

Quality Account

1 April 2022 – 31 March 2023



Contents

Part 1 – Overview

- 1.1 Statement from The Chief Executive
& Message from The Chairman *Page 3*
- 1.2 Vision & Values *Page 5*
- 1.3 Our Strategic Focus *Page 6*
- 1.4 Review of our Services *Page 7*
- 1.5 Our Funding *Page 11*
- 1.6 Our Activity *Page 11*

Part 2 – Priorities for Improvement

- 2.1 What We Achieved Last Year 2021-2022 *Page 13*
- 2.2 What We Will Achieve Next Year 2022-2023 *Page 15*

Part 3 – Quality of Services

- 3.1 Statement From the Care Quality Commission *Page 19*
- 3.2 Education & Training *Page 20*

Part 4 – Quality Markers

- 4.1 Summary of Quality Metrics *Page 23*
- 4.2 Clinical Audit and Research *Page 24*

Part 5 – Patient & Family Experience

- 5.1 Feedback Surveys *Page 27*
- 5.2 Sharing User Feedback and Learning Across the Organisation *Page 33*

Part 6 - Staff & Volunteer Experience

- 6.1 Our People *Page 35*
- 6.2 Volunteers *Page 36*

Part 7 – Statement Cheshire & Merseyside Integrated Care Board – Warrington Place

- 7.1 Statement *Page 38*

Part 1 – Overview

1.1 Statement from The Chief Executive



Sonya Currey
Chief Executive Officer

It is with pleasure that we share with you our Quality Account 2022-23 which has been developed in consultation with St Rocco's Hospice clinical service staff and managers, the Senior Management Team and our Board of Trustees.

St Rocco's is an independent registered charity providing specialist palliative care and support for adults with a life limiting illness. This is our opportunity to demonstrate our achievements and how well we have delivered our services over the last 12 months.

I would like to start by expressing how enormously proud I am of the dedication shown by all our staff and the flexibility and warmth they display on a daily basis. The Hospice also relies on our committed volunteers, including our incredibly supportive trustees, students and community supporters and we would like to share our thanks to this never waning support. Without this we would not be in a position to continue.

In 2022, we were delighted to launch a Palliative Virtual Ward (PVW) in partnership with local providers, after a successful bid to be the lead provider for a 12-month pilot. The PVW is a way to provide enhanced monitoring for patients at risk of deterioration or those who need additional support in their own place of residence. An

excellent demonstration of collaborative working, the initiative has become an integral element of the Warrington Integrated Palliative Care Hub (Hub) based at St Rocco's Hospice.

Since its inception the model has attracted significant interest regionally and nationally and all stakeholders have been involved in sharing the principles and benefits of the model. This shows how essential it is to work together to support the health and wellbeing of our communities; we are stronger together and this focus will remain as we move forward into 2023-24 and beyond.

Facilitating access to high quality care and support is our primary aim here at St Rocco's and we are constantly exploring ways in which we can improve this for our community. To do this we monitor the quality of our service provision, focusing on our service users' experience. We do this through our governance framework with delegated responsibility from our Board to Sub-Committees. Trustees actively engage with this process, chairing and critically reviewing our progress and therefore the standards of the service we provide.

During 2022-23 we spent time reviewing and implementing our values, mission and strategy. We worked hard to increase the reach of our services into our community, invest in our people (our most important asset) and develop our systems to increase our operational and financial resilience.

Our plans for next year include developing a sustainable clinical model for our PVW, during which we will listen to feedback, and share our findings to help shape the national drive for virtual wards. We will use insight, involvement and improvement to ensure patient safety continues across our care. We will also review our services delivered within our community to strengthen links and we will work to expand upon our volunteer-led groups.

We would like to thank you for engaging with our Quality Account and we actively welcome questions, comments and feedback to support us in our pursuit of continuous improvement.

Message from St Rocco's Chairman

It remains a pleasure and a privilege to be the Chair of St Rocco's Hospice and I am proud to work alongside a passionate and knowledgeable Board of Trustees. This report is an accurate and interesting reflection of the work that was carried out at the Hospice during 2022-23.

The Board is responsible for holding the senior leadership to account in legal terms, but it goes much further than that. The trustees are there to support and assist St Rocco's staff in continuing to deliver a much-needed service to those who need it at their most vulnerable time.

Along with the Senior Management Team, the Board are committed to developing our relationships across Warrington, with other health and social care providers and also with other hospices. Through collaborative working, St Rocco's aims to deliver comprehensive and effective care to our community.

As a Board, we are responsible for monitoring the day to day running of the Hospice and we achieve this through a range of functions. This includes appropriate scrutiny of clinical services and making sure that our income generation is both effective and responsible. You, as a member of our community, can be confident in the quality in each of the many diverse functions of the Hospice.

We would like to thank all our patients, their families and carers for sharing with us their comments and suggestions about what the Hospice does well and how we can improve. We listen to your views and use them for continuous reflection so that we can provide the best palliative care service for the people of Warrington.

