvigorate our culture

Quality Domain: Well-led

How have we met this priority?

All of our staff were consulted on a continuous improvement programme and were asked, which elements of Hospice practices they would like to stop, start or continue. This was followed by a values building away day which was attended by a large proportion of our staff from across the organisation, where discussion and teamwork took place to confirm the values, which felt important to us as colleagues in support of our beneficiaries. These were subsequently confirmed as Compassion, Respect and Equity. Accountability was subsequently added and the acronym CARE agreed as a foundation to support our work.

Priority improvement four - embed a co-production approach to all service development and quality improvement

Quality Domain – Responsive

How have we met this priority?

We have relaunched our Hospice reference group in the form of the Have Your Say Group. This group of local stakeholders meet monthly to learn more about our organisation, to contribute their opinion of the work we do and offer their advice regarding any new work which is proposed. The group now comprises five individuals and is facilitated by an external consultant experienced in this area of work for hospices.

Priority improvement five - train staff in economic evaluation

Quality Domain – Effective

How have we met this priority?

We trained 15 of our staff in economic evaluation and supported them to undertake pieces of quality improvement work. This resulted in five projects including the development of a costed model of responsive community support, to provide extra support for those patients who receive care at home and who require an enhanced level of care for short periods. Our staff are now able to confidently use the model to understand the most effective way to utilise a framework for considering how to fully cost a new service and to be able to demonstrate cost reduction or cost avoidance.



Mandatory Statements of Assurance from the Board

The following are statements that all providers must include in their Quality Account. Many of these statements are not directly applicable to specialist palliative care providers.

The Hospice's clinical model includes the following services:

Core Inpatient Services (Sylvan Ward)

Sylvan Ward has remained open to admissions over the reporting period. With a usual capacity of six to eight patients at a time, the ward supported a total occupancy of up to 10 patients at a time from October 2022 – March 2023, to support seasonal pressures across our Intergrated Care System (ICS). Throughout this period the ward maintained its focus of providing specialist palliative and end-of-life care, working closely with system partners.

Covid-19 – The Sylvan Ward experienced no confirmed outbreaks of Covid-19 during 2022-23, though intermittent cases of Covid-19 were reported across the patient group and staff team. National guidance was followed to maintain safety; and visiting remained in place throughout the period as it did throughout the pandemic, with flexibility demonstrated to ensure individualised care and the robust use of Personal Protective Equipment (PPE).

Out of Hours Advice and Support

Our Sylvan Ward Hospice Nurses provide out of hours clinical support for patients and their families by phone. Nursing advice is given where appropriate; signposting to other services is provided, and our 24-hour access to Palliative Care Consultant support is available.

Community Team Services

Our Community Nursing Team and Independent Living Team aim to provide the highest standard of care for our patients and their loved ones, focusing on their physical, emotional, psychological and spiritual needs. We strive to deliver person-centred and individualised care, which promotes dignity, respect, and comfort throughout a person's experience of palliative and end-of-life care and to deliver this either on Sylvan Ward or in a patient's own home. The team members are appropriately qualified and have completed specialist training to support people, both face-to-face and virtually.

Seamless and well-co-ordinated care is our objective and is secured by working closely with our own multidisciplinary team, our health and social care partners, and external agencies. This support can include advice regarding the management of pain, symptom control and medication adjustments, as well as providing emotional and psychological support. Onward referrals are made to services within and outside the organisation, as required.

Our teams also provide advice and education for families, carers and other health and social care professionals regarding disease progression, treatment options, and available resources. Advance Care Planning is an important part of their work, to ensure that our beneficiaries are supported to make timely and informed decisions around future care preferences.

Hospice Extra Support Team (Virtual Ward)

This team supported patients at home from April 2022 – March 2023, providing Registered Nurse and Hospice Care Assistant support at home for patients during intense periods of need, with a focus on admission prevention and supporting the patient's preferred place of care.

Medical Team

Led by Palliative Care Consultants, our medical team of Hospice Physicians and Junior Doctors work closely with multidisciplinary team members. The medical team's input into community patients has steadily grown over recent years. Collaborative working with West Suffolk Foundation Trust (WSFT) ensures a seamless service for patients; this will develop further as WSFT invests further in palliative care consultant support. The number of trainee doctors hosted by the Hospice has steadily increased in recent years, from one doctor at a time ten years ago (two a year), to four now (eleven over the course of a year), due to the popularity of the Hospice as a training placement.

Spiritual Care and Chaplaincy Team

Our Lead Chaplain reaches across all Hospice teams to support our beneficiaries, including our own staff. This team is well supported by a Volunteer Chaplain Team of 21 individuals, who also provide 24-hour on-call services, as required.

Psychological Services Team

Pre and post bereavement psychological support is offered for adults and children affected by death, loss and grief, at the main Hospice site and in appropriate community settings. This team is also well supported by bereavement volunteers. The team provides individual support online, on the telephone

and face-to-face in the Hospice, in the Haverhill Hub, and in schools to children. Bereavement Café's provide volunteer-led peer support in a variety of locations. Nicky's Way provides support to children through group and individual support, which is also well supported by trained volunteers. The Psychological Services Team also provides bereavement support to staff and facilitates colleagues to manage their wellbeing at work through both training and individual support.

