

# Quality Account

Reporting period April 2023 to March 2024



*because  
you matter*



**St Nicholas  
Hospice Care**

A Registered Charity No. 287773

Inspected and rated

Outstanding ☆









# 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 that 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.

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# Part one: Introduction

## Introduction by Chief Executive Officer

Welcome to our Quality Account for 2023-24, which aims to give patients, families, the community, 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, effective, responsive and well-led.

This period has been another significant one for St Nicholas Hospice Care (SNHC), covering half of our 40th anniversary year (beginning in August 2023). Inevitably as well as cause for celebration a 40th anniversary is cause for reflection. The conclusion of this organisational introspection is how important it is for SNHC to play its part in the wider health and social care systems. This supports and enables a good death in whichever setting the deceased is found at the end of their lives, and facilitates healthy bereavements for their loved ones. This report outlines some of the ways in which we do this by working out into the community in collaboration with primary care colleagues, with colleagues in the hospital and in other settings such as care homes, schools and prisons. At a system level across the Integrated Care System committees and through providing education or by being involved in research.

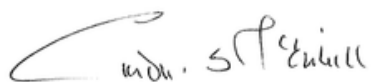
For those people whose need or wish is to be cared for and/or to die in the hospice inpatient unit (Sylvan ward) we have continued to improve our care. We have enhanced capacity, structures and processes and improved the data which demonstrates their impact; it's a work in progress but a good start has been made, and that against a backdrop of continued recruitment and funding challenges.

Our founder, Canon Richard Norburn, 40 years ago, was driven by the conviction that there must be 'something better' for people dying and their loved ones and from that the vision for St Nicholas Hospice emanated.



Sadly, that need has not reduced such that the requirement for SNHC is diminished; by conviction and necessity we continue to 'Strive for something better'. My thanks are due to all those who enable us to continue to serve the communities of West Suffolk and Thetford through their labour (staff and volunteers) through their generosity, financial and otherwise, and through their ongoing support. Amongst those special thanks are due to our new Chair of Trustees, Anne Fisher, who took up post on 30 November and whose extensive experience in governance has strengthened all our endeavours.

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



Linda McEnhill pictured fourth from the left with team behind Thankful event celebrations.



## The Board of Trustees, commitment to quality

On behalf of the Board of Trustees, I am delighted to present the 2023-24 Quality Account.

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 and Social Care 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.

*A Fisher*

Anne Fisher

Chair of St Nicholas Hospice Care's 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 loved ones 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 to develop their understanding of end-of-life issues. We help build mutual support and resilience among community members so that 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 Quality Statements set out by the Care Quality Commission (CQC). All decisions we make and processes we develop follow the Quality Statements: Safe, Caring, Effective, Responsive, and Well-led.





## About us: Vision, Mission and Values

Our vision, mission and values help to 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.

Our clinical aspiration:

- We will strive for clinical excellence in palliative and end-of-life care
- We will see the person we care for, and the life lived, not simply 'the patient'
- We recognise family as part of care – whatever 'family' means
- We aspire to be a multi-disciplinary team which values and respects all roles
- We aspire to be a team which is responsive and accepting of feedback



## Strategic Leadership

We are part of the Suffolk and North East Essex (SNEE) Integrated Care Board (ICB) Die Well Group, which forms part of the ICB Joint Forward Plan. This details the five-year delivery plan for health and care partners to support the improvement of health and wellbeing outcomes for the people of Suffolk and North East Essex. Reducing health inequalities and embedding equity, diversity and inclusion are key priorities within the work.

Within the Joint Forward Plan, key domains have been identified that stretch across the lifespan, including:

- Start Well
- Feel Well
- Be Well
- Live Well
- Age Well
- Die Well

St Nicholas Hospice Care is a key partner in the work of the Die Well domain, with our Director of Care acting as Executive Lead. The focus during this reporting period has been to ensure a co-ordinated approach for end-of-life care delivery, and the early identification of people who may be entering the last year of life.

Working with our partners, we meet monthly to demonstrate our progress towards outcomes, reporting into the wider Integrated Care System (ICS) End of Life Group.



**Celebrating our  
amazing teams**  
on International Nurses  
Day 2024



# 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 2024-2025**

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 are developed and based upon the framework provided by the Care Quality Commission (CQC), which our services are assessed and rated against:

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

Five priorities for improvement were identified for 2023-24, three of these priorities continue in 2024-25 due to their significance to our mission. Their milestones have been updated for the next period.

In addition to this, we include two new priorities for 2024-25. The five priorities, included in the following pages, provide the basis for the hospices Clinical Plan 2024-25.



## Future priorities for improvement: One

### Priority

#### **Sustainable workforce:**

Use creative solutions and opportunities to deliver the workforce of the future.

### Why did we identify this?

- We first identified this in 22-23, the work is significant and continues to develop;
- National workforce challenges across health and social care in England continue;
- We recognise the need to attract and develop skilled staff who can deliver specialist palliative and end-of-life care.

### How will we achieve and measure this?

- We will continue to explore opportunities for our staff to develop their knowledge and skills, via routes such as apprenticeships;
- We will work with partners to explore ethical recruitment of internationally educated colleagues;
- We will continue to provide internal opportunities for professional development;
- We will support the wellbeing of our clinical staff by ensuring that all have access to clinical supervision.

## Future priorities for improvement: Two

### Priority

#### **Widen access:**

Develop our services based on equity, diversity and inclusion (EDI), across our community.

### Why did we identify this?

- We first identified this in 23-24, we recognise that we have more work to do to embed EDI across our organisation;
- Our vision confirms our intention to support everyone in our community who faces dying, death and grief. Access to our services supports this, including the personalisation of care for individuals and their families.

### How will we achieve and measure this?

- We will pilot an out-of-hours visiting service, working closely with the Early Intervention Team;
- We will equip our staff and volunteers to deliver interventions which support people with dementia, including Namaste and Playlist for Life;
- We will continue to develop Locality-based Day Hospice, with the achievement of at least two days service per week in Bury St Edmunds and Haverhill, by Autumn 2024;
- We will review our Compassionate Communities model with the aim to relaunch it;
- We will consider recommendations from primary research to confirm our understanding of EDI, which will contribute to our EDI strategy;
- We will provide data to support evidence of EDI across our beneficiaries and our staff teams.



## Future priorities for improvement: Three

### Priority

#### High quality care:

Deliver the new CQC Assessment Framework.

### Why did we identify this?

- We first identified High Quality Care as a priority in 22-23; palliative care delivery is our core function and remains a priority;
- We recognise the need to demonstrate outcomes which indicate high quality care.

### How will we achieve and measure this?

- We will demonstrate outcomes against the new CQC regulatory framework, utilising the Quality Statements;
- We will self-assess against these outcomes and report to the Board of Trustees each quarter;
- We will fully embed the Patient Safety Investigation Response Framework;
- We will scope the potential to implement Electronic Medication Prescribing Administration on Sylvan Ward;
- We will focus particularly on aspects of care, which our audits indicate require improvement (nutrition and mouthcare).

## Future priorities for improvement: Four

### Priority

#### Support of carers:

Embed a vision of clinical care across our services, which is based upon the person we support and their family.

### Why did we identify this?

- We recognise the significance of caring for carers;
- We hope to inspire our clinical teams to re-focus on the depth and quality of specialist palliative and end-of-life care;
- We will use our learning from the Hospice Extra Support Team to meet the needs of people in their own homes.

### How will we achieve and measure this?

- We will adopt the concepts within The Lantern Model to realise the impact of skilled nursing care;
- We will share our vision with the team by holding regular team and learning events;
- We will embed a model of care that includes the offer of planned respite to Sylvan Ward;
- We will embed a model of Hospice@Home community support, with a focus on Health Care Assistant support, to enable people to remain in their home, if they wish.



## Future priorities for improvement: Five

### Priority

#### **Improved outcomes and performance data:**

We will continue to develop our ability to collect and use data to inform our community of user outcomes.

### Why did we identify this?

- We are accountable to our community; we recognise the need to demonstrate success and understand areas that require improvement.

### How will we achieve and measure this?

- We will work with our ICB to confirm key performance indicators for regular reporting;
- We will review our use of the Integrated Palliative care Outcome Scale (IPOS);
- We will continue to input into the Hospice UK benchmarking work;
- We will participate in the 2024 Association of Palliative Care FAMCARE audit, measuring the experience of bereaved relatives.

## Infection Prevention and Control Annual Statement

### 2023-24

St Nicholas Hospice Care (SNHC) is committed to the control of infection across our main site and in relation to the clinical procedures carried out within it, including our Sylvan Ward. We recognise the importance of adhering to infection prevention guidelines when delivering care. This statement has been produced in line with the Health and Social Care Act, 2008, and details the Hospice's compliance with guidelines on infection control and cleanliness between the dates of 01/04/23 and 31/03/24.

- Infection Prevention Control (IPC) Lead for SNHC is Sharon Basson, Director of Care;
- IPC Deputy for SNHC is Pippa Wilding, Head of Nursing and Quality

This statement will be produced and included in the SNHC Quality Accounts annually, and will summarise:

- Any infection transmission incidents and actions taken;
- Details of IPC audits/risk assessments undertaken, and action completed;
- Details of staff training;
- Details of IPC advice to patients;
- Any review or update of IPC policies and procedures, including clinical guidance.

#### IPC incidents

One incident occurred during this reporting period. A person being cared for on the Sylvan Ward became infected with Covid-19. No staff occurrence was involved at this time. Open visiting was in place as it is our priority for this group of patients. Usual infection prevention measures for this situation were initiated and the occurrence was contained.



In order to ensure ease of reporting, we have updated internal processes to ensure that infectious diseases are recorded as clinical incidents to include:

- Covid-19
- MRSA bacteraemia
- Norovirus
- Influenza
- Clostridium Difficile.

Any outbreaks are reported to the UK Health Security Agency (UKHSA) East of England Health Protection Team.

Suffolk and North East Essex Integrated Care System (ICS) colleagues also provide infection prevention and control advice.

### **Staff training**

All staff are required to undertake annual Infection Prevention and Control Training, this is currently provided by elearning for healthcare, an NHS England programme. Our current compliance rate (April 2024) is 70 per cent.

We are also able to access training opportunities via our membership of the ICS Infection Prevention Collaborative, we will utilise this during 2024-25.

Staff are encouraged to raise concerns regarding safe infection prevention practice with their line-managers, and to positively challenge poor practice in the moment.

### **IPC audits**

Quarterly IPC audits are completed, as per the Hospice UK clinical audit benchmarking cycle. Outcomes are reported via usual governance structures.

### **IPC advice for people using our service**

We review national guidance regularly and update this locally, as required. Guidance is available on our website and displayed at the entrance to the Sylvan Ward.

## Covid-19 response

The following actions have been implemented in response to Covid-19 to maintain the safety of patients, families, staff and volunteers:

- National hospice specific guidance is followed, local guidance is updated promptly to reflect any changes in process;
- Staff are encouraged to dynamically risk assess to maintain safety;
- Personal Protective Equipment is readily available;
- Handwash facilities are available, community staff are provided with hand gel for use in people's own homes, if required;
- Visitors to the Hospice are provided with information, displayed for ease of reference.

## Risk assessments

Risk assessments are undertaken when required, this includes a Covid-19 risk assessment.

In addition, our Estates and Facilities Team complete the following safety audits:

Safety audit	Frequency
Tap flushing and bath checks	Weekly
L8 Legionella temperature checks	Monthly
Cleaning audits	Regular intervals within a calendar month
Control of Substances Hazardous to Health (COSHH)	Every six months, or when a new product is introduced (domestic cleaning product)

## Infection Prevention and Control (IPC) Policy

Our IPC Policy is currently under review, it remains accessible during this process.

## Priorities for improvement from 2023-2024 - how we performed against our targets

### Future priorities for improvement: One

#### Priority

##### Quality Domain - SAFE

##### Data Quality

Using data to support service design and demonstrate clinical outcomes.

#### How have we met this priority?

- We secured specialist support to review and enhance our SystmOne (electronic clinical record) provision;
- We relaunched our SystmOne Group to ensure that we plan and deliver robust training for our staff;
- We are supporting a team member to commence a Data Technician apprenticeship via the Hospice UK and Corndell Data Academy;
- We have recommenced submission of the Hospice UK benchmarking data;
- We have implemented service improvements to our community nursing process to increase effectiveness, including the issue of 5G sim cards to support mobile working.



## Future priorities for improvement: Two

### Priority

#### Quality Domain - EFFECTIVE

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



### How have we met this priority?

- We supported a non-clinical colleague to begin a Return to Practice (Registered Nursing) pathway, in collaboration with Anglia Ruskin University;
- As well as enabling attendance at local, regional and national conferences, we supported a number of staff to participate in academic and vocational pathways, which support professional development and enhance knowledge, skill and understanding. These included:
  - Senior Healthcare Support Worker Level 3 (Adult Nursing) Apprenticeship, in collaboration with West Suffolk College
  - MSc in Voluntary Sector Management, with Bayes Business School, City, University of London
  - Manual Handling training, with Worksafe Training and Consultancy Ltd
  - MSc Advanced Clinical Practice, with University of Suffolk
  - Uprising Leadership Training, with Allitus
- We supported two staff members to complete the Resilience-based Clinical Supervision training funded by Hospice UK and facilitated by the Foundation of Nursing Studies;
- We developed a Workforce Task and Finish Group who delivered a targeted and successful approach to recruitment;
- We held a Recruitment Open Event at our main site, which was attended by 50 individuals and resulted in the recruitment of a Registered Nurse and a Bank Health Care Assistant for the Sylvan Ward.



We supported Heather Warren, a fundraising colleague, to begin a Return to Practice (Registered Nursing) pathway, in collaboration with Anglia Ruskin University.



## Future priorities for improvement: Three

### Priority

#### Quality Domain - EFFECTIVE

- Widen Access
- Develop our services on the basis of equity, diversity and inclusion (EDI) across our community.

### How have we met this priority?

- We maintained our EDI training rate at 93%, year-on-year.
- We began a primary research programme to establish our understanding of EDI across our organisation;
- We temporarily increased capacity on the Sylvan Ward on four separate occasions to widen access to this service, in response to the needs of our community;
- We developed a successful proposal to secure recurrent funding from the Better Care Fund to increase the number of Sylvan Ward beds on a permanent basis;
- We have developed our relationship with leaders at Highpoint Prison, with aim of ensuring that connections are made with specialist organisations which support health services in prisons;
- We embedded the Tier 1 Oliver McGowan Mandatory Training OMMT into our mandatory training programme, 73% of our clinical staff have completed this.



## Future priorities for improvement: Four

### Priority

#### Quality Domain - RESPONSIVE

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

### How have we met this priority?

- We have launched Clinical Nurse Specialist and Advanced Clinical Practitioner outpatient clinics in Thetford and Haverhill;
- We have launched a Complementary Therapy Service in the Orchard Corridor at the Hospice's Hardwick Lane site;
- We have used our learning from the Hospice Extra Support Team to plan a Hospice@Home provision, based on the support offered by our Healthcare Assistants.

## Future priorities for improvement: Five

### Priority

#### Quality Domain - SAFE

- High Quality Care
- Ensure robust clinical governance processes.

### How have we met this priority?

- We have continued to embed RADAR across the organisation and ensured that all staff understand this;
- We have embedded clinical quality responsibilities into new senior posts;
- We have redesigned our governance reporting processes, to ensure that they work well for us;
- We are members of the ICB Quality Collaborative and Patient Safety Collaborative;
- We have used our networks of support to develop our draft Patient Safety Incident Response Framework (PSIRF) Plan and draft Policy;
- We continue to maintain our relationship with the Care Quality Commission (CQC) through usual processes and direct monitoring.

## **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 Services**

#### **Sylvan Ward**

The Sylvan Ward provides specialist care, primarily for individuals whose needs include symptom management or end-of-life care. Usual capacity is six beds, though on occasion it has been possible to increase this capacity, should our community require this.

The Sylvan Ward is supported by a full multi-disciplinary team who work together to ensure the most holistic and seamless care possible for the people we support, this includes nursing, medical, therapy, psychological support, chaplaincy and spiritual care.

#### **Out of hours advice and support**

We provide 24/7 support and advice. During out of hours periods (6pm-8am) this advice is provided by our Sylvan Ward nursing team, with further specialist support available from our medical team. Our Palliative Care Consultants work across the region to deliver the Consultant on Call provision. Our Sylvan Ward nursing team works with overnight providers including the West Suffolk Foundation Trust's Early Intervention Team, with whom we have close links.

#### **Community Palliative Care Service**

The Community Palliative Care Team includes nursing, medical and therapy support for people in the place they call home. Providing care in a person's home enables our team to start to develop the therapeutic relationship and may be a starting point for understanding the expectations and wishes of people who are approaching the end of



their life. This care is often in close collaboration with other health and social care providers, such as district nurses.

As well as receiving advice and support with symptom management, the people who are known to our Community Team are encouraged and supported where possible, to plan for the end of life with open discussion, enabling the development of an advance care plan. This plan can include the wish to receive end-of-life care at home, or if this is not possible, discussion can take place about the potential to visit the Sylvan Ward to consider this as an option, if capacity allows. People who are admitted to the Sylvan Ward remain in the care of our Community Team, who maintain contact and support during the admission.

Our Community Team also provides education, planned and responsive, dependant on need for both carers and healthcare professionals, tailored to the needs identified; this is viewed as one of the key pillars of the clinical nurse specialist's role.

### **Medical Team**

Our medical team is led by Palliative Care Consultants who work closely across St Nicholas Hospice Care and West Suffolk Foundation Trust. The team also comprises two very experienced Senior Hospice Physicians and hosts several training placements for NHS doctors. At any one time, the Hospice has up to four full-time doctors working in this capacity. Ten doctors are hosted each year, for placements varying from four to 12 months each. They are training to be palliative care consultants, GPs or work in other specialties. The Hospice is also an accredited placement site for the University of Cambridge, hosting dozens of graduate medical students for short placements every year. Through all these supervisory and educational activities, we contribute to the palliative care knowledge and experience of many doctors.

Learning experience from a junior doctor:

*"My hospice placement was a transformative experience, teaching me invaluable lessons about empathy, dignity, and the profound impact of holistic care, which addresses patients' physical, emotional, psychological, and spiritual needs. The emotional intensity of palliative care cannot be understated. Witnessing patients' decline and their loved ones' grief was deeply moving and sometimes overwhelming."*

### **Spiritual Care and Chaplaincy Team**

Our Head of Spiritual Care and Chaplaincy is supported by two Bank Chaplains, who work up to 16 hours each month in total. A team of 17 volunteers, work across a number of our sites and engage with events which are organised by the Head of Chaplaincy and Spiritual Care, such as Gravetalk and Light Up a Life. This team offers spiritual care and support for people on the Sylvan Ward and their families, as well as those in their own homes and in the communities in which they live. This service is also integral to the support of our staff, helping to maintain wellbeing.

### **Psychological Services Team**

The Psychological Services Team provides pre-bereavement and post-bereavement support for adults and children. We maintain an open access approach to this service, which continues to see a year-on-year increase in demand.

Psychological support is provided on an individual client basis or by group work, in a setting appropriate to client need, this may include here at the Hospice, the Haverhill Hub, at home or in a child's school. This can be face-to-face, telephone or virtual, depending on client need.

This service is supported by a team of skilled volunteers and student counsellors, who may see clients themselves or support the delivery of sessions such as Nicky's Way, our child bereavement service. Bereavement cafes and our Stepping Forward walking group provide volunteer-led peer support in our community.

The team also provide internal and external training, offering several topics such as Loss Grief and Bereavement.

### **Clinical Education**

Our Clinical Education Team continues to work alongside colleagues to support the delivery of planned education in a number of settings, both internal and external, including healthcare professionals, care homes and care agency staff. External events e.g. recruitment fairs are also attended which raises the profile of the Hospice. During this reporting period we delivered 73 sessions, including:

- Syringe pump training
- Palliative Care Emergencies

- Comfort Measures at End of Life
- Advance Care Planning
- Mouthcare
- Pressure Area Care
- Overarching Principles of Palliative Care
- Difficult but Essential Conversations
- Breathlessness in Palliative Care
- Fatigue Management
- Opioid Conversions
- Autumn and Spring Clinical Update Conferences
- 'Let's Learn @ St Nic's'
- East of England Ambulance Service Trust Palliative Care Insight Days

In addition, to the academic and vocational pathways noted above, our staff were able to access external training opportunities which included:

- Hospice UK National Conference
- St Clare's Palliative Care Conference
- Guildford Advanced Pain and Symptom Management Conference
- West Suffolk Foundation Trust Palliative Care Conference
- Caldicott Guardian National Annual Conference
- Oliver McGowan Mandatory Training, Train-the-Trainer
- Appraisal Leads Training
- Exploring the Complexities of Cancer-Related Pain Training

### **Independent Living Team**

This small therapy team provide specialist rehabilitative support for people at home and on the Sylvan Ward. The team have also supported the delivery of interventions which support people to live well, such as coping with breathlessness and anxiety.

### **Complementary Therapies**

We have utilised existing knowledge and skills within the Community Team and relaunched our Complementary Therapies service to offer a short series of Complementary Therapy sessions for those in our care in the community and on the Sylvan Ward who may benefit from this therapy. This includes aromatherapy and massage.



## Compassionate Communities and Hospice Neighbours

We recognise the concept of Asset-Based Community Development, and this small service continues to embed itself within the community to realise local networks of support. The Hospice Neighbours service works to link volunteers with people who require 'light touch' support at home. These interventions can be extremely varied, they are difficult to quantify, but often result in the development of long-lasting networks and relationships.

Our Hospice Neighbours Team are embedded in our community and have attended events such as The Sudbury Show, our own LINK business events with local employers, and also collaborate with other charities such as Our Special Friends, ensuring that as much value is added across the local voluntary sector as possible. Feedback from the people supported by Hospice Neighbours includes:

From a family carer:

*'...She has made me feel that I am still alive... I can visit the hairdresser and feel that I can still take part in life. Our Hospice Neighbour visits have provided me with a breather - time to recuperate from the demands of caring'.*

From a person whose health had deteriorated:

*'I didn't know what was going on in the outside world... the local paper only reports on incidents - it doesn't hold a conversation with you! I couldn't even walk into town on my own but she'd come with me and support me, we'd go for a nice cup of tea. She helped me get back to living again...'*

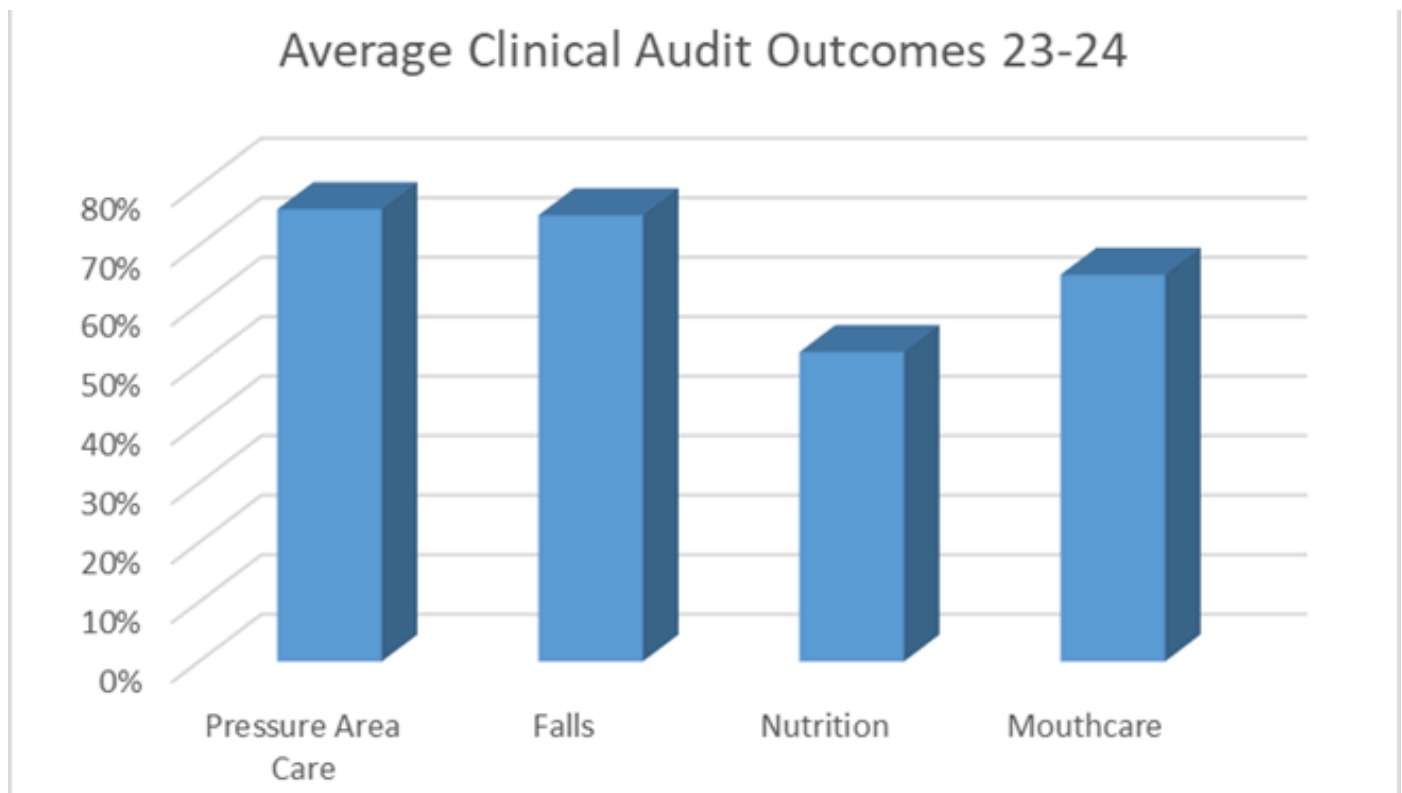
We have worked collaboratively with East Suffolk colleagues to begin our participation in Compassion Communities UK Charter Training. Completion of this programme will enable us to continue to work together to strive for achievement of the Compassionate City Charter. This is the framework which supports a connection between statutory services and the life of our communities, based on treasure mapping and community empowerment.

### Participation in clinical audits

A suite of quarterly clinical audits is completed primarily on the Sylvan Ward, this includes:

- Pressure Ulcer Care
- Falls
- Nutrition
- Mouthcare

### Overall performance for key audits 2023-2024:



### Local audits

St Nicholas Hospice Care now participates in quarterly Hospice UK Benchmarking Clinical Audit Programme.

### Use of CQUIN payment framework

No Commissioning for Quality and Innovation (CQUIN) monies formed part of the NHS contract for 2023-24.

**Data quality**

We have improved the quality and breadth of our data sets to provide understanding of potential gaps in our service and more accurately demonstrate performance and activity. We also invested in specialist support to streamline data collection processes and deliver training for our clinical teams. For this reason, it has not been possible to demonstrate a comparable data set to indicate improvements or reach of services during this reporting period.

**Cyber security and protection toolkit**

All organisations that have access to NHS patient data and systems must hold this toolkit to assure that they practice good quality 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 2023-2024 by the Audit Commission. There is currently no payment tariff for the specialist care service.

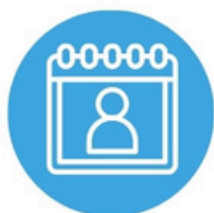
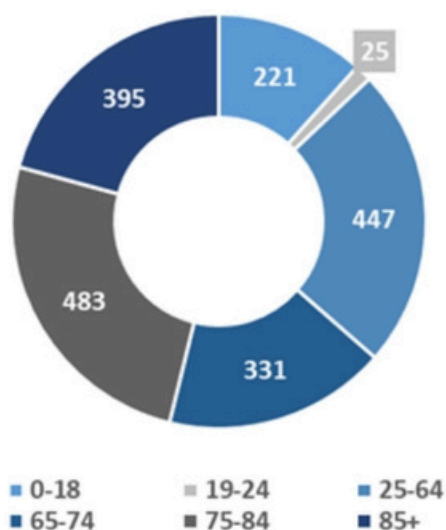


# Part Three:

## Review of Quality Performance 2023/24

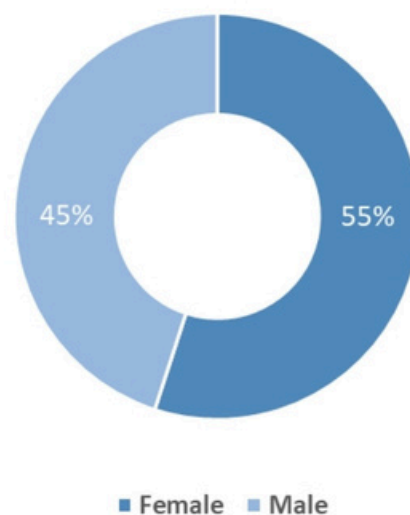
### PATIENT AGE

#### ALL SERVICES



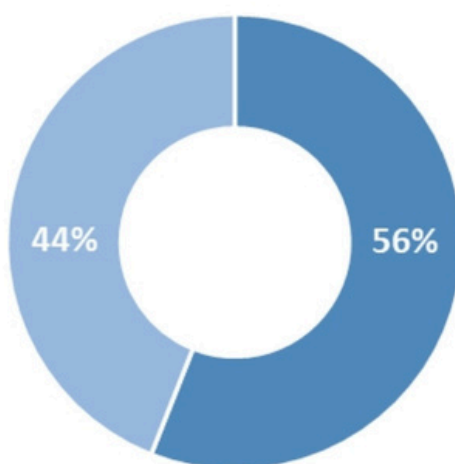
### PATIENT GENDER

#### ALL SERVICES



## PATIENT DIAGNOSIS

### ALL SERVICES



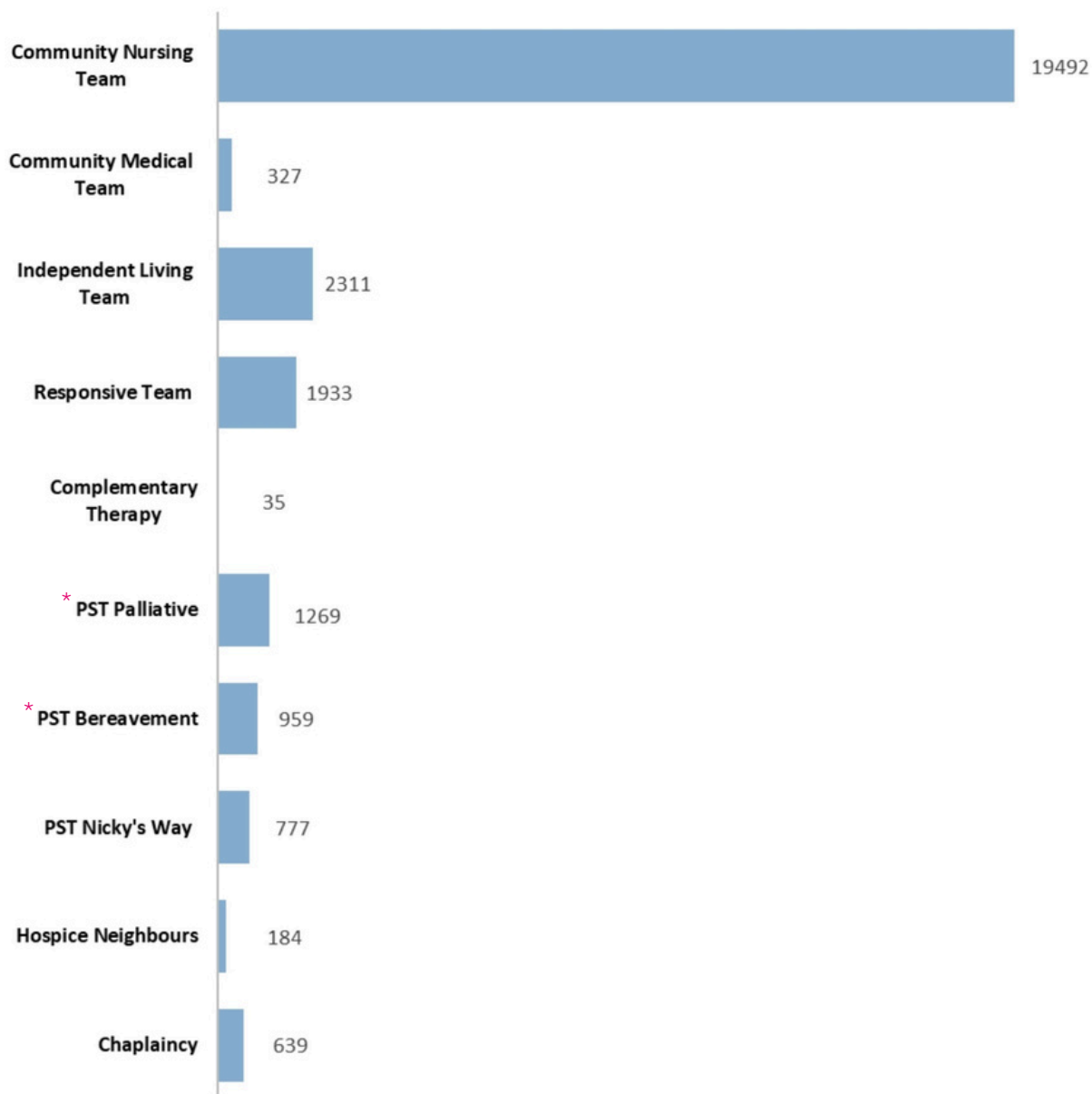
■ Cancer Diagnosis ■ Other Diagnosis

Where diagnosis is reported



## PATIENT CONTACTS

### COMMUNITY SERVICES



\* PST: Psychological Services Team







## Core Clinical Services

### Sylvan Ward

Sylvan Ward continued to provide specialist palliative and end-of-life care throughout 2023-24, with no requirement to reduce capacity for either operational or clinical reasons. As before, we have maintained our approach to visiting and encourage this, upon discussion with the person and family concerned. There are numerous occasions when families have made use of our overnight accommodation, allowing family members to remain as close to their loved one as possible.

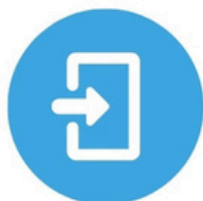
Although we extended our capacity on three further short-term occasions, for the period from 08/01/24 - 31/03/24 we provided additional bedded capacity to support seasonal pressure and admission avoidance; two additional beds were opened in response to a request from partners to focus on those who live with a diagnosis of dementia.

Clinical staff responded to infection prevention measures as dictated by national guidance, and although intermittent incidence of Covid-19 occurred across the staff group and for one individual in our care, there were no infection outbreaks.

During this period, we experienced a high level of Hospice Nurse vacancies, however, we maintained safe clinical care with consistent forward planning and close working with agency providers, who supported our block booking of temporary staff, primarily those with experience in palliative care and who became familiar with the organisation.

**TOTAL NUMBER  
OF ADMISSIONS****174**

**36% ended in discharge**  
**64% ended in death**

**AVERAGE LENGTH  
OF STAY****13 Days****BED  
OCCUPANCY****2022/23 - 83%****2023/24 - 84%****NUMBER OF  
BED DAYS****Available - 2522****Occupied - 2129**

## Medical Team

We are fortunate to have recruited a Senior Hospice Physician, following the departure of colleagues. We continue to work collaboratively with West Suffolk Foundation Trust and benefit from the support of two additional Palliative Care Consultants, providing valuable support to our shared community.

Our work with the CHELsea II clinical trial has continued. This is a national multicentre cluster randomised controlled trial, with 80 hospices taking part. It aims to answer the question of whether fluids given by drip at the end of life could lead to a better patient outcome. The trial is led by one of the Senior Hospice Physicians, greatly assisted by the Hospice's Nursing Team, with one of our most experienced Hospice Nurses contributing enormously to this work. Initially all sites aimed to recruit 20 patients each, but due to the rapid success of our processes and recruitment, SNHC was asked to increase its target to 30 patients in total, to compensate for centres which have struggled to recruit.

We continue to support and promote the right of individuals to donate their eyes after death, should they so wish. The palliative care consultant has been a key member of several national research projects and schemes towards this and is now the chair of the national Hospice Eye Donation Steering Group.

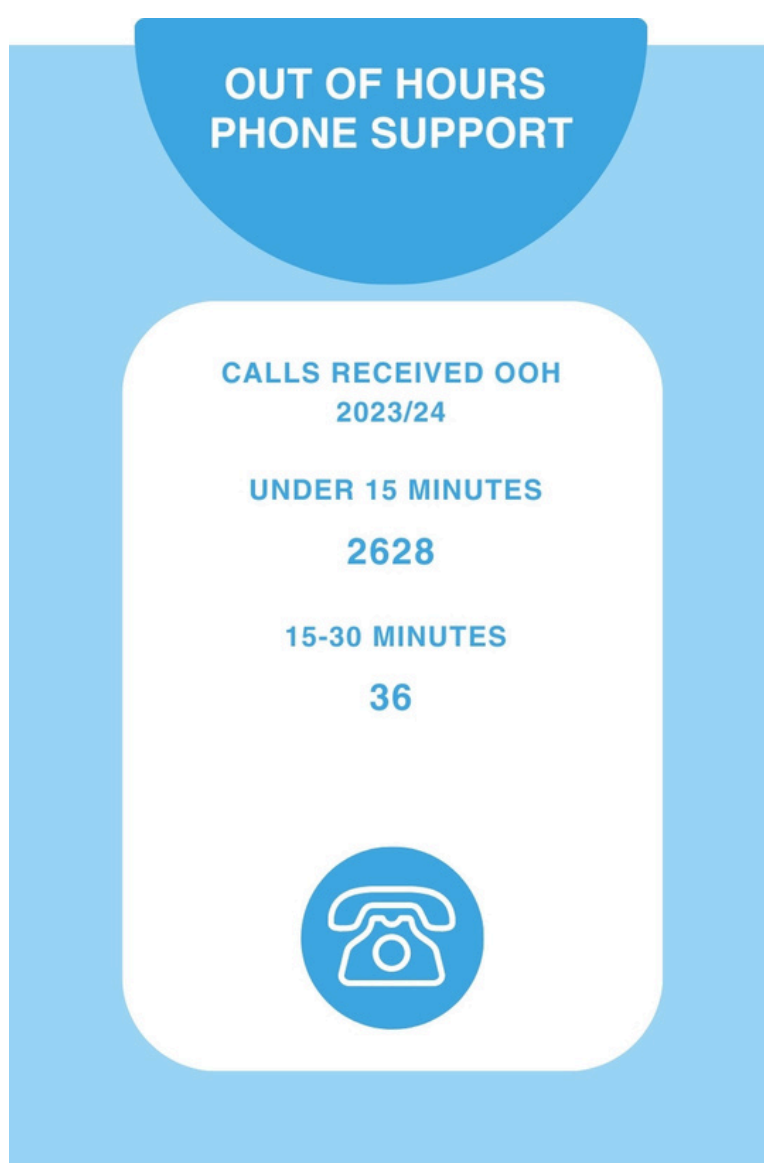
Our Palliative Care Consultant presented a poster at the Hospice UK Conference in November 2023 to highlight our work with Family Administered Medication. Work continues to create a single training process which can be used across the whole population supported by our ICS (Suffolk and North East Essex). This is led by the medical consultant with input from nursing colleagues.

We are engaged in a scoping exercise to understand the potential and costs for adopting electronic prescribing and administration of medication processes throughout our organisation. We aim to implement this in 2025-26.

### Out of hours clinical advice

Our Clinical Nurse Specialists and Sylvan Ward Hospice Nurses have continued to provide telephone advice and support for patients and families across West Suffolk and Thetford during out of hours periods. When further specialist clinical advice is required, our team works with the out of hours medical team, including the Palliative Care Consultant on-call.

Our nursing team continue to work closely with the West Suffolk Foundation Trust Early Intervention Team, offering professional advice and support for those services who are able to visit patients during these periods.



Our Advanced Clinical Practitioner has supported this service by participating as a first on-call professional, working alongside the medical team.



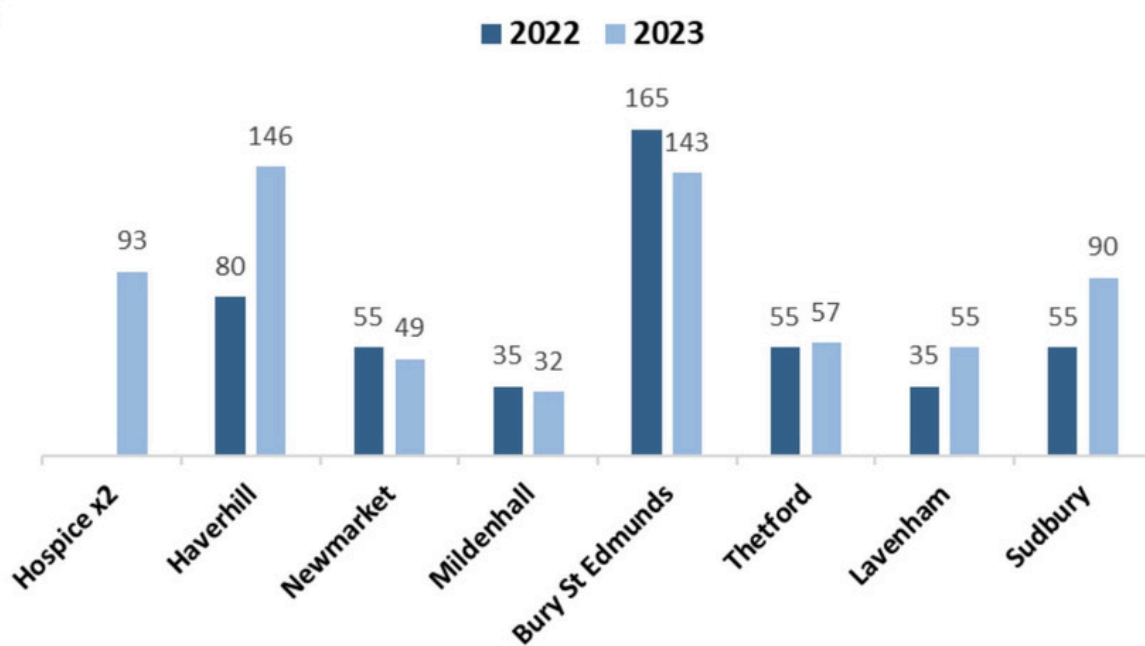
## **Spiritual Care and Chaplaincy**

During 2023-24, 164 referrals were made into this service, this resulted in 1,030 separate contacts taking place, with 125 home visits completed. This team also provides 24/7 on-call chaplaincy support for those in our care on the Sylvan Ward, this usually involves face-to-face contact. During this period, the team attended the Sylvan Ward to provide chaplaincy support during out of hours periods on 31 separate occasions.

Other activities developed and managed by the Spiritual Care and Chaplaincy Team have included:

- Bereavement events in two local care homes;
- Remembrance and Christmas events in a local care home;
- Eight Light Up a Life events across our community, which provided an opportunity for the people we serve to remember those who are important to them as we approached the festive season. These events were open to everyone in the host community and saw a 39% increase in attendance from 2023 to 2024;
- Funerals, at the request of those we have journeyed with;
- Talks in local venues and an opportunity to share good practice further afield;
- Restorative activities for our staff – Sanctuary, Thirsty Thursday, SPACE;
- Hosting Church of England ministers on placement to see and experience Hospice ministry;
- Jointly leading on the co-production of Thankful preparations; part of the celebrations of our 40th anniversary year;
- Bereavement Butterflies: an opportunity for those who access our retail outlets, Thetford Market and the Hospice, to place a seeded-paper butterfly for planting and remembrance;
- Presence Ministry, our Head of Chaplaincy and Spiritual Care has written an article for publication on Chaplaincy and Hospitality;
- St Nic's Sings community singing group, formed in preparation for our 40th anniversary celebrations, but going from strength to strength and will continue into 24-25.

## LIGHT UP A LIFE (ATTENDANCE)



## Community Team

For a short period during 2023-24 we were able to continue to offer our Hospice Extra Support Team (HEST) service for people receiving palliative care at home. While we were not able to secure ongoing funding for this service, we integrated the model into our existing community palliative care offer and have continued to offer a responsive service for people experiencing intense periods of need at the end of life.

We continue to accept referrals via our website from fellow professionals and directly from people who need our support. In order to maintain the most effective approach to service delivery, we acknowledge the part we play in the care of people experiencing palliative and end-of -life care, and consistently focus on the work which only we as a specialist provider can deliver, thus acknowledging the knowledge and skills of our partner organisations. We reflect this by reporting on the number of referrals, which we have declined for this reason.

Effectiveness is demonstrated by the implementation of a number of recommendations made during Spring 2023 during an external review of our community service. This includes additional focus on outpatient clinic work, using consistent systems to plan our work, and ensuring that all staff have access to the technology to enable mobile working.

The Community Team demonstrated flexibility during a period of high staff vacancy on Sylvan Ward which resulted in moving to a three month position of business continuity when one team member was redeployed to the Sylvan Ward on a temporary basis and further team members provided regular, planned support to maintain clinical safety and service delivery.

In response to learning from clinical incidents, we have implemented a framework which supports clinical safety and oversight, known as a Suite of Clinical Escalation Meetings. This ensures that Community Team colleagues have a route by which to raise increasing clinical concerns, and importantly that senior clinical colleagues have oversight of the caseloads of junior staff and can support a prompt and timely response to these. This oversight also takes place via the daily 'Huddle', weekly Multi-disciplinary Team Meeting, and separate Case Review Meetings. A wider quarterly caseload review process is also in place, led by the Advanced Clinical Practitioner and Medical Team.

## COMMUNITY NURSING

### REFERRALS RECEIVED

**1901**

**89% Accepted**  
**11% Declined**



## BREAKDOWN BY INT BOUNDARIES

Bury Rural	267
Bury Town	496
Forest Heath	228
Haverhill	264
Newmarket	148
Sudbury	273
Norfolk	138

**Out of Area    87**





## Psychological Services Team

The Psychological Services Team have continued to deliver psychological and emotional support to our child and adult beneficiaries observing a continued increase in referrals across the service.

During April 2023, the team held an open event to recruit more volunteers to support the service. An intense six-week training course was offered by the team with successful recruitment. This year the Psychological Services Team have offered seven students a supportive and rich learning environment whilst on their placements.

The Nicky's Way bereavement service has continued to offer children and young people one-to-one and group support. There have been four successful groups run over the year, which have been made up of four after school sessions and one Saturday. In addition, the children also attended an activity morning at Curve Motion (soft play session) where a great deal of fun was had. The Nicky's Way Christmas party was once again a huge success.

The children's therapy room had a makeover and now boasts a beautiful mural from a local artist for families to enjoy.

March 2024 saw our launch of Nicky's Way Education, and the creation of our own Conversation Starter card packs for parents and professionals to support grieving children. The event was fully booked and received positive feedback. Earlier in the year the Psychological Services Team carried out several bespoke training sessions within GP surgeries, care homes and in children's daycare nurseries.

## Clinical Education

During 2023-24, the Clinical Education Team and colleagues delivered training for 1,311 people across West Suffolk and Thetford, in 73 different sessions.

The total number of students from all professional groups who received placement support within the organisation totalled 63.



## Education delivery 2023-24

### Total attendees

1,311

### Total sessions

73

Our Health Care Assistant Educator completed Manual Handling Train the Trainer Training, enabling us to deliver this essential session in-house for all clinical staff.

Our Trainee Advanced Clinical Practitioner (ACP) developed and facilitated a bespoke education session for the East of England Ambulance Service Trust (EEAST) offering a number of learners the opportunity to gain insight into palliative care. These colleagues also came into the Hospice setting to shadow our clinical staff and benefited from training delivered by palliative care professionals in support of their learning. This collaborative approach received excellent feedback and we will continue to develop it further.

Our Trainee ACP has also directly supported their EEAST ACP peer group with face-to-face training sessions focused on extending the knowledge and understanding of anticipatory medication for symptom management at the end of life. Further sessions are planned for 2024-25.

### Research

We are embedding primary research into our practice, with an exploration of our current opioid conversion education resource. Our Trainee ACP has undertaken this as part of the MSc Advanced Clinical Practice programme. The outcomes of this work will be shared internally by our usual governance processes, and a plan developed to integrate recommendations into practice.

## PSYCHOLOGICAL SERVICES TEAM

NUMBER OF  
ASSESSMENTS

69%

PATIENTS ON  
WAITING LIST

31%



## PSYCHOLOGICAL SERVICES TEAM

TOTAL NUMBER  
REFERRALS

667



## HOSPICE NEIGHBOURS

TOTAL NUMBER  
REFERRALS

76



## CHAPLAINCY

TOTAL NUMBER  
REFERRALS

164



## COMPLEMENTARY THERAPIES

TOTAL NUMBER  
REFERRALS

16





## HOSPICE NEIGHBOURS

NUMBER OF  
PATIENTS SUPPORTED

50

---

NUMBER OF  
VOLUNTEERS

45



## INDEPENDANT LIVING

### TOTAL NUMBER PATIENTS SUPPORTED

279

#### Occupational Therapist

102

#### Physiotherapist

59

#### Therapy Assistant

30

#### Ward Support

88



## Quality markers we have chosen for additional focus

### Safeguarding

We recognise that Safeguarding is everyone's business and our Safeguarding Leads have continued to work to maintain a high level of visibility of safeguarding awareness. We maintain an active log of the safeguarding discussions which take place, including those which do not result in reporting to the Multi-Agency Safeguarding Hub. The Safeguarding Leads participate in regular supervision sessions with the Safeguarding Lead for Suffolk.

We use our internal social media platform (Workplace by Facebook) to help maintain awareness, this is of particular use as it reaches across the whole organisation, both clinical and non-clinical.

Our Safeguarding Leads have been keen to increase awareness in non-clinical areas such as retail, in recognition that safeguarding concerns can arise in any setting. We have developed a network of Safeguarding Champions who are colleagues from a number of teams who have volunteered to increase their own awareness and learning to support their teams. Our inaugural Safeguarding Champions Conference took place in February 2024.

### Patient Safety Incident Response Framework (PSIRF)

We will use the opportunity provided by the implementation of PSIRF to ensure that we respond to clinical incidents effectively and proportionately. Our PSIRF Plan will be approved through our usual governance processes and then submitted to the ICB for approval. Thereafter, this will support us to effectively identify themes requiring action, without disproportionate resource directed to investigations which have little impact upon patient safety.

The launch of our Weekly Quality Huddle enables robust reviews of clinical incidents, and a review of the interventions required by our on-call clinical manager means that our response to increased risk is prompt.

### User feedback

We are working with our Marketing and Communications Team to review and redevelop the way we capture feedback from people who use our services, and we

will include stakeholders in this group to ensure that we ask meaningful questions and explore all routes to capture this information. We will then demonstrate how we use this data to improve services. We intend to participate in the FAMCARE survey this year, which will provide data regarding the outcomes of care. This evaluation of bereaved relatives' experience will take place for a short period of time during the summer.

### **Education collaborative**

We will confirm our plan to work more closely with our hospice partners, St Elizabeth and St Helena Hospices, to co-deliver some elements of specialist palliative care education and training; together becoming the lead education provider for health and social care professionals across Suffolk and North East Essex. This high-quality training will help to prepare staff, volunteers and carers to effectively support people as they experience palliative care and approach the end of life. This approach will also nurture talent and support junior colleagues and learners into professional roles.



## Quality Markers we chose to measure – 2023-24

### Quality Marker

#### Infection Prevention and Control

#### How have we met this?

- We are now members of the ICB Infection Prevention Collaborative;
- We will integrate a number of Clinical Guidelines into one single Infection Prevention and Control Policy, for clarity;
- We have completed regular infection prevention and control audits for submission to Hospice UK;
- We have demonstrated a person-centred approach to infection prevention measures in response to need.

### Quality Marker

#### Clinical Incident Management

#### How have we met this?

- All staff have access to RADAR;
- Weekly reporting from RADAR provides updates to clinical leaders of outstanding incidents and risks to be addressed;
- Governance structures are observed by reporting of incidents into Clinical Committee;
- No serious clinical incidents occurred during 2023-24.

## Quality Marker

### Pressure Ulcers

#### How have we met this?

- We have a nominated link nurse for pressure ulcers, who is able to lead on this element of care;
- We have accessed regular training for our staff;
- We have purchased new mattress and bed stock to support patient care;
- We have recognised the need to update our Pressure Ulcer Prevention Policy, to ensure that we increase our understanding of moisture associated skin damage and Skin Changes at Life's End (SCALE).

## Quality Marker

### Medication Incidents

#### How have we met this?

- We developed a Medication Management Working Group to focus on improving our medication record keeping;
- All Sylvan Ward staff have completed a Medication Management Competency Pack;
- All medication incidents are investigated and managed proportionately;
- We continue to update our clinical guidelines to reflect changes in process;
- Our Controlled Drugs Accountable Officer maintains close contact with the Local Intelligence Network;
- We have developed a robust process to manage timely controlled drug destruction;
- We submit quarterly data to NHS England demonstrating details of medication incidents.

## Quality Marker

### Formal Complaints and Concerns

#### How have we met this?

- We updated our software to ensure that we are able to discern between concerns and formal complaints;
- We take concerns and complaints seriously;
- We demonstrate candour in the investigation of complaints and the feedback provided to complainants, including by meeting with them to explain complaint outcomes.

## Quality Marker

### Safeguarding

#### How have we met this?

- We held our first Safeguarding Champions Conference in Spring 2024;
- Our Safeguarding Leads engage in regular training events and supervision;
- We maintain a Safeguarding Log, recording all safeguarding discussions;
- We provide a safeguarding update to our Clinical Committee.



## Other Quality Initiatives

### Dying Behind Bars

We are aware of the healthcare inequalities which continue to exist for people who are incarcerated, and which are noted in the Hospice UK report Dying Behind Bars (2021). This group of people live with increased risk of mental health challenges, exacerbated by drug and alcohol dependency, and have a life expectancy 25 years lower than the rest of the UK population. Our community Clinical Nurse Specialist (CNS) has championed palliative and end-of-life care support for this part of our community, and reminds us that for this group of people, prison is home. This CNS has attended Highpoint Prison on several occasions, both to offer advice regarding specialist palliative and end-of-life care, and to present at a wellbeing event, which offered an opportunity to update prison healthcare professionals about our services.

### Memorable Moments

Our Memorable Moments Fund is supported by a local employer and allows us to help fund moments which matter for people at the end of life, and their families.

This year we used part of this fund to purchase outdoor lights for the Hospice's garden. At dusk, all year round, the gardens come to life with these twinkling lights; adding to the atmosphere of events such as our garden carol service with mulled wine and mince pies, or by simply providing pleasure for the people in our care on the Sylvan Ward.



Previously we have used the Memorable Moments Fund to buy pizza for family evenings for a person in our care, and to provide Christmas trees for each of the rooms on the Sylvan Ward.



## West Suffolk Foundation Trust (WSFT) Putting You First Award

The impact of our staff has been recognised by our partner organisations. WSFT have awarded our community CNS, Amanda Coltman one of their Putting You First Awards for the support she has shown towards one of their teams.

*'I would like to nominate Amanda because she is compassionate and caring, and advocates for the needs of patients. She is a huge asset to her team and has broken down barriers between the district nurses and the hospice team.'*

*Amanda frequently goes above and beyond with her patients to ensure that they are comfortable and settled at the end of life. Amanda ensures the wellbeing of not only her patients, and the hospice team, but also the wellbeing of other community teams in challenging circumstances.'*

Putting You First Awards are generally made for WSFT staff, however on this occasion, the Trust's executive team are reported to have considered this nomination a worthy winner.

## Dementia Marketplace Event – May 2023

We were pleased to be represented at the above event, facilitated by Suffolk Dementia Action Partnership and Care Development – East, and held during Dementia Action Week. Useful networks were developed, and we were able to continue to inform our community of the work we do, particularly in terms of the importance of advance care planning for people who live and die with and from dementia.

## Virtual Ward

We continue to support the development of the Virtual Ward across our community. Our Trainee ACP is leading on the development of this collaborative approach, by supporting staff with their learning needs when patients progress to require palliative and end-of-life care. A number of clinical pathways have been developed and joint work continues to ensure that people who are able to receive their healthcare at home, are supported to do so.







## Statement from Integrated Care Board

The Suffolk and North East Essex (SNEE) Integrated Care Board (ICB) confirm that St Nicholas Hospice Care have consulted and invited comment regarding the Annual Quality Account for 2023/24. This has been submitted within the agreed timeframe and SNEE ICB are satisfied that the Quality Account provides appropriate assurance of the service.

SNEE ICB have reviewed the Quality Account and the information contained within the Quality Account is reflective of both the challenges and achievements within the organisation over the previous twelve month period.

SNEE ICB look forward to working with clinicians and managers from the service and with local service users to continue to improve services to ensure quality, safety, clinical effectiveness and a good service user experience is delivered across the organisation.

This Quality Account demonstrates the commitment of St Nicholas Hospice Care to provide a high quality service.

Lisa Nobles  
Chief Nursing Officer  
Suffolk & North East Essex Integrated Care Board



# 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)



*because  
you matter*

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