

# Quality Account

## St John's Hospice

### 2023-2024



St John's Hospice North Lancashire and South Lakes is a charitable incorporated organisation registered in England with charity number 1157030

Built by the people for the people



## **Our Purpose**

St John's Hospice is a charity providing specialist in-patient and community based palliative care and support for the people of North Lancashire, South Lakes and parts of North Yorkshire.

We believe that when people die in our community they should do so with dignity and in the place of their choosing.

The staff and volunteers of St John's Hospice strive to provide world-class palliative and end of life care and support to patients and their loved ones.

To be truly successful we must uphold our values, work across our communities and, with many partner organisations, lobby decision-makers both locally and nationally and raise sufficient funds to deliver care of the highest quality.

## **Our Vision**

Putting local patients and families at the heart of everything we do, we will ensure that on the journey towards the end of life we provide the right care, in the right place, at the right time.

## **Our Values**

- **Care** – We will provide first class care, delivered by competent people who put the patient at the heart of all we do
- **Compassion** - We will treat everyone with respect, dignity and empathy
- **Collaboration** - We will work with others to ensure that patients and families receive the best end of life care possible
- **Charity** – We will provide care, free of charge to patients and families and will connect with our local communities so that they continue to finance our present and our future
- **Celebration** – We will celebrate the abilities of the people we care for, however limited they may be. When people are bereaved, we will support them to celebrate the lives of the people they have lost

# Part 1

## Chief Executive's Statement

It gives me great pleasure to present this Quality Account for St John's Hospice.

In this account, our aim is to show how the hospice measures quality, involves patients, carers and staff and strives to always look for areas where we can improve our care.

A Quality Account is an annual report to the public from providers of NHS healthcare about the quality of services they deliver. It is important to note that, in a normal year, St John's Hospice only receives less than a third of its funding from the NHS; the remainder of the monies we need in order to run the Hospice is donated by the local community. The vast majority of services described in this document are funded by charitable donations and not by the NHS. In the past 2 years, there has been a 0.6% uplift from the NHS so the percentage of funding received is reducing year on year. This is not a sustainable position for the Hospice.

Quality sits at the centre of all the Hospice does. Our vision is that everyone in our catchment area of South Lakes, parts of North Yorkshire and all of North Lancashire with any life-shortening condition will have high quality care and support at the end of their life, in the right place, at the right time.

We asked patients, families, volunteers and staff to sum up in one word what St John's means to them. Their key words can be seen at the entrance to our ward and here:



Our Corporate and Clinical Governance structures ensure that we have both the systems and processes in place to maintain a viable and responsible business, whilst ensuring that our services are of the highest quality and meet the aspirations of our vision. Our services are subject to unannounced inspection at any time.

On the 20th December 2024, the Hospice was inspected by CQC; we were given no notice of the inspection.

Our overall rating was “Good”. This was broken down in the following categories:

- **Safety** – Good
- **Effectiveness** – Good
- **Responsiveness** – Outstanding
- **Caring** – Good
- **Well led** – Good

We are in the process of appealing this judgement.

I am responsible for the preparation of this report and its contents. To the best of my knowledge, the information contained in this Quality Account is accurate and a fair representation of the quality of healthcare services provided by our hospice.

**Sue McGraw**

**Chief Executive**

**27<sup>th</sup> June 2024**



## Part 2

### Our priorities for 2023-2024

#### **New Priority 1: Lancashire & South Cumbria Education Alliance (LSCHA)**

The education arm of the LSCHA has begun its journey to seek to understand our current education and research capabilities, present a vision and business plan for shared improvement and delivery and where possible support implementation of improvements.

A LSCHA Education and Research Strategy Board has been established, as have Terms of Reference. This Board seeks a shared education strategy. Working together should result in improved education and better standards of care for all.

##### Aims:

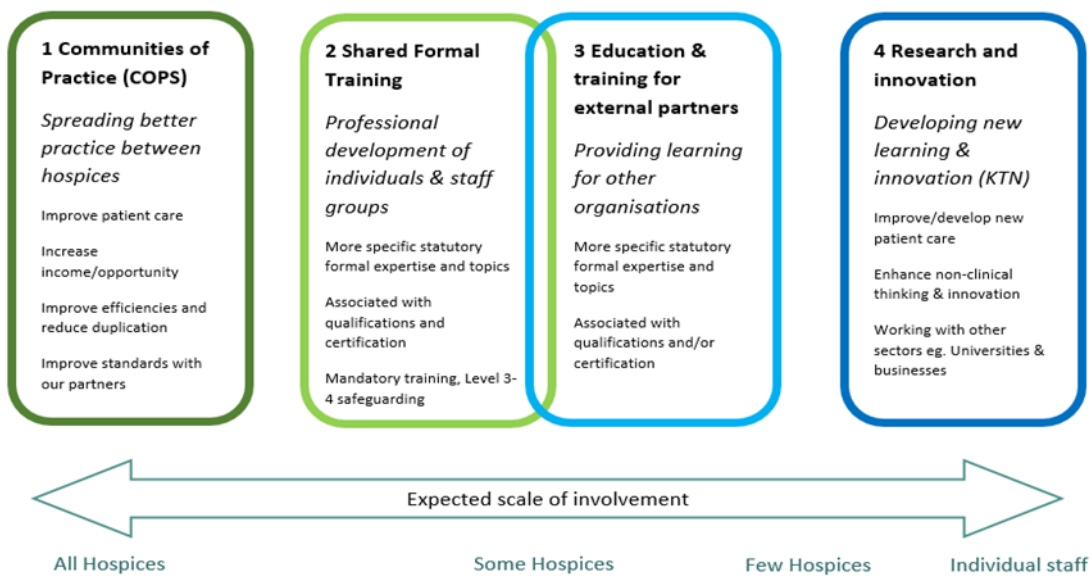
- Improve end-of-life quality of care through better training provision for hospices and our external partners.
- Enhance use of existing resources, skills, and expertise (clinical and non-clinical)
- Provide more efficient and effective training and education for staff and volunteers
- Generate supporting income through training programs, study sessions, and conferences on end-of-life and palliative care for other professionals, including external staff such as NHS clinicians or care staff

##### Objectives:

- Develop a jointly structured (clinical and non-clinical) education provision
- Pool and manage resources effectively across hospice partners
- Share costs and income between the hospices under a co-produced agreement
- Ensure equal representation in decision-making around the provision, data, and delivery of education

##### Vision:

- A vision for this work has been developed into an Education and Research strategy which can be summarised in the diagram below:



To date, the focus is on the exploration of current offerings to discover areas of excellence and collaboration. Therefore, four workstreams have been developed:

1. Identify the Communities of Practice needed, establish four pilots and review
2. Develop the scope for joint formal training, establish a Joint Education Manager role, create a business case with an associated work programme for a regional hospices shared education 'curriculum'
3. Scope the current education provided to external partners, understand external partner needs, create business plan and an associated work programme linked to needs
4. Assess current Research & Innovation (R&I) practices across Lancashire & South Cumbria hospices to create a working model to improve R&I with regional partners.

St John's Hospice's first focus area is mandatory training.

## New Priority 2: Investing in Staff and Volunteer Wellbeing

The health and wellbeing of the Hospice team is paramount. Aligned with publicly available information from the Chartered Institute of Personal Development (CIPD), the Hospice will continue to embed recent actions and launch new initiatives so that health and wellbeing remains a priority across the organisation.

This means we will invest in three distinct, yet dovetailing areas:

## **1. Further line manager training.**

Line managers are “key to employee wellbeing and should ensure people’s workloads and deadlines are manageable”. \* The programme ‘Leading from the Middle’ will help to support managers to influence peers, team managers and their managers. Key areas to focus on will be:

- How to provide clear objectives and give constructive feedback, as part of a trust-based relationship
- How to have sensitive conversations with people and offer support and flexibility if a team member needs adjustment to their role or work environment, to help manage their health and work.

\*CIPD

## **2. HR Policies and Practices**

Continue to tailor policies and practices to organisational and employee needs. For example, updating policies relating to:

- Capability
- Attendance Support
- Probation Review
- Appraisals
- Mandatory Training
- Equal Opportunities
- Whistleblowing
- Equality, Diversity & Inclusion
- Professional Behaviours and Values for Staff and Volunteers
- Disciplinary Procedure
- Recruitment

## **3. Wellbeing**

Strengthen the already robust organisational framework to promote good mental wellbeing and foster a culture where people can talk about mental health and seek help where needed. For example:

- Further promotion of the recently trained Mental Health First Aiders so all staff can access support
- Additional Complementary Therapy sessions for staff
- A new ‘People Plan’ incorporating a Volunteer strategy
- A new Health and Wellbeing Directory
- Training re: sexual harassment
- Further investment in our approach to volunteer recruitment and retention

- Host an off-site Volunteer recognition and long service award event
- The development of a Compassionate Employer Toolkit
- Further develop night sitter engagement opportunities
- Encourage protected time for staff to attend Last Days Matter training
- Produce a guide to encourage access of Westfield Health – a health benefit scheme for staff funded by the Hospice
- Lunch time ‘Hot Topic’ sessions for staff to include the delivery of advice with financial health, physical health etc.

\* *Employee health and wellbeing, CIPD <https://www.cipd.org/uk/views-and-insights/cipd-viewpoint/employee-health-wellbeing/>*

### **New priority 3: Staff investment through clinical education**

Continuous professional development for both the Hospice clinical staff and colleagues across the health economy is key to the provision of good quality palliative care to all patients who die in our area, whether this is specialist care via the Hospice or generalist care via primary care and care sector staff. Feedback from our staff makes clear that professional development is an important aspect of effective recruitment and retention.

Nurse preceptorship opportunities will open working at the Hospice to newly qualified nurses. The programme, which was developed by the Inpatient Unit management team, was successful in pilot form in 2023 and will now be available every year as part of our commitment to ‘growing our own’ specialist staff.

Following the success of the Nurse Development Programme, a 5-day programme aimed at registered nurses working across Hospice services, we have embarked on delivering accredited Advanced Communication Skills Training to Hospice nursing staff and we will then look to extend this training to external staff once we have a robust team of trained Facilitators in place.

Building on the Nurse Development Programme we have designed a 2-day development programme for Health Care Assistants across the organisation.

Opening the Spiritual Gate training for both internal and external staff will then be the next step, as well as working with colleagues across the Bay area on a prospectus of training opportunities available to clinical staff with palliative care development needs.

Training courses provide an opportunity for income generation in addition to development of the local workforce.



## Review of our Priorities for Improvement 2022-2023

### **Priority 1: Clinical effectiveness and patient safety** The formation of the Lancashire & South Cumbria Hospice Collaborative

In April 2022, the Lancashire and South Cumbria Hospice Collaborative was formed - its mission is "To ensure the population of Lancashire and South Cumbria receive the very best end of life and palliative care available".

The Hospice Collaborative has achieved the following within the last 12 months:

- Close working with the senior team at the ICB
- The formation of the Education and Research Alliance and joint employment of an Education and Research Lead
- A 'Retail Therapy' workshop
- A Spring and Summer camp to bring CEOs and clinical leads from all hospices together
- Close working relationships amongst all hospices to ensure a raised profile with commissioners and to explore opportunities for joint improvement and efficiency and to influence and shape the future commissioning and delivery of integrated Palliative and End of Life Care.

Our CEO is the chair of the Hospice Collaborative and, because of this role, attends the Integrated Care Partnership Board of the ICB.

A link to the Collaborative's website can be seen here:

[LSC Hospices Together \(lscht.org.uk\)](https://lscht.org.uk)

This project will be monitored via St John's Care, Quality and Services Subcommittee of the Board.

### **Priority 2: Clinical Effectiveness and Patient Safety** SJH@40: ensuring a sustainable Hospice

Developing plans for a hospice building that will make us fit for the future - focus on engagement to ensure we not only have the best clinical facilities available but also create a restorative and supporting space for our team.

Our Hospice was built in the 1980s and will be 40 years' old in 2026. The building is beginning to show signs of age, not only physically but also operationally. Whilst there is no sense of patients

and families being concerned about this, the Trustees know we must plan for the future of hospice care, and this cannot be done in a building that was designed decades ago.

In January 2023, a team engagement process began. We asked the team two questions:

- If we were starting again, what would the building look like in terms of patients and families?
- If we were starting again, what would the building look like in terms of team well-being?

We had a remarkable response to this with some key themes emerging:

- Clinical services should be co-located
- We should really think about quiet space for the team
- We must move the mortuary.

A new Head of Facilities will join the Hospice in June 2024 and the Board have agreed to fund a Project Manager post. The Project Manager will specifically focus on SJH@40 as the Board agreed that the project is too big to be delivered within existing resources.

This project will be monitored by the Finance and Resources Subcommittee of the Board.

### **Priority 3: Clinical Effectiveness and Patient Safety** Education to support end of life care

The ICB funded a part-time education post for South Lakes to lead education to care homes and home care agencies about palliative and end of life care.

The postholder was recruited and commenced in July 2023. Linking with a similar post in the acute hospitals to ensure the same courses are offered, and in community CSN teams, a locality education group has been set up to organise the education to all health and social care workers with this postholder delivering specifically to S Lakes care homes and home care agencies.

#### **Delivery Plan**

An initial training needs analysis finding in response to this and feedback from participants, amend and further develop training materials to meet the need of care providers to include:

- Communication Skills
- Advance Care Planning (ACP)
- Care of the Dying Person
- Community Conversations – Last Days Matter

Workshops have been delivered to eight care homes and agencies, with more planned for a further four in Spring of 2024.

To date, there have been 565 attendees for the course and evaluations have been excellent, with the trainer seeing evidence of different approaches to conversations and care when revisiting the providers.

The main challenges are the large geographical area to be covered, the language and culture differences for those from different countries, and difficulty finding training rooms (dining rooms tend to be the best venue).

Work will continue with this post, and its effectiveness will continue to be monitored at our Care, Quality and Services Trustee Subcommittee.

## Part 2 (Continued)

### Statements of Assurance from the Board

Quality Accounts have a series of statements that MUST be included. Many of these statements do not apply to St John's Hospice. Explanations of these statements are given where appropriate and are prefaced by the words:

#### **"MANDATORY STATEMENT"**

During 2023-2024 St John's Hospice provided the following services:

- In-Patient Unit
- Community Service, comprising of Hospice at Home Service, Night Sitting Service, Day Respite Service and Clinical Nurse Specialist Service
- Family Support and Bereavement Service
- Education and training for our own staff
- Out-patient clinics, led by specialists in palliative medicine
- Physiotherapy, Occupational Therapy, Complementary Therapy, Social Work, Spiritual Care, and hosted Lymphoedema Services
- In-house catering for our ward and day hospice patients
- Housekeeping to ensure strict standards for infection prevention and control.

**MANDATORY STATEMENT** – St John's Hospice has reviewed all the data available to them on the quality of care in all these NHS services.

### **Participation in Clinical Audits and Compliance with NICE**

In July 2023, the Audit and NICE group was formed to specifically focus on Clinical Audit, Compliance and implementation of NICE standards and Guidelines. This group is led by the Clinical Director and reports to the Clinical Operations and Performance Committee.

The following are examples of audits (both clinical and non-clinical) conducted within the Hospice in 2023-2024.

| Clinical Audits                             | Compliance and other Audits            |
|---|--|
| HUK Patient Medications (in patient)        | Hand Hygiene                           |
| HUK General Medicines                       | Commode, Catheter, Sluice, Toilet Seat |
| HUK Management of CDs (in patient)          | Sharps                                 |
| HUK Infection Protection & Control          | Consumables                            |
| Blood transfusion                           | Nurse Vital Signs and Key Information  |
| Care plan and risk assessments              | Community Key Information              |
| DoLS & Safeguarding (in patient)            | Mattresses                             |
| Pressure Ulcers Deep Dive (thematic review) | CD Accountable Officer self-assessment |
| Non-Medical Prescribers                     | Access to the Building                 |
| Referrals                                   | Health Watch                           |
| Hospice UK Benchmarking                     | Information governance                 |
|   | PLACE                                  |

The following NICE Guidance and Clinical Guidance Baseline Assessment Tools were completed with 100%\*compliance:

|  |
|--|
| NG108 Mental Capacity & Decision Making                                    |
| SG1 Safe staffing inpatient wards in acute hospitals                       |
| CG179 Prevention and Management of Pressure Ulcers                         |
| NG189 Safeguarding   |
| NG48 Oral Health for patients in care homes                                |
| NG191 Managing Covid 19 Rapid Guidelines                                   |
| NG46 Safe management of CD's   |
| NG67 Managing Medicines in the community and social care                   |
| NG103 Flu Vaccinations   |
| NG 218 Vaccine Update in General Population                                |
| NG 24 Blood Transfusion  |
| * NG 89 VTE in over 16's - action plan in place to achieve full compliance |

The audit schedule for 2024/25 is in place and is due to be ratified, and Compliance Audits are now differentiated from Clinical Audits. This is to more clearly articulate the regular compliance audits that are to be completed to provide assurance. This allows the Hospice to be able to select which clinical audits are important to patients and families to improve quality, safety and clinical effectiveness in specific areas.

In 2023/24 the following are highlights from the Audits Schedule:

**Pressure Ulcer Deep Dive** – this work was led by the In-Patient Unit Manager who wanted to explore the following:

- Is care evidence based? Is NICE guidance being used?
- Are pressure ulcers being identified, classified and managed appropriately

- Could care be provided differently and how could we improve.

A retrospective review of records from the period March 2022 to June 2023 were reviewed and we compared the data from St John's Hospice with other medium sized hospices and adult hospices, which showed that our patients were suffering less harms in comparison. There were no category 3 and above pressure ulcers reported.

Although the deep dive identified that overall standards of care were very high, the following improvements were recommended:

- further education for staff, patients and carers on grading of pressure ulcers
- improvements in documentation of intentional rounding
- improvement in the quality of medical photographs
- continuing to advise patients and next of kin about any pressure ulcers found
- updating reporting categories on the incident reporting system
- reviewing the frequency of turns for very high risk (Waterlow risk) patients, which is more often than NICE guidance recommends.

Although incident reporting was low, these improvements led to a further reduction in pressure ulcers. Pressure ulcers continue to be monitored by the senior nursing team, and comparative data is reviewed through the HUK benchmarking. The Hospice is currently implementing the new pressure ulcer risk evaluation tool PURPOSE-T, which will replace the Waterlow score.

### **The Patient-Led Assessments of the Care Environment Programme (PLACE) Audit**

The Hospice was audited on the 10th of October 2023, by 8 patient assessors, 3 staff assessors and 1 independent assessor from the local acute Trust. This audit promotes the principles established by the NHS constitution that focuses on areas that matter to families and carers.

The Hospice is reviewed against standards for Cleanliness, Combined Food, Organisational Food, Ward Food, Privacy, Dignity & Wellbeing, Condition, Appearance & Maintenance, Dementia and Disability, scoring a combined average score of 97%.

**Ward Food, Condition, Appearance & Maintenance, and Dementia** all scored 100% each.

The In-Patient unit and Community Services each have an Infection Prevention and Control (IPC) champion who co-ordinates and reports on the cleanliness compliance audits (hand hygiene, commode, sluice etc.) which mirror the findings of the PLACE audit in demonstrating high compliance of 98-100%.

## **Access to the Building Audit July 2023 and Healthwatch Lancashire Accessibility Audit January 2024**

In July 2023 Access to the Building Audit was completed and an action plan was implemented to make improvements. Following this, it was decided to invite Healthwatch to complete an Accessibility Audit to gain an independent assessment of how accessible the Hospice is. To fully understand the lived experience of those with disability, we were grateful to have 3 Healthwatch members (from Lancashire, and Westmorland & Furness Healthwatches) to review our premises - a wheelchair user, a member with a visual impairment and a member with a learning disability. The Healthwatch visit advised on most of the findings the Hospice has already identified as requiring actions as well as some recommendations that were not immediately apparent to Hospice staff members. Overall, the Healthwatch report was overwhelmingly positive with recommendations to improve our accessibility underway.

## **Benchmarking Hospice UK 2023/24**

Since Q1 2023/24 the Hospice has submitted monthly data for Pressure Ulcers, Falls and Medicines Management Incidents into the Hospice UK benchmarking Tool. The quarterly reports produced by HUK have enabled the Hospice to compare our harms with other similar (medium) sized hospices and adult hospices as a whole (which includes data for small and large hospices).

Although St John's Hospice reports slightly more 'no harm' medications incidents overall, we report less harm related incidents, representing an open reporting culture and staff diligence. In the whole of 2023/24 St John's Hospice has not reported any moderate or above medication harms.

Throughout 2023/24 we are seeing more reported pressure ulcers on admission to the Hospice, when compared with nationally. Either our teams are better at reporting these incidents or, with the nationally recognised rising aging population, there is possibly an increase in the number of frail and elderly people living in our communities. However, our reported new pressure ulcer harms have been consistently lower during 2023/24 in comparison with other hospices against a backdrop of a 98-99% occupancy level.

Regarding falls, the Hospice consistently reports less falls incidents and lower harms in comparison with other hospices.



## Research

**MANDATORY STATEMENT** - The number of patients receiving NHS services, provided by or sub-contracted by St John's Hospice in 2023-2024, who were recruited during that period to participate in research approved by a research ethics committee, was NONE.

## Use of the CQUIN Payment Framework

In 2023-2024 the Hospice was not subject to any CQUIN payment schemes.

## Statement from the Care Quality Commission (CQC)

St John's Hospice is required to register with the CQC; on advice received from CQC in 2021, we only need to register for the following regulated activity, as the others are included under this:

- Treatment of disease, disorder or injury

St John's Hospice has the following conditions on registration:

- Only treat people over 18 years old
- Only accommodates a maximum of 17 in-patients.

The CQC has not taken any enforcement action against St John's Hospice during 2022-2023.

The CQC rated St John's Hospice as "Good" at its inspection, now under independent healthcare, on the 20<sup>th</sup> December 2023.

The Hospice is in the process of appealing this rating.





**MANDATORY STATEMENT** – St John’s Hospice did not submit records during 2022-2023 to the Secondary Users Service for inclusion in the Hospital Episode Statistics which are included in the latest published data.

#### **The Data Security and Protection Toolkit (DSPT)**

St John’s Hospice achieved compliance across all mandatory areas of the DSPT in 2023-2024.

#### **Clinical Coding Error**

**MANDATORY STATEMENT** – St John’s Hospice was not subject to the payment by results clinical coding audit during 2023-2024.

## Part 3 Review of Quality Performance

| INPATIENT UNIT                          |           |           |           |
|---|-----------|-----------|-----------|
|   | 2023-2024 | 2022-2023 | 2021-2022 |
| <i>Total Patients</i>                   | 197       | 184       | 123       |
| <i>Patient RIPs on Ward</i>             | 145       | 135       | 92        |
| <i>Patient Discharges</i>               | 49        | 46        | 43        |
| <i>% Ward Occupancy</i>                 | 96        | 96        | 92%       |
| <i>Average Length of Stay (days)</i>    | 16.1      | 17.9      | 13.8      |
| COMMUNITY CARE                          |           |           |           |
|   | 2023-2024 | 2022-2023 | 2021-2022 |
| <i>Total Patients</i>                   | 727       | 648       | 574       |
| <i>Home Visits</i>                      | 4333      | 2928      | 2,365     |
| <i>Telephone Calls</i>                  | 10243     | 10343     | 11,384    |
| <i>% Patients who died at home</i>      | 88%       | 90%       | 92%       |
| <i>Average Length of care (days)</i>    | 41        | 40        | 35        |
| NURSE SPECIALISTS                       |           |           |           |
|   | 2023-2024 | 2022-2023 | 2021-2022 |
| <i>Total Patients</i>                   | 563       | 713       | 337       |
| <i>Home Visits</i>                      | 1243      | 1196      | 858       |
| <i>Telephone Calls</i>                  | 3302      | 4426      | 3,416     |
| DAY SERVICES                            |           |           |           |
|   | 2023-2024 | 2022-2023 | 2021-2022 |
| <i>Total Patients</i>                   | 174       | 383       | X         |
| <i>Average length of support (Days)</i> | 35        | 82.5      | X         |
| Family Support & Bereavement            |           |           |           |
|   | 2023-2024 | 2022-2023 | 2021-2022 |
| <i>Total service users</i>              | 753       | 319       | 321       |
| <i>Discharge from 1-1 support</i>       | 121       | 85        | 140       |
| <i>Average length of support (Days)</i> | 33        | 91        | 122       |

Patients being admitted to the Hospice services have increasingly complex needs, both physically, emotionally and psychologically.

The ongoing social care issues make finding care home places difficult, however packages of care which can include night sits can be easier to access in less rural areas.



**Patient Safety Incidents**

There is a healthy incident reporting culture at the Hospice. Throughout the reporting period, the categorisation and analysis of incidents has been reviewed and improved to better understand our themes and trends. This is to understand where best to target resources to improve patient care. This is in line with the Patient Safety Incident Response Framework (NHS, 2022). All reported incidents are of a low level in terms of patient risk. However, we actively encourage our teams to report incidents. All incidents are reviewed weekly by the hospice Senior Management Team (SMT).

Below is the total number of patient safety incidents this year. These include medication, slips, trips and falls and include all near misses.

| Number of incidents | 2023-24 | 2022-2023 | 2021-2022 |
|---------------------|---------|-----------|-----------|
| Regulated/Internal  | 248     | 326       | 175       |

**Number of incidents resulting in severe harm or death: 0**

## **Implementation of the Duty of Candour**

Duty of Candour means being open and honest with people using our services, especially when things have gone wrong, or potentially may go wrong.

The Duty of Candour must be followed in all aspects of patient care so that the patient, where they have capacity, is informed when something has not happened as planned. If the patient does not have capacity, incidents must be shared with the family or carers. Any questions or concerns must be addressed as soon as possible, and everything said should be documented.

At St John's Hospice we have developed a system to implement the Duty of Candour, both regulatory and professionally, through informing family members of particular patient incidents (with the patient's consent, if they have capacity) which have resulted in actual harm, through best interest meetings with family when a patient does not have capacity and through open and honest discussions about patients' conditions and treatment plans.

## **Feedback from Staff**



A biennial staff satisfaction survey is conducted at the Hospice. The top three statements that staff agreed with in our most recent staff survey were:

- I would recommend a friend or family member for care
- I am proud to work for St John's Hospice
- I enjoy the work I do

## **Feedback from Patients, Families and Carers**

Feedback from patients, families and carers is one of the most important ways for us to understand and improve the services we provide.

We often receive comments and compliments by letter or email, but also many verbally which are not formally recorded.

We never forget that the sign above the door here reads: 'Built by the people for the people'.

**Patient and Family Surveys**

Valued Opinions in Care Excellence (VOICE) volunteers support the completion of a Hospice experience questionnaire which is offered to all patients and families at the end of a patient’s life. Volunteers are either speaking to patients and families on the In-Patient Unit or are phoning families to complete the questionnaires. Some questionnaires are being posted. 421 patients/families were given the opportunity to provide feedback and VOICE received 354 responses (84%).

| VOICE survey questions   | Responses   |
|--|---|
| “I was cared for with compassion, kindness and respect”                                  | 98% of strongly agreed                                |
| "My views and opinions were listened to”   | 96% of strongly agreed                                |
| “My privacy and dignity were respected”  | 98% strongly agreed                                   |
| “I understood how to ask questions and discuss any concerns about my care and treatment” | 98% strongly agreed                                   |
| “I knew how to make a complaint if something was wrong”                                  | 98% strongly agreed                                   |
| When asked about their experience with St John’s Hospice                                 | 99% said it was good (choices: good, good & bad, bad) |

The analysis of responses from April 2023 to March 2024 was overwhelmingly and consistently positive.





**Complaints 2023-2024**

Complaints are all monitored by the relevant member of Senior Management Team; clinical complaints are discussed at the Care, Quality & Services Subcommittee and are reported to the full Board of Trustees.

| <b>Complaints</b>                         | <b>Number</b> |
|---|---------------|
| Total number received (all informal)      | 8 regulated   |
| Total number of complaints upheld in full | 0             |
| Total number of complaints upheld in part | 0             |
| Total number of complaints not upheld     | 8             |

**Freely given compliments**

The Hospice receives many compliments including phone calls, verbal reports, letters, and cards. For 2023/24 the hospice has received a total of 365 freely given compliments for all areas.

Since 2023/24, cards are being handed to all community patients who access the Hospice at Home service. Visitors Books have been introduced in the Forget Me Not Centre, Day Service and the In-Patient Unit. This is to catch the opinion of a wide variety of patients, staff, family and friends that pass through our services.

**Here are two patient stories which are typical of the feedback we receive on a daily basis:**

**Ursula: Visiting the In-Patient Unit**



Meet Ursula who visited the In-Patient Unit recently. Ursula attended St John's for pain management and kindly shared her experiences with us.

"I have a tumour which was causing constant pain so it was suggested that I came to St John's for help. I hadn't been to St John's Hospice before, so my first thought was, "Why would I go to a Hospice when I'm not dying?"

"When I got here it was such an eyeopener. It's nothing like a hospital and it's unbelievable. The minute you come through the Hospice doors and meet the reception team you feel the love everywhere. The nurses and doctors are like a gift, sent to help you and to sort everything out – they just give so much. It doesn't stop there, the housekeeping staff keep everywhere spotless and the hospitality staff bring your food when you feel it's the right time to eat.

"The food is wonderful, especially the chicken soup! Food is important to me as when I came here I really didn't want to eat because of the pain but now I'm eating more and the fact it's all homemade is wonderful. If I can't eat something, then the kitchen team will make a little something else for me – it's like staying in The Ritz!

"Everyone here understands that it's the little things that make a difference: a chat, a treat, a soak in the bath or peaceful time to read a book. They're one special team working together to make everything just right for patients.

"They've also been so kind to my visitors, guests such as my nieces have been made to feel very welcome and even their visiting dogs were allowed in too. It's been lovely to stay here, and even though I'm looking forward to going back home I have loved every minute of it.

"This is a very special charity – thank you for supporting St John's Hospice so that it's here to help people like me."

### **Lizzie's Story - Finding a way forward with St John's**



"My wonderful Dad was cared for at home by the Hospice at Home and Clinical Nurse Specialist teams. Dad loved the Hospice team, he and Pippa got on brilliantly chatting about their Scottish roots. He and Mum called them angels.

"What people don't know about St John's until they come into contact with them is that they look after the whole family. They looked after Dad, Mum and me, whilst also managing to help my children.

"The care continued after Dad died with the Hospice team keeping in touch and offering bereavement support. I wasn't ready for bereavement support at first and like many parents tried to focus all my attention on my children who were missing their Grandad. But then I found myself in a place where I couldn't move forward.

“When I first stepped into the Forget Me Not Centre at St John’s I immediately felt a sense of calm. The weekly counselling sessions and therapies with Jude gave me a safe place to ‘let go’ and not worry about being ‘strong’ or judged by others so I could finally process my grief. Staff there went above and beyond to try and help me with so many things – I’m very grateful.

“The best way I can describe St John’s care is being wrapped in a lovely warm blanket. Their care helped take me from a place of darkness to acceptance and light”

### **Opportunities to give Feedback on this Quality Account**

We welcome feedback on our Quality Account.

If you have any comments, please contact:

**Sue McGraw**  
**Chief Executive**  
**St John’s Hospice**  
**Slyne Road**  
**Lancaster**  
**LA2 6ST**

### **Feedback on our Quality Account**

#### **Response to St John’s Hospice Quality Account Report for 2023-2024 for NHS Lancashire and South Cumbria Integrated Care Board**

Lancashire and South Cumbria Integrated Care Board (LSCICB) welcomes the opportunity to review and comment on the St John’s Hospice Quality Account 2023/24. The commentary provided in this letter relates to services commissioned by LSCICB as well as some general observations. We have a continued commitment to commissioning high quality services from the hospice and take seriously their responsibility to ensure that patients’ needs are met by consistent and high standards of safe care, provision of effective services and that views and expectations of patients and the public are listened to and acted upon.

Firstly, we would like to commend the continued hard work, commitment and resilience Hospice staff continue to demonstrate whilst the NHS responds to ongoing recovery. This pays



testament to the continued resilience shown by staff in light of what has and continues to be a very challenging operating environment.

LSCICB are pleased with the progress made by St John's against the quality priorities set out for 2023/24, this includes the improvement work being undertaken with Lancashire and South Cumbria Education Alliance (LSCHA) that will maximise the opportunities for education and research capabilities. Continued investment in staff and volunteer wellbeing is positive and will lead to a robust and resilient workforce, LSCICB would like to recognise the 'Leading from the Middle' programme which aims to influence peers and managers to set clear objectives, provide constructive feedback and undertake sensitive conversations.

LSCICB are pleased to read about the areas of focus for excellence and collaboration, including communities of practice need, scoping for joint formal training and assessment of current Research and Innovation practices across other Lancashire and South Cumbria hospices.

LSCICB notes the audit activity undertaken by St John's over the course of 2023/24, including National Institute of Clinical Effectiveness (NICE), which continues to demonstrate high rates of compliance. LSCICB welcomes the further detail around the pressure ulcer deep dive, Patient Led Assessment of the Care Environment programme (PLACE) and access to buildings audits. This richer detail provides assurance of the approach taken and resulting outcomes of these key pieces of work.

St John's has a healthy incident reporting culture, with staff being actively encouraged to report incidents and LSCICB is encouraged to read that no incidents resulted in severe harm or death during 2023/24. LSCICB welcomes the improvements to categorisation and analysis of incidents to better understand themes and trends. This demonstrates an organisation that has an appetite to learn and ensures that patient safety remains a priority.

St John's continues to actively seek feedback from patients and families through the Valued Opinions to Improve Care Excellence (VOICE) volunteers. LSCICB values the patient stories included in the account, which highlight the impact and support of services for both palliative care patients and their loved ones. The patient voice is crucial to measuring the true effectiveness and impact of the quality of care delivered.

The Quality Account provides an open account of the achievements made in the past year and areas for improvement. This is an important contribution to public accountability in relation to quality and LSCICB appreciates the amount of work involved in producing this report.

Yours sincerely

***Sarah O'Brien LSCICB Chief Nursing Office***

**Response to St John's Hospice Quality Accounts Report for 2023-2024 Lancashire County Council Health Scrutiny Committee:**

"Although we are unable to comment on this year's Quality Account we are keen to engage and maintain an ongoing dialogue throughout 2024/25."

## **Response to St John's Hospice Quality Accounts Report for 2023-2024 Lancashire Healthwatch**

### Introduction

We are pleased to be able to submit the following considered response to St John's Hospice Quality Accounts for 2023-24.

### Chief Executive's Statement

Highlighted is the amount of funding received for the Hospice resulting in less than a third from the NHS. Worthy of note is the incredible amount of charitable donations required to fund the vital services that St John's provide.

The importance of St John's is echoed in this statement by the words provided by families, volunteers and staff; "everything", "love" and "support" to name a few.

### New Priority 2: Investing in staff and volunteer wellbeing

It is pleasing to read that the hospice has wellbeing for staff and volunteers as a priority. Particularly providing further training to line management to support with reasonable adjustments for staff which will in no doubt have a positive impact on staff wellbeing.

It is encouraging to read about how volunteers will have an event for recognition and long service. Along with other incentives to increase wellbeing amongst staff and volunteers.

### P15- Access to the Building Audit July 2023 and Healthwatch Lancaster Accessibility Audit January 2024

Please can 'Healthwatch Lancaster' be changed to Healthwatch Lancashire within the title.

We would like to thank you for involving Healthwatch in the accessibility audit, we look forward to learning how some of the recommendations made have progressed.

### Feedback from Patients, Families and Carers

We note the continued high levels of satisfaction and uptake of the Hospice experience survey, which mirrors last year's results. This reflects the care and treatment people receive whilst in the Hospice's care.

The two stories shared provides an insight into why the hospice receives high levels of satisfaction. The stories are moving, and it really hits home the level of care and after care patients and families receive.

In accordance with the current NHS reporting requirements, mandatory quality indicators requiring inclusion in the Quality Account we believe the St John's hospice has fulfilled this requirement.

Overall, this is a fair and well-balanced document which celebrates achievements and acknowledges areas for improvement and priorities.

We welcome these and as a Healthwatch we are committed to supporting the Trust to achieve them.

***Jodie Ellams***

***Manager - Healthwatch Lancashire***