Clinical Education

The Clinical Education Team provides education and training to Hospice nurses, care assistants and volunteers. Training in palliative care is also provided to external health and social care professionals in the community, making appropriate use of the latest clinical evidence and advancing best practice.

Independent Living Team

Our Physiotherapist, Occupational Therapist and Therapy Assistant provide support to enable opportunities for independent living for patients, both in their own homes and on Sylvan Ward. The team also supports non-pharmacological therapies such as developing strategies to reduce anxiety and breathlessness.

Compassionate Communities and Hospice Neighbours

Staff support the Asset Based Community Development model and work to co-ordinate the Hospice Neighbours volunteer service across our community. Hospice Neighbours provides light touch volunteer support to patients and families in the community, offering a range of practical and social help.

Participation in clinical audits

During 2022-23, the Hospice was not eligible to participate in any national clinical audits, Patient Outcome Programmes (NCAPOP) or Clinical Outcome Review Programmes (CORPs). However, St Nicholas Hospice Care regularly participates in Hospice UK Benchmarking Audits.

Local audits

The Hospice is currently engaged in an ICS-wide audit of opioid use across all three hospices (St Nicholas Hospice Care, St Helena Hospice and St Elizabeth Hospice), to ensure safe opioid prescribing and benchmark the average total opioid use on the in-patient unit, to allow comparison between services.

The Hospice also took part in a formal peer review exercise across regional hospices, with a focus on quality outcomes and environment.

Use of CQUIN payment framework

No Commissioning for Quality and Innovation (CQUIN) monies formed part of the NHS contract for 2022-23.

Data quality

St Nicholas Hospice Care has worked hard to improve its data collection and quality. Our clinical services utilise the SystemOne platform, which is in place across the local ICS in most primary care and all community settings. This allows for rapid reporting, interrogation of datasets and enhanced collaborative working across the system.

Cyber security and protection toolkit

All organisations that have access to NHS patient data and systems must use this toolkit to assure that they practice good data security and that personal information is handled correctly. The mandatory items have been completed for submission.

Clinical coding error rate

St Nicholas Hospice Care was not subject to the Payment by Results clinical coding audit during 2022-23 by the Audit Commission. There is currently no payment tariff for the specialist care service.

PART THREE: Review of Quality Performance 2022-23

Core Clinical Services

Sylvan Ward

The in-patient unit supports between six to eight patients with a focus on symptom management, end-of-life care and psychological support. The unit supports a multi-disciplinary model of care, with all professional disciplines valued and encouraged to provide holistic care.

During 2022-23, Sylvan Ward supported 203 patients; a 5% increase from the previous year. The unit remained fully open to admissions despite two periods of increased staff incidence of Covid-19 during July and October 2022. Visiting remained in place throughout in recognition of the importance of our patients maintaining contact with those they love and care for.

In addition to this, Sylvan Ward opened an additional four beds from October 2022 – March 2023, funded by our ICS, to support seasonal planning.

Medical Team

Led by one of our Senior Hospice Physicians, and supported by a Hospice Nurse, we are participating in the national clinical research trial, CHELsea II. This is a cluster, randomised trial comparing the treatment of encouraging/helping the patient to drink, giving regular mouth care, and usual management of symptoms versus giving fluid by a drip in addition to the measures above. Our staff are supportive and interested in this work, for which we will need to recruit 20 patients in total over a two-year period.

The team have also continued to develop a model of family-administered 'Just in Case' medications, leading on this across our ICS and region. In other parts of the UK and across the world it is common practice for family members to be offered the option to be taught to administer medication, to support good symptom control for those dying in their own homes.

This is not something every patient or family would wish to pursue, but for those for whom this is welcome, the additional skills training is valued very highly, and can allow people to support the patient in a very practical way. Work continues to develop this, with plans to widen awareness

amongst the public and patients, educate staff across the whole region, and evaluate the impact upon those who participate in the training.

Hospice Extra Support Team

In April 2022, the Hospice received funding to operate a virtual ward model, which became known as the Hospice Extra Support Team (HEST). This service provided Registered Nurse and Hospice Care Assistant support for patients receiving care at home, who were experiencing periods of intense need, which presented a risk of admission into the Hospice or hospital without additional clinical support.

The service supported a total of 356 patients from April 2022 – March 2023 and based on data analysis, which reviewed the average length of stay of each patient receiving the service, alongside the number of patients cared for who were at risk of inpatient admission, revealed an estimated saving of 620 inpatient bed days over the period of one year.

Demonstrating data such as saving bed days is only one way to articulate the impact of this service, which achieved overwhelmingly positive patient feedback. Unfortunately, this model was unsuccessful in securing ongoing funding, due to system-wide financial constraints. The learning and achievements of HEST have been integrated into our existing community model of care with the provision of a responsive model of community support.