Engaging with the Hospice through the Quality Account is a great way to make sure we keep moving forward and we welcome your feedback to support us in our aspiration.



Guy Hindle
Chair of Trustees



1.2 Vision and Values

Here at St Rocco's our mission is to **“support everyone in our community diagnosed with a life limiting disease, and those who matter to them, to live well and towards the end of their life have a dignified death in a place of their choice”**.

We aim to deliver a caring experience where people feel warmly welcomed into hospice care through upholding our values in all that we do. Our values very much reflect who we are as an organisation and we have continued to draw upon these throughout this year, whilst starting the work to refresh our commitment:

Thank You!

Saying Thank You:

Saying thank you to staff, volunteers, and our community.

Thinking differently and being open to change.

Think:

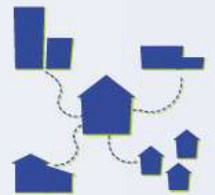


Resilience:

Having resilience physically, psychologically, emotionally, and financially.

Try new ways of working with other organisations, understand our community.

Outreach:



Compassion:

Care in all we do.

Sharing connections with our patients, carers, staff, volunteers, and community.

Connection:



Outstanding:

Trying to be the best we can be

High quality care in all that we do.

Standards:



1.3 Our Strategic Focus

During 2022 we undertook a strategy refresh to develop four strategic principles, supported by an annual strategic delivery plan approved by our trustees. Our key strategic principles include:

- **Increasing the reach of our services into our community by partnering for better outcomes and impact for our community.**
- **Investing in our people: to be a great place to work and volunteer, where skills and needs are recognised.**
- **Developing our operational excellence through a resilient structure and infrastructure that meets our regulatory requirements.**
- **Strengthening our financial stability and resilience to ensure we can continue to respond to the needs of our community into the future.**



1.4 Review of Our Services

St Rocco's ethos is to support people in the Warrington community from the moment they are diagnosed with an illness that is no longer curable. We look after people over the age of 18 years with any kind of life-limiting illness, including both malignant and non-malignant diseases. This can include heart failure, respiratory conditions, and neurological diseases.

We aim to be available to our patients and those important to them every step of the way, helping them to **make every moment count** and to stay as well as possible for as long as possible. Our specialist care extends to the very end of life. We achieve this by working in partnership with other healthcare professionals to promote skilled and compassionate palliative care of the highest quality.

St Rocco's **embraces equality, diversity and inclusion** by ensuring patients, their families and carers are welcomed from all backgrounds and faiths. Our care is delivered by a multi-professional team comprising of health and social care staff and a breadth of corporate services that support them. We work closely with health, social and Voluntary, Community and Social Enterprises (VCSE) partners to provide care to our community.

Throughout 2022-23 St Rocco's continued to respond to the ongoing and ever-changing restrictions and recovery plans post pandemic. We endeavoured to retain our ethos throughout, adapting services and environments for the safety of our patients, staff, volunteers and visitors.



Warrington Integrated Palliative Care Hub and Palliative Virtual Ward

Warrington Integrated Palliative Care Hub (Hub) is a **single point of referral** based at St Rocco's for access to palliative care services across Warrington for health and social care professionals, patients and carers. This is a co-located, **multi-professional service** that has access to nursing, medical and social work expertise to make sure we can provide a timely response whilst offering continuity through a single contact.

Our collective experience and learning across the health, social and VCSE sector during the pandemic showed **innovation** across sectors in the use of technology to support delivery of personalised palliative and end of life care.

During 2022-23, this service expanded to include a nurse-led Palliative Virtual Ward (PVW) consisting of ten beds. The PVW was the first in the region and allowed us to demonstrate that **St Rocco's is at the forefront in new ways of working**. The 12-month pilot provided an opportunity to test, learn and develop the blueprint to include palliative and end of life care within the national development of virtual wards.

Community Outpatient Services

Our community outpatient services are led by senior doctors with the focus around **complex symptom control** and improving quality of life.

We have continued our **ascites clinic** throughout the year to ensure we can maintain community access for this specialist procedure, reducing the need for patients to access the hospital setting.

During the pandemic, we developed our virtual consultation process; this is something we will continue to offer as a **patient choice** in the future. The continuation of the outpatient clinic has supported with the unprecedented challenges faced by the acute sector during the last year, with excess waiting times and escalation of acute settings above patient capacity, resulting in patients being cared for on corridors.

The Hospice outpatient clinics at St Rocco's have been running for over 12 years. During the year we have developed a new **Medical Outpatients Clinic Policy and Procedure**. One of the outcomes was a change in our approach to patient communications. This means that we now address our letters to our patients as opposed to the medical professional in charge of their care and we have reduced the use of medical jargon to **promote accessibility and transparency**.

Inpatient Unit

During the year, we have returned to our registered capacity of ten beds in line with demand. This unit provides 24-hour care and is supported by a team of specialist palliative care staff to provide complex symptom management and end of life care.

We have been in a position to keep this unit open whilst dealing with the infection prevention and control measures imposed by COVID-19, working closely with our partners and Infection Control team for guidance. This has included **maximising visiting opportunities** through the use of virtual technology and window visiting.