Out of Hours Clinical Advice

The Sylvan Ward staff provide out of hours telephone advice and support for patients across West Suffolk and Thetford. From 6pm-8am, clinical advice is provided by Registered Nurses, with signposting to other appropriate services or further advice secured from an on-call Doctor, or Consultant, as required.

An audit of quality of out of hours telephone calls was undertaken with review of data from August and September 2022. Findings from the audit demonstrated appropriate clinical advice in many cases. Areas of improvement were identified, including to ensure that there is clear follow-up planned and actioned, and the need for additional staff training. This is work that will be led on by the Hospice ACP who has already begun consultation with staff.

Spiritual Care and Chaplaincy (SCC)

The Spiritual Care and Chaplaincy Team are available for all to provide spiritual, religious and pastoral

care, and for being alongside others. The team have a presence in our community by visiting people wherever they call home, be that in their own dwelling or in a care home or supported living setting.

We have invested in resource and now have two bank Chaplains providing an additional 16 hours per month available. In total, the team now has 21 members supporting across all areas of the organisation in various roles, specialisms and locations; this level of visibility is key for those we support and our staff.

Volunteer Chaplains have been hugely impactful, providing 24/7 on-call support to the patients on Sylvan Ward during periods when our Lead Chaplain is unavailable. From 2022-23, they provided out of hours support for patients on 37 occasions. Volunteer Chaplains also regularly participate in Sylvan Ward visiting, providing spiritual, religious and pastoral care for those in our care and those important to them, as well as having a quiet and contemplative presence for our staff.

Our presence in the community is recognised and supported by the Spiritual Care and Chaplaincy Team. Our Lead Chaplain regularly represents the Hospice across our region and encourages initiatives from the light-hearted knitting and crochet work for national events, to hosting Gravetalk, encouraging conversations about life, death, society, funerals and grief. During this period three blocks of Gravetalk sessions took place virtually, each block consisting of a five-week course, as well as seven 'taster sessions', held in person. Our Lead Chaplain has supported bereavement in care homes with the development of 'A Space for Remembering', an opportunity to actively remember those in care homes who are bereaved.

Light Up a Life events which take place towards the Christmas period are significant for our community and the Hospice. Our Lead Chaplain is integral to these community-based events, which provide an opportunity for us to work alongside different faith communities to remember loved ones who have died.

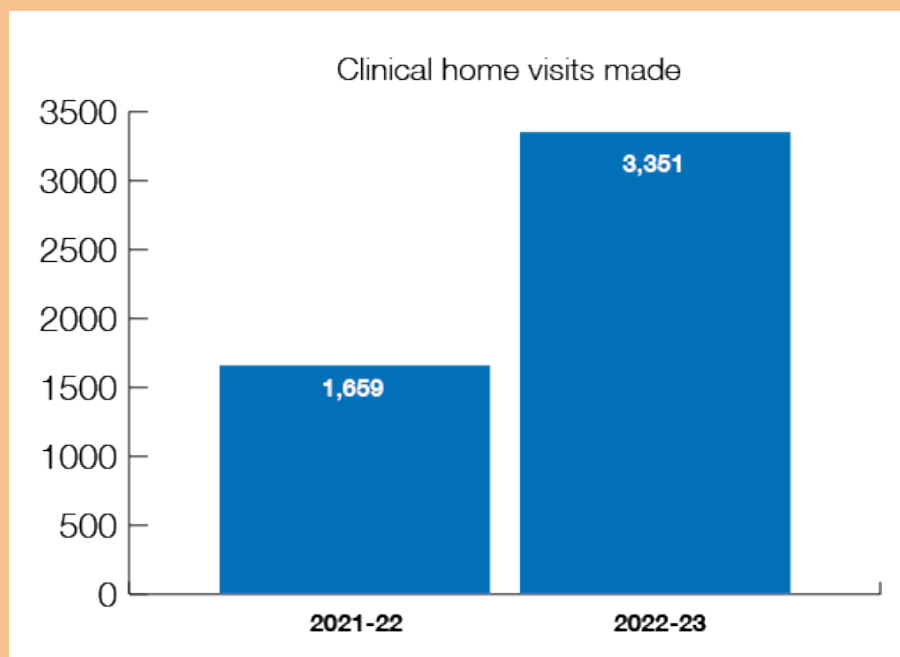
As well as providing training programmes for our Volunteer Chaplains, our Lead Chaplain supports Ministers in Training and individuals exploring hospice care by facilitating Insight Placements.

Community Team

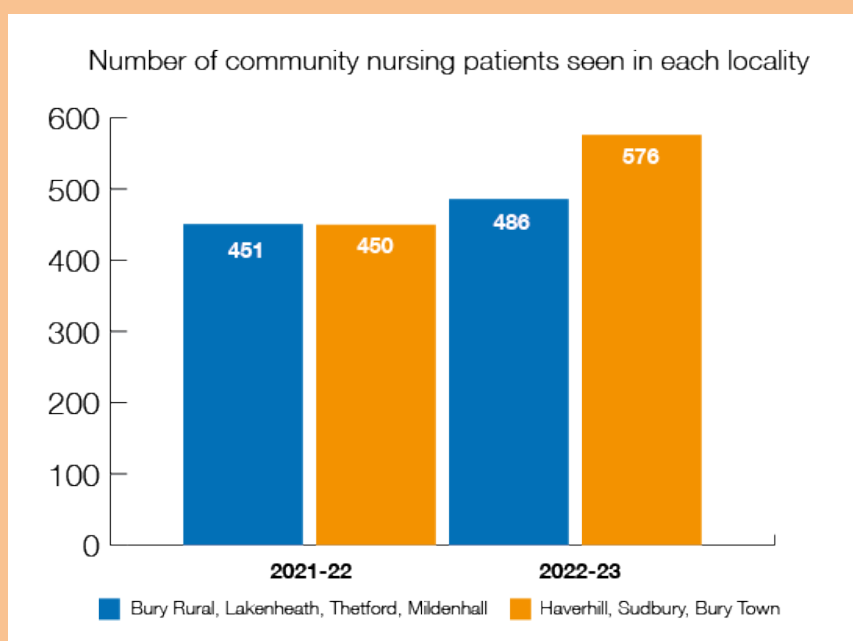
Our Community Team works across two geographical areas, covering the North of our population (Bury Rural, Lakenheath, Mildenhall and Thetford) and the South (Haverhill, Sudbury and Bury Town) of our area. Each team comprises Clinical Nurse Specialists and Senior Hospice Nurses, all of whom carry individual caseloads and work autonomously.

Our teams continue to support patients in several ways, both virtually and in person. The number of in person clinical visits has increased from April 2022 – March 2023 – partly in response to a return

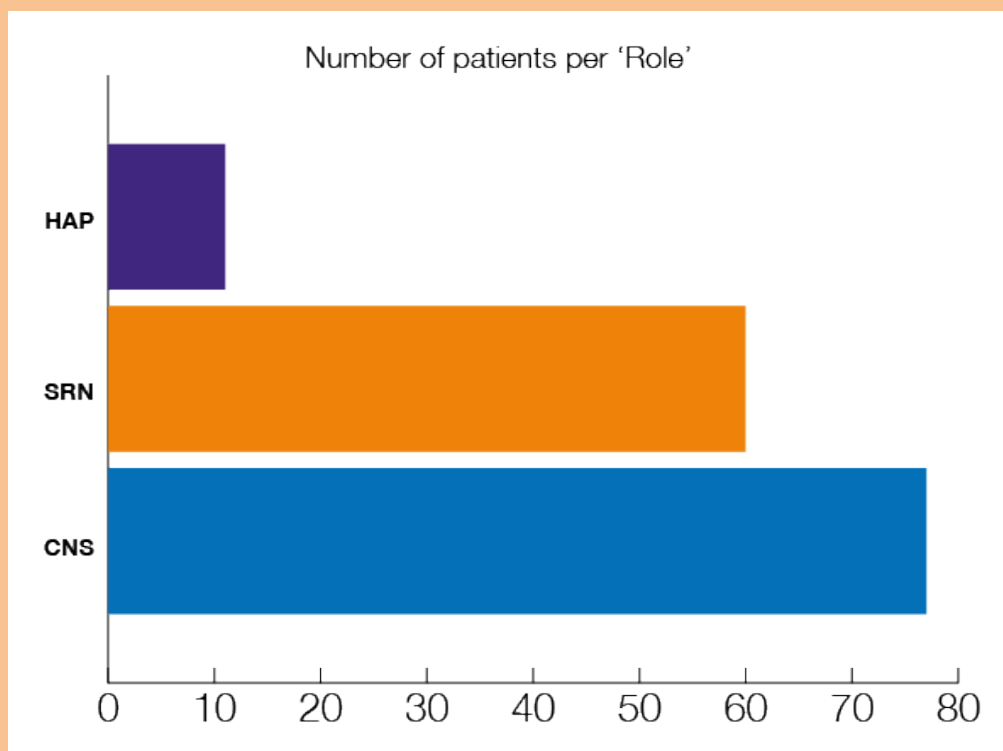
to pre-pandemic practice, and partly due to an increase in the number of people we support with complex needs.



The number of patients across the North and South Teams has increased, more substantially in the South of our population.



A full review of our community caseload was completed during quarter three of 2022/23; to confirm our patient pathways and understand the caseload. We confirmed that the majority of our patients were known to the Clinical Nurse Specialists (CNS), this also confirmed the importance of ensuring that Senior Registered Nurses (SRN) remained a part of the community nursing establishment, as well as the Hospice Assistant Practitioner (HAP).



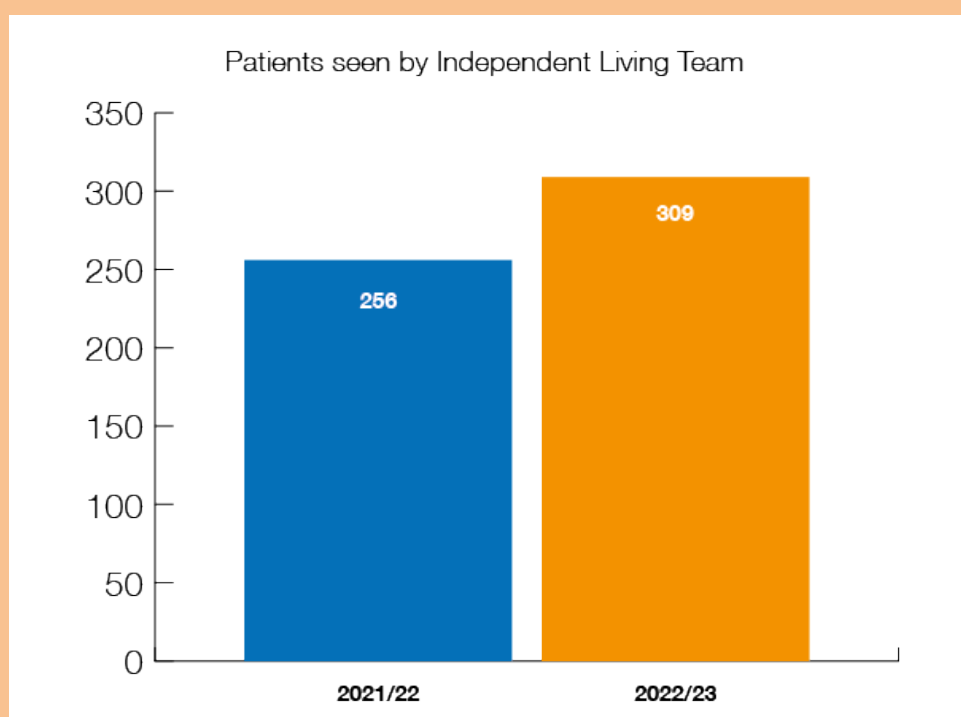
An effective skill mix is demonstrated by the level of patient care delivered by community staff, other than Clinical Nurse Specialists. Senior Hospice Nurses and our Hospice Assistant Practitioner support community patients, with specialist oversight from Clinical Nurse Specialists. Our Trainee ACP and medical team work collaboratively as part of the clinical team to support patient care alongside nursing and therapy staff.

Further work undertaken in co-operation with the workforce analysis tool, Establishment Genie, which supports our workforce planning in response to clinical demand versus available capacity. This has enabled robust understanding of the requirements of the nursing establishment as we progress into 2023-24, to support safer staffing.

Part of the specialist nurse role includes clinical education; a programme of support and education

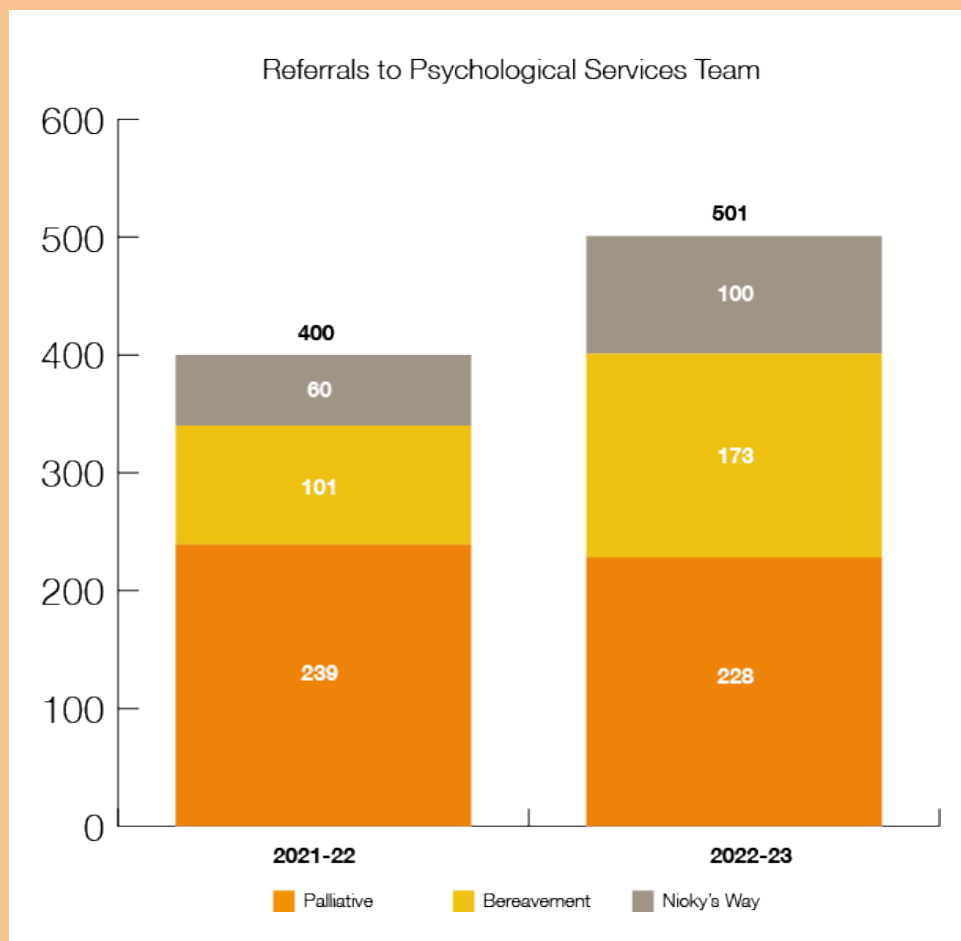
adapted for community nurses was carried out in the Hospice. The face-to-face training offered the opportunity for networking and exploration of existing situations in practice that needed exploring and education to be able to support those patients with increasingly complex palliative care needs, in the generalist setting. The topics included symptom control, supporting difficult conversations, family administration of medications, and opioid dose conversions. Two half-day sessions were offered initially with 14 participants. A subsequent day has been arranged to continue the support of practice.

Our Independent Living Team supported in-patients on Sylvan Ward and in their own homes to support a model of palliative rehabilitation, with understanding of the value of maintaining independence in terms of quality of life, for those with a life-limiting illness.



Psychological Services Team

Our Psychological Services Team have continued to deliver psychosocial and emotional support to our adult and child beneficiaries, observing a 25% increase in referrals overall.



As well as providing specialist bereavement and palliative support, the team have supported an increase in the number of Bereavement Café's across West Suffolk and Thetford, which go from strength to strength. In addition, face-to-face Nicky's Way activities have recommenced, with bereaved children coming together in groups in the form of activity days and a Christmas party, involving simulated snow in the Hospice's garden.

In 2022, the Psychological Services Team also launched a peer support group for bereaved parents of school age children. This group meets in the Hospice building on a weekly basis supporting between four and six parents.

The Psychological Services Team have been part of a small-scale research project with partners, for which additional funds were secured from our ICS. The Bereavement in Care Homes work took staff and volunteer support from across the Hospice into care homes with a focus on supporting residents,

relatives and staff that experienced bereavement during the pandemic. This work was presented at the Hospice UK Conference in Glasgow during November 2022. Entitled 'Bereavement pandemic: developing a multi-intervention model to wellbeing in care home communities', this was well received, with interest expressed by other organisations who were keen to understand the model and outcomes presented. Interventions included reflective practice groups and St Nic's Chat (light touch bereavement support). A range of educational videos have been developed and have been made available to care homes across West Suffolk and Thetford covering subjects including Loss and Grief, Compassion Fatigue and Legacy Activities. As part of this project the Spiritual Care and Chaplaincy Team also provided a space to remember and memorial support.

During 2022, the Psychological Services Team returned to face-to-face in person support both at the main Hospice site, the Haverhill Hub and in local schools.

Psychological Services Volunteers

During 2022, volunteers returned to working in person in greater numbers following the pandemic. The Psychological Services Team held engagement sessions to welcome volunteers back and introduced a monthly reflective practice group and training sessions for volunteers. At the end of March 2023, 21 volunteers were providing palliative or bereavement support.

Education

The Education Team has continued to deliver support to work alongside our clinical teams to deliver training. A Training Needs Analysis of our staff has been undertaken to support planning of future requirements.

During 2022-23, community clinical education returned increasingly to the delivery of face-to-face sessions. Sessions were delivered for professionals with the aim of supporting patient care as follows:

- Mouthcare
- Fatigue Management
- Ideal Patient/Real Patient
- Pressure Area Care
- Communication Toolkit and Difficult Conversations
- Palliative Care Emergencies
- Anxiety Management
- Principles of Palliative and End of Life Care
- Syringe Pump – Practical and Medication
- End of Life Training

Our clinical teams supported 14 clinical students and 16 professionals undertaking 1:1 training/

support sessions in practice, these sessions ranged in duration, from several hours to a number of consecutive weeks.

One of our Clinical Nurse Specialists successfully published a journal article relating to respiratory secretions at the end of life, Beland P (2022) What is the evidence for treating 'death rattle' at the end of life? Nursing Times, Available at: <https://www.nursingtimes.net/clinical-archive/end-of-life-and-palliative-care/what-is-the-evidence-for-treating-death-rattle-at-end-of-life-25-04-2022/> (Accessed: 05.06.23)

To support safe medication practice, we have maintained an approach of collaboration and provided support and education for GPs and Community Nurses across West Suffolk and Thetford. Existing educational resources within the Hospice were reviewed and adapted to support this work based on learning from a clinical incident. The training, delivered by our Trainee ACP and Palliative Care Consultant, consisted of face-to-face and virtual sessions, with over 60 participants in total. Attendees included medical students, GPs, GP Registrars and Advanced Nurse Practitioners. This well-received training continues on a rolling programme, and its efficacy will be the focus of primary research, being undertaken by our Trainee ACP.

Quality Markers we have chosen to measure

Infection Prevention

Infection prevention measures remain subject to regular review, supported by resources produced by Hospice UK. In addition to this, a peer review audit of our inpatient unit took place during July 2022, this was supported by our own staff, colleagues from another hospice, and ICS, and based on planning discussions and agreement on areas of focus. Infection prevention was a key focus of the audit and the unit was acknowledged in terms of cleanliness and the availability of cleaning records. Measures in place were in accordance with guidelines current at the time, with a general awareness of preventative measures. Guidance was provided around ensuring that clinical audit outcomes were displayed for staff and patients to observe – this measure has been addressed.

A further audit with a specific focus on infection prevention was undertaken during January 2023 by ICS colleagues during which 93% overall compliance was achieved. Areas of non-compliance are identified in an Action Plan, which receives ongoing review by the Clinical Services Director, with an aim of completion by August 2023.

Our Covid Risk Assessment was updated regularly in response to the changes presented to the

clinical teams during the year, this included changes to PPE use and staff, patient and visitor testing. The organisation followed national guidance relating to care homes and developed a responsive approach; stepping procedures up and back down, as incidence changed across our locality. Senior clinical managers met on a regular basis to monitor the situation, as required, decisions are noted in an Action Log.

Staff Covid-19 vaccination rates are registered; as an organisation we encourage staff vaccination and support individual decision making should our staff and visitors outside clinical areas wish to continue to use PPE, which is no longer mandated. Our Covid Risk Assessment was updated regularly in response to the changes presented to the clinical teams during the year, this included changes to PPE use and staff, patient and visitor testing. The organisation followed national guidance relating to care homes and developed a responsive approach; stepping procedures up and back down, as incidence changed across our locality. Senior clinical managers met on a regular basis to monitor the situation, as required, decisions are noted in an Action Log.

Clinical Incident Management

During 2022-2023, the organisation moved across to fully embed RADAR into our quality assurance processes. RADAR is well known incident, risk and compliance management software, which allows the organisation to manage governance and compliance issues centrally see <https://radarhealthcare.com>.

All staff are now fully trained to use this system, which supports ease of reporting and investigation as well as details of actions and learning required.

As noted below, three serious incidents were recorded during 2022-2023. Regrettably, all involved patient harm following in-patient falls and were reported to regulatory bodies. Several preventative measures and learning have been embedded as a result of these.

Hospice UK Benchmarking supports understanding of clinical quality outcomes against similar sized organisations nationally, this is reviewed at quarterly governance meetings.

Key clinical quality indicators include falls, pressure ulcers and medication errors, all of which are reported to our Board of Trustees via the quarterly sub-committee meetings.

Falls

Further assistive technology devices have been made available for use on Sylvan Ward as part of our falls' prevention strategy. We strengthened links with external partners and are now part of a falls network, which enables the sharing of good practice. Careful consideration takes place around the most appropriate location in which to nurse those patients who are at high risk of falls, this can at times involve moving patients on Sylvan Ward to maintain safety; we aim to ensure a good understanding of the needs of patients prior to admission in order that this can be managed in a timely way. In addition, the AFLOAT tool was launched, which supports staff with a framework to provide additional levels of support patients for patients who are who are assessed to be at increased risk of falls. https://www.england.nhs.uk/atlas_case_study/development-of-the-avoiding-falls-level-of-observation-assessment-tool/

Pressure Ulcers

Our pressure relieving mattress stock is reviewed regularly to ensure that this remains fit for purpose. Patients are assessed for their risk in regard to pressure ulcers promptly upon admission to Sylvan Ward, and regularly during admission. Alongside the correct pressure relieving equipment, regular repositioning is the intervention most effective to prevent pressure ulcers, this is well managed by Hospice Care Assistants, delegated by Hospice Nurses. We recognise that patients nearing the end of life are at increased risk of developing pressure area damage and careful communication with patients and their families is required to ensure that individualised care is provided at this time. Our staff receive regular updates regarding pressure ulcer prevention and wound care is an area of specific focus for one of our team members.

Medication Incidents

St Nicholas Hospice Care receives support with all aspects of the supply and administration of medication from WSFT. This includes the completion of a quarterly Controlled Drugs audit, for which our WSFT Pharmacist colleague is supported by our Medications Management Link Nurse.

Our Registered Manager is also the Accountable Officer for Controlled Drugs, a further quarterly audit is completed by them and reported to NHS England. They maintain robust links with the Local Intelligence Network and have received support in the management of CD incidents during 2021-22.

Inevitably, medication errors have continued during 2021-22, though remain at a low level with no evidence of patient harm. However, we recognise that low level incidents are still a cause for concern, and we continue to monitor ongoing themes which may support learning in our bid to reduce these. A Medications Management Working Group has been developed to support this work.

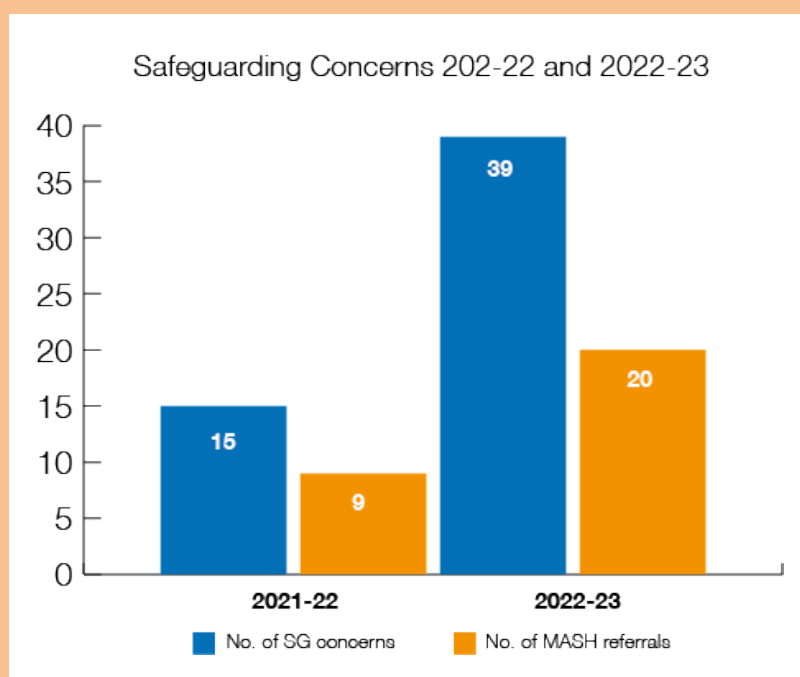
Formal Complaints and Concerns

We recognise that there are occasions when we do not meet the expectations of our patients or their families. We aim to acknowledge these situations in a timely, open and transparent way. We do this by undertaking an investigation into concerns and complaints raised and ensuring that we respond fully and in writing; explaining what may have gone wrong, apologising where necessary and embedding learning into practice.

Safeguarding

Our Safeguarding Leads have worked extensively to ensure that the importance of safeguarding remains high on the clinical quality agenda including developing a safeguarding strategy and safeguarding strategy group. We recognise that safeguarding concerns can be identified by clinical and non-clinical colleagues across our organisation and have encouraged better understanding by regularly sharing safeguarding updates on our internal social media channel Workplace. Safeguarding Leads have developed robust relationships with local authority and health colleagues, and participate in regular forums, which ensure that their learning remains current. Across the organisation, growing awareness of safeguarding issues can be seen by the increased number of safeguarding discussions and onward referral to the Multi-Agency Safeguarding Hub.

Throughout the course of 2022-23, training levels for all staff and volunteers were reviewed in conjunction with the ICS Safeguarding Lead Nurse, and an increased level of training and frequency was provided to ensure high levels of compliance amongst staff across the organisation.



Other Quality Initiatives

Trainee Advanced Clinical Practitioner

In March 2023, we appointed an internal candidate into a new Trainee Advanced Clinical Practitioner role. The clinical nurse has developed her career in specialist palliative care since joining the organisation in 2015. She has been supported by the Hospice to undertake a Master's Degree in Advanced Clinical Practice. This role focuses upon four pillars: clinical practice, leadership and management, education, and research. She has established strong links with the East of England ACP Network, which is supported by Health Education England and is the first Palliative Care Trainee ACP in West Suffolk. Having made excellent progress, she is due to complete this training during 2024.

Sylvan Ward Patient Kitchen

Our Fundraising colleagues were able to support the complete replacement of our Sylvan Ward patient kitchen. This state-of-the-art catering facility allows our catering team to complete meal preparation for patients on the ward itself. It also ensures that, should patients require supplementary snacks or refreshments, our ward staff are able to provide these promptly.

Family Room

Having been repurposed as a PPE store for the period of the pandemic, our Family Room has been refurbished, redecorated and returned to its former glory as a space for families to rest and relax, knowing that their loved one is cared for nearby. This facility boasts comfortable furnishings, refreshment facilities, garden access and a desk with wi-fi access, allowing relatives to work remotely whilst remaining on site.



Volunteers

We recognise the valuable contribution of our volunteers. During the summer and autumn, we engaged with 31 of our volunteers, both online and in person, who responded to the engagement call made by the Directors and Chief Executive Officer. We were able to thank them personally for the work they do and have done, on our behalf to support our beneficiaries. These sessions also provided an opportunity to ask volunteers what is important to them and how they may wish to be recognised. Almost universally, the feedback was confirmed a good use of the skills and experience they bring to their roles.



The Lantern Model

Our Practice Development Clinical Nurse Specialist completed The Lantern Model delivered by St Christopher's Hospice, during Q4. The Lantern Model supports us to revisit the uniqueness of nursing in end-of-life care and encourages nursing staff to consider a framework upon which to build care delivery based on seven components in order to deliver the best possible end of life care.

Our Thanks

We'd like to thank all of those who have contributed, our Quality Accounts for 22-23, this includes the Hospice's Have You Say Group, who kindly provided feedback during the document's production.

Statement from Integrated Care Board

At the time of publication, the ICB has not been able to review to account.

Statement from Healthwatch

At the time of publication, Healthwatch has not been able to review to account.

*because
you matter*

**St Nicholas
Hospice Care**
A Registered Charity No. 287773

St Nicholas Hospice Care Quality Accounts 2022-2023

Contact Us

Please use any of the following details to contact us or provide your feedback.

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01284 766133

Your Experience Survey

We want to develop our services in response to feedback; please consider filling out our survey which is available online or can be requested in paper form.

**[www.stnicholashospice.org.uk
/your-experience-survey](http://www.stnicholashospice.org.uk/your-experience-survey)**



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