Towards the end of 2022, we implemented a test and learn project to **support timely patient discharge** from hospital. This was to respond to pressures in the acute setting along with a request from NHS England for hospices.

“This provision has brought much value and benefit for people and families at the end of life as well as speeding up hospital discharge.”

Director of Integrated Care (Warrington)

Counselling and Emotional Care

This service provides **psychological support** for patients and **bereavement services** for their loved ones. This service has grown throughout the last year through its close links to the Hub.

Our Counselling and Emotional Care team now reach those who were not previously known to the Hospice. This has been possible through the increased use of virtual communications which were introduced to meet infection prevention and control measures imposed due to COVID-19. Again, this offer will continue as a patient choice in the future.



The success from our first **bereavement café** café supported the need for us to open a **second venue** during 2022. This model has received positive feedback from those who have experienced it. As a result, we are working to share this model with other partners nationally.

*“I want to say a massive thank you to all that run and set up the café. It is something I never knew I needed. You’re all a credit and I felt welcomed with open arms and a warm embrace.
You’re all incredible.”*

Bereavement Café attendee

Hospice at Home

Hospice at Home supports people who **choose to be cared for in their home**. A team of experienced nurses oversee and co-ordinate the service and they are supported by healthcare assistants who give practical nursing care and psychological support to patients and their families.

During 2022-23, our Hospice at Home service supported safe and timely discharges from hospital, and we worked as an integral partner within the local system on the delivery of the “Home First” initiative.

Vitality Centre

We provide a range of services within the Vitality Centre, supporting patients to stay as well as possible for as long as possible. Services include:

- ➔ Complementary therapies
- ➔ Relaxation
- ➔ Activity therapies
- ➔ Dedicated symptom control clinics

A return to **face-to-face attendance** and home visiting has been seen over the course of the year in line with guidance changes.

Our volunteer-led groups have been meeting again in the Vitality Centre. This includes the **hospice choir, craft therapy group** and **relaxation group**.



“You are all amazing, you made the patient's last weeks comfortable and dignified. Kindness shown to us made this difficult time more bearable. SRH is a very special place.”

We have supported a 12-month pilot working closely with the local college to provide a placement opportunity for an art therapy student to offer **art therapy**. This has also supported the development and close working with our Counselling and Emotional Care team, providing support to our patients on the inpatient unit and within our community.

Our **Physiotherapy** and **Occupational Therapy** teams have continued working throughout the year to deliver home visits as well as offer treatments to inpatients on the ward. They have expanded their reach to maximise the support they offer, and this has helped reduce community service pressures and delays in patients receiving care.

1.5 Our Funding

St Rocco's Hospice is a local charity and costs over **four million pounds** a year to run.

The funding received from NHS services via Warrington Clinical Commissioning Group is spent directly on patient services. Again, during 2022 and in recognition of the part hospices play in our whole health and social care system, some grant funding was received from the government to support us to continue to deliver our services and deal with the additional costs experienced as a result of the pandemic.

We remain grateful to the work of **Hospice UK** who promoted the profile of hospices throughout this period and facilitated distribution of the grant funding.

The larger proportion of our funding is generated by our community and trust and grant making bodies, and for this we are truly grateful. The increasing global economic pressures and the financial landscape, particularly that of income generation and the uncertainty this generates, means we will have to **work harder** to assure our continued sustainability.

1.6 Our Activity

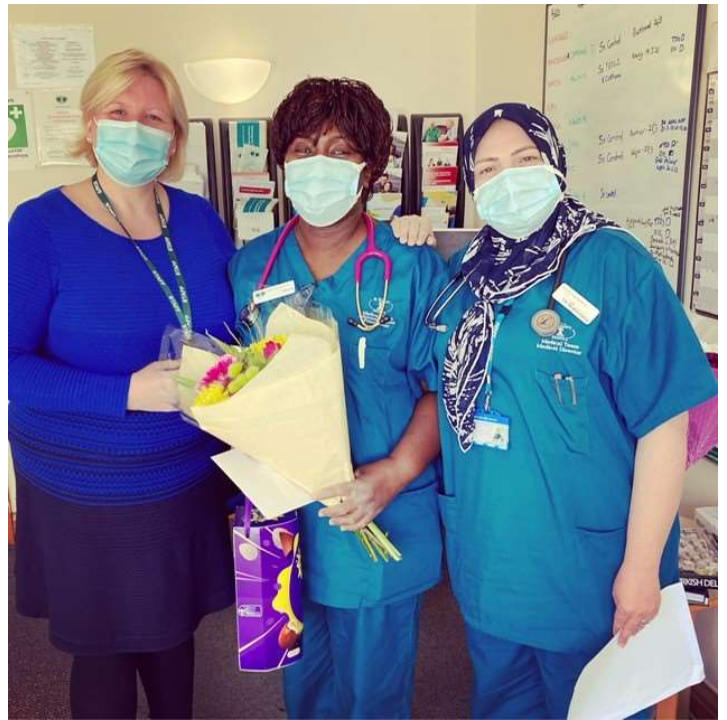
The data we collect gives us **insight into the demand for our services** and how we are able to respond. We report this data quarterly to our Quality and Safety Committee and Clinical Commissioning Group, the latter being a requirement of our NHS contract terms. We also use this data when evaluating existing or developing services.

Over the course of the year, and in line with the changes to COVID-19 government guidelines, the profile of our data has changed. As we moved through the peaks of the pandemic, we reduced our inpatient unit bed base to our registered capacity of ten and this is reflected in a reduction in our admission data. During this period our length of stay increased; this is due to an increase in system pressures, outstanding demand for social care support and limited availability of 24-hour care home placements.

Our medical outpatient activity remained relatively consistent, but a reduction can be seen in our outreach services. This reflects the shift in our service delivery from virtual and back to face-to-face contacts, signifying a return to our more traditional form of care provision.

What we have learned however, is that the virtual care provision we put in place through need during COVID-19, is a **valuable addition to our care models**. As a result, we see this option continuing to feature in our future provision.

SERVICE		Activity 2021-2022	Activity 2022-2023
MEDICAL OUTPATIENT	Consultations	193	228
	Ascites	27	13
	TOTAL	220	241
IN PATIENT	Admissions	183	141
	TOTAL	183	141
	Average length of stay	14.4 days	20.2 days
HOSPICE AT HOME	Nurse assessment visits	62	54
	Number of sits	365	337
	TOTAL	427	391



Part 2 – Priorities for Improvement

2.1 What We Achieved Last Year

What we wanted to achieve	Progress we have made
<p><u>Patient Safety</u></p> <p>National Patient Safety Strategy</p>	<p>Our first priority aligned with the implementation of the National Patient Strategy, and we appointed to the patient safety role, including nominating a trustee lead. The initial phase during August to November 2022 was the orientation phase and, following implementation, the team focused on stakeholder mapping and engagement of teams.</p> <p>We then focused on communication of the strategy to our teams and the roll out of training to bring to life the strategy within operations. A Patient Safety Network has been developed and the Patient Safety Leads work collaboratively with the Hospice network and partners to share learning for continual improvement and delivery of best practice.</p> <p>December 2022 to March 2023 focused on the diagnostic and discovery phase of the strategy implementation to review the current reporting processes in place and to support open and transparent reporting. Our incident reporting management system (Vantage) was successfully implemented across all divisions in January 2023.</p> <p>We successfully recruited to the Freedom to Speak Up role in January 2023; the development of this strategy and implementation of this role continues as part of our 23/24 development of Just Culture priorities. The transition to working under the national policy and plan is captured in our 23/24 priorities.</p>
<p><u>Clinical Effectiveness</u></p> <p>Palliative Virtual Ward</p>	<p>The Palliative Virtual Ward (PVW) 12-month pilot was launched in April 2022 following a successful bid from the Digital Health Partnership. Working collaboratively with our community and acute partners from April 2022, the PVW was developed as the next natural development of the Warrington Integrated Palliative Care Hub, providing the addition of technology to support people at home.</p> <p>This model was the first pilot to provide a community virtual palliative care ward. The development and outcomes have influenced the national roll-out from NHSE guidance, which sought to deliver over 100,000 virtual ward beds that would have positive patient outcomes and system impact.</p> <p>The PVW currently contributes significantly to the Integrated Care Board Places' implementation of the national virtual ward model of care with a high number of patients and high value outcomes that contribute to a positive evaluation in relation to an early adopter, especially from a palliative care perspective.</p> <p>The 12-month pilot has provided a blueprint for the continuation of a PVW at Place. This presents the learning and development of the model over the last 12 months, identifying the operational challenges and opportunities and patient impact over the last year.</p>

**Service User
Experience**

**Review services
delivered from our
Vitality Centre**

During the last 12 months and due to the reduction of pandemic infection control measures, we have taken the opportunity to work closely with our community and volunteering teams and build upon our services delivered from our Vitality Centre. The continuation of review of our outreach services, including services delivered from our Vitality Centre, is aligned with our strategic priorities and is captured in our 23/24 priorities.

2.2 What We Will Achieve Next Year 2023-2024

Looking forward to 2023-24, our improvement priorities are closely aligned to our ambition to **increase our reach into our community**, whilst ensuring our services remain **safe and effective** for our patients and those important to them.

We will continue to draw upon our existing systems to monitor the quality of our services. This includes an emphasis on capturing and acting on the feedback from our service users, those important to them and our St Rocco's team, whilst we develop our **new approaches**.

More than ever, it is essential to **work collaboratively** with our health and social care partners as the integrated care system in Warrington evolves. The priorities we have developed are those also seen to be consistent with the wider needs of this community.

Our priorities for 2023-24 continue to focus on achieving excellence in:

Priority 1. Patient Safety

Priority 2. Clinical Effectiveness

Priority 3. Service User Experience



Priority 1: Patient Safety

National Patient Safety Strategy

In line with the National Patient Safety Strategy (2019) we will implement a range of priorities. The strategy has three primary aims: **insight, involvement and improvement**.

For 2023-24 we will focus our efforts on the involvement element of this strategy through developing the work of the Patient Safety Lead. Our priorities for development in this area include:

- **Patient Safety Incident Review Framework (PSIRF):** we will review our incident reporting system and ensure it is compliant with the revised standards. This will again help optimise our learning from patient safety events.
- **Patient safety and education training:** Patient Safety Leads have completed training levels 1-5. All staff have been supported to complete level 1 training with line managers and clinical staff completing level 2.
- **Just Culture:** we will ensure that the Just Culture guide, captured in the patient safety strategy, is adopted into our organisational people policies and patient safety procedures. We will build on our philosophy where we actively encourage our people to speak up when things go wrong whilst feeling safe and supported to do so.
- **Patient safety network:** we will increasingly engage with our Place based and sector providers to develop ways to share our learning and best practice.



Priority 2: Clinical Effectiveness

Palliative Virtual Ward

In response to consistently increasing demands on health and care systems, a rise in the deployment of virtual ward models has been seen. This approach can **support system flow** and enable patients to remain at home for longer.

In recognition of this, St Rocco's took the opportunity to work with our partners to secure funding to pilot such a model during 2022. Further funding has been secured for the next 12 months (2023-24) to develop the Palliative Virtual Ward and provide a medical oversight, in line with the National Drive for virtual wards across the country.

During 2023-24 we will therefore:

- **Work with our partners to develop a sustainable clinical model.**
- **Design a system to increase our ability to evaluate the effectiveness of our model and identify areas for improvement.**
- **Share our findings to support the refinement of existing and implementation of new, virtual ward models.**



Priority 3: Patient/Service User Experience

Review our Services Delivered within our Community

We will work as a **system partner**, responding to population health needs, to flex our current outreach services so that we are able to respond to system pressures and challenges.

We will work collaboratively as part of a system at Place to provide clinical care delivery for palliative and end of life care, provide **education** to support best practice and high standards of care and provide clear escalation to provide specialist palliative care advice and care delivery. Working through collaboration at Place, we will make sure we align to existing system development as part of the ageing well strategy.

During the pandemic and as a result of the need to reduce the transmission risk, the services we operated from our Vitality Centre were paused. As we now move to operating under the 'living with COVID guidance' we will undertake a **service evaluation** aiming to:

- **Introduce a patient listening event to understand the value of our existing service offer and identify areas of opportunity.**
- **Recommence our volunteer-led groups and expand upon our existing volunteer-led groups including our gardening and craft group.**
- **Strengthen our community links by understanding our current reach and areas of inequality in relation to access.**



Part 3 – Quality of Services

3.1 Statement from the Care Quality Commission (CQC)

The last announced CQC inspection of St Rocco's Hospice took place in November 2019 and was completed by the CQC report in February 2020. We received an overall rating of 'good' with this reflected in all the five key questions. We display our rating in our Hospice premises and a copy of the full report can be accessed via the Hospice or CQC website.



St Rocco's Hospice
Quality Report

Lockton Lane
Bewsey
Warrington
Cheshire
WA5 0BW
Tel: 01925 575780
Website: www.stroccos.org.uk

Date of inspection visit: 19 November to 20 November 2019
Date of publication: 28/02/2020

This report describes our judgement of the quality of care at this location. It is based on a combination of what we found when we inspected and a review of all information available to CQC including information given to us from patients, the public and other organisations.

Ratings

Overall rating for this location	Good ●
Are services safe?	Good ●
Are services effective?	Good ●
Are services caring?	Good ●
Are services responsive?	Good ●
Are services well-led?	Good ●

Overall summary

The CQC suspended their routine inspection programme in March 2020 in response to COVID-19. The programme was replaced with a mix of monthly on-site and off-site reviews known as “direct monitoring” to ensure the public have assurance as to the **safety and quality** of the care they receive.

During 2022-23 the Hospice has received 12 direct notifications from the CQC that there is no evidence for the need for inspection or reassessment of rating and **no enforcement action** has been required. This form of monitoring does not amount to an assessment of the rating for the service under Section 46 of the Health and Social Care Act. The public are informed of the outcome by CQC adding text to their website.

Contact with the CQC Hospice Relationship Manager has been maintained with a virtual engagement meeting taking place on 1 July 2022. **Positive verbal feedback** was given at the close of the meeting.

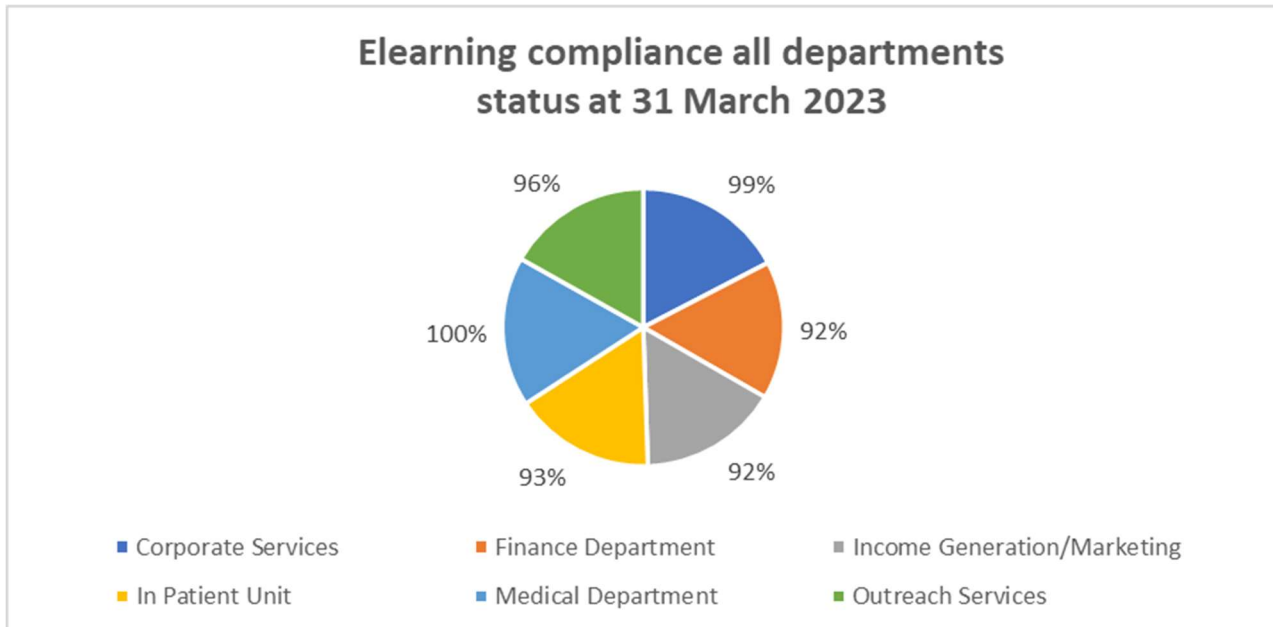
Direct monitoring continues to date whilst the CQC further develops their inspection approach.

The implementation of a new CQC inspection framework was previously adjusted to support the system in dealing with winter pressures. In summer, the CQC plan to roll out the new provider portal and assessment framework later in 2023 to carry out assessment of providers in the new way.

3.2 Education Training

Statutory eLearning

The Hospice Education Group meets regularly to oversee all the Hospice training activity including the eLearning modules. The target compliance rate for eLearning is 95%, the graph below illustrates the compliance by department; the average rate being **94.06%** on 31 March 2023.



The Education Group is currently reviewing the eLearning modules to:

- Ensure we **optimise our resources** whilst making sure our teams have access to essential training.
- We are currently developing **competency frameworks** to support staff development.
- Work collaboratively as part of our local system to develop an **education strategy** and deliver training across the health, social and VCSE sector.
- Develop our eLearning and training offers to **support staff wellbeing**.
- Review required training intervals in line with priority and risk.
- Review where face-to face learning may provide an enhanced training option.

Clinical Face-to-Face Mandatory Training

In addition to our statutory training requirements, the Hospice Clinical Educator develops and maintains an active in-house training calendar for all clinicians. During the year a total of **53 face-to-face training sessions** were delivered.

The training agenda has been particularly challenging during 2022-23 due to the infection control measures in place and unprecedented challenges upon the local health and social care system. We have been able to adapt our training delivery to support system pressures, whilst maintaining patient safety. We have achieved this through the delivery of ad hoc training sessions internally and by offering external training to support partners.

In support of integrated working with our partners, the **Advance Care Planning programme** was offered across the Warrington Place, and all sessions were well subscribed.

To further develop network training, specifically relating to **Opening the Spiritual Gate** and **Palliative Care Skills Study** sessions, the Hospice actively participates in the Warrington and Halton Palliative and End of Life Care Education and Training Steering Group.

Participation has promoted review of the Hospice training agenda for all its staff. A new training and **competency framework** is under consideration that will see further partnership integration in the coming year, in line with the development of system education strategy.



Developmental Training

The End-of-Life Partnership has continued to provide places on the **Leadership Management and Development course**. During 2022, two clinicians successfully completed the leadership and management course. A total of nine staff have now completed this course.

To support Hospice managers in their role, working closely with the People team, an internal leadership programme will be offered to **aspiring leaders in 2023-24**.

Hospice Practice Placements

Medical

The Hospice has a long-standing reputation as an **excellent training placement** by Health Education England and the General Medical Council. The medical team continue to support the general development and training of medics, including both undergraduate and post graduate training. We have continued to support GP specialist trainee placements (GPST) and 4th year medical students from the University of Liverpool.

The University provide with us feedback and this is shared with clinical teams to ensure we continue to provide an exceptional placement opportunity for students.

“St. Rocco's Hospice was a fantastic site to work at and the team should be commended for being helpful round-the-board, from detailed and accessible teaching sessions to offering a supportive ear when topics got serious.”

“The quality of the teaching on this placement was high. Staff at the palliative placement were very helpful and friendly. They were always willing to help us get what we needed and sign us off.”

“The staff of St Rocco's went above and beyond to deliver a fantastic standard of teaching and clinical experience. They were incredibly welcoming and engaging.”

100% of the GPST feedback in January 2023 strongly agreed their educational placement supervisor valued their education and training, directed them to develop their skills, encouraged career development and would recommend the Hospice to friends and colleagues as a place to train in. The overall educational experience was scored as “Outstanding (80%)” or “Very Good (20%)”.

Nursing

In 2022, the Hospice supported student nurses/trainee nursing associates on placements and offered short visits or bespoke placements to several other students. The students were able to gain an understanding of palliative care and how complex patients are cared for at the Hospice. **100% of evaluations were positive** and during 2022 we offered an opportunity to support the successful recruitment of a previous nursing student into a newly qualified preceptorship role.

Part 4 - Quality Markers

St Rocco's has continued its monitoring of quality indicators during the year through the capture and **reviewing of incidents, complaints, clinical audits and feedback** from people who use its services. Analysis in each of these areas identifies learning outcomes to share with staff to facilitate continuous service improvement.

The total number of all incidents logged throughout the year was 150, which includes both clinical and non-clinical incidents. This compares with the figure of 184 for the previous year. A summary of our most frequently presenting clinical incident categories are included in the summary below.

4.1 Summary of Quality Metrics:

INDICATOR		2021/2022	2022/2023
PATIENT SAFETY INCIDENTS			
PRESSURE ULCERS	Category 2 and above (Acquired)	17	6
	Category 2 and above (Inherited)	27	12
SLIPS/TRIPS/FALLS			
SLIPS/TRIPS/FALLS	Total number of slips/trips/falls	31	20
MEDICINES			
MEDICINES	Prescribing and administration	57	45
	Documentation	N/A	5
	Other medicines incidents	8	17
SERIOUS INCIDENTS (SI)			
SERIOUS INCIDENTS (SI)	Reported to ICB Warrington Place	1	0
SAFEGUARDING			
SAFEGUARDING	Safeguarding referrals	4	2 *
	Deprivation of Liberties Safeguards (DoLS)	5	6
CLINICAL COMPLAINTS			
CLINICAL COMPLAINTS	Informal	4	2
	Formal	1	0

* Not a Hospice incident

Incident reporting trends can be seen to reflect predominantly low or no harm.

The metrics for 2022-23 show a **decrease in the number of pressure ulcers** (both acquired and inherited) and also in the number of **slips/trips/falls**. Through our action plan we have focused on education in these two key areas.

Overall, the medicine incidents remain on a par with the previous year, although a change in the recording process has produced varying data. In 2022-23, a new categorisation was introduced for "Documentation", whereas previously this data was included under "Administration".

Following the implementation of the EPMA system we are maintaining close oversight of incident reporting to understand the impact. During the first quarter an internal review will be completed as part of this oversight and presented to the Quality and Safety Committee.

4.2 Clinical Audit and Research

Clinical audit is drawn upon at St Rocco's as part of our continuous learning cycle, helping us to understand how and to what degree we are meeting our evidence-based standards. An annual audit plan is overseen by our Clinical Audit Group and reported through our Quality and Safety Committee.

While the COVID-19 pandemic continued to impact the audit plan throughout 2022-23, progress was made in a number of audit areas. We completed **7 internal and 4 external audits**, an example of which are below:

INTERNAL AUDIT ACTIVITY																	
Falls	<p>Completed in August 2022 and presented at ICB Warrington Place Contracts & Quality Performance Group (CQPG) meeting.</p> <p>Audit results found the falls risk assessment was completed in all cases. Actions from the survey:</p> <ul style="list-style-type: none"> • Raise profile of delirium as a possible factor in patient falls to clinical team via team meetings and staff training. • As getting to the toilet is a major factor in patient falls, emphasise the importance of staff being more proactive rather than reactive in supporting patients with toileting needs. Further training and education on use of comfort round form. • Continue to explore new technology with Warrington Borough Council that may help prevent falls. Existing falls alarms not always helpful as patients sometimes refuse to use them or they take them off. Falls alarms rely on an immediate response from a staff member who may not be in the vicinity. New technology that alerts staff earlier that a patient is possibly on the move may be helpful. <p>Audit outcomes will be incorporated in the next round of Falls Prevention training. A thematic falls review is in process for CQPG for 2023-24</p>																
Medicines Reconciliation	<p>Completed in January 2023 and undertaken by one of the Hospice GPST doctors. The outcomes were:</p> <ul style="list-style-type: none"> • A formal checking process to ensure the "To take out" (TTO) medication list concurs with that included in the patient discharge letter. • To document failed and discontinued medication separately on the patient discharge letter. <p>The implementation of EPMA will require future audits to be redefined.</p>																
Pressure Ulcer	<p>Completed in December 2022. Results showed an improvement on the previous audit:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th style="text-align: left;">Sub Topic</th> <th style="text-align: center;">2019 Audit</th> <th style="text-align: center;">2022 Audit</th> </tr> </thead> <tbody> <tr> <td>Policies & Procedures</td> <td style="text-align: center;">92.9%</td> <td style="text-align: center;">100%</td> </tr> <tr> <td>Management on Admission</td> <td style="text-align: center;">86.9%</td> <td style="text-align: center;">96.7%</td> </tr> <tr> <td>Ongoing Care</td> <td style="text-align: center;">72.7%</td> <td style="text-align: center;">88.2%</td> </tr> <tr> <td>Management on Discharge</td> <td style="text-align: center;">100%</td> <td style="text-align: center;">100%</td> </tr> </tbody> </table> <p>Learning outcomes were included in the Prevention of Pressure Ulcer training sessions held November 2022 – February 2023.</p>		Sub Topic	2019 Audit	2022 Audit	Policies & Procedures	92.9%	100%	Management on Admission	86.9%	96.7%	Ongoing Care	72.7%	88.2%	Management on Discharge	100%	100%
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Management on Discharge	100%	100%															

EXTERNAL AUDIT ACTIVITY	
HTC Blood Transfusion	Three mandatory audits have been completed and notified to the Hospice for the quarters April-June 2022, July-September 2022, October-December 2022. The final January-March 2023 audit report is pending confirmation by the Hospital Transfusion Committee. The audit signifies the partnership working between the Hospice and local hospital, further enhanced by the provision of staff training.
Pharmacist Controlled Drugs (CD)	In previous years the Pharmacist CD audit has been completed every quarter. In October 2022, the Clinical Audit Group meeting reviewed this frequency. Having sought advice via the CD LIN, North West Hospice Network and with reference to relevant regulations, a decision was made to request an annual audit. This will be timely with the Controlled Drugs Accountable Officer (CDAO) audit so that an audit occurs every 6 months.
Infection Control	This mandatory annual audit was delayed slightly in 2022 due to COVID outbreaks and took place in November. The overall audit score realised a compliance rate of 94% which is publicly advertised via display notices in our Vitality Centre and Inpatient Unit.
Pallaborative NW Breakthrough in Cancer Pain	The Medical Director took a lead role in this regional North West audit which was completed in 2022. A presentation was made to the Palliative Care Congress in Edinburgh March 2023 and a summary presentation paper was provided to the Hospice Quality and Safety Committee in April 2023. Audit results will be shared at a future Journal Club event.

The Clinical Audit Group have set the audit plan for the forthcoming year, which currently features a total of 10 internal and 6 external audits, for 23/24.

Journal Club

After a successful launch in 2018 to support sharing of learning outcomes from audit, education and advances in palliative medicine, the Journal Club was suspended during the COVID pandemic. The club restarted in early 2022 and meetings became more active again through the 2022-23 year, seeing a total of **7 presentations** across the following subjects:

- ➡ Association of Palliative Medicine
- ➡ Opioid Induced Constipation
- ➡ Medicines Reconciliation
- ➡ Citizens Advice Bureau



Journal Club

Growing Knowledge Together



Invitation

For Doctors, Family Support Team, Physiotherapists, Occupational Health Therapists and Community Macmillan Nurses.

Not sure whether you should attend?

Please ask Gill Kirkpatrick...



What is this?

Somewhere to share a discussion about audits, education, courses attended.

An open forum to evaluate articles and literature.

A place where literature and research can be translated into best practice.



When & Where?

Vitality

12.30pm - to last no more than half an hour (bring your lunch).



Part 5 - Patient & Family Experience

5.1 Feedback Surveys

Learning from the experiences of our patients and those important to them is an essential part of our work at St Rocco's. Again, this information provides opportunity to understand where our services are working well and areas where we could perhaps make improvements. To that end we seek feedback in a number of ways and at different times; the information we receive is then reviewed by our User Feedback Group and service leads and teams. The following section provides a summary of our activity in this area throughout the year.

During the year Hospice feedback activity has included:

- ➔ **Feedback Friends**
- ➔ **Outreach Services**
 - Hospice at Home*
 - Bereavement Café*
- ➔ **Warrington Integrated Palliative Care Hub/Palliative Virtual Ward**
- ➔ **Art Therapy**
- ➔ **Compliments**
- ➔ **External Surveys – FAMCARE**

Feedback Friends

The volume of user feedback returns in 2022-23 is consistent to that of previous years since the introduction of the Feedback Friends initiative in 2018, with the exception of a significant drop during the first COVID-19 pandemic restrictions:

A selection of the total number of 119 free text comments received are featured throughout this report.

Outreach Services Feedback

Hospice At Home

During the year, two surveys were conducted. Over the two surveys a total of 30 questionnaires were sent to the family members of patients who had died, realising a 50% return rate of 15 forms.

QUESTIONS		YES	NO	N/A	No Response
1	All staff I/we came into contact with introduced themselves	15			
2	Staff treated me/us with respect and dignity	15			
3	My privacy and confidentiality were maintained	14	1		
4	Staff listened to my/our concerns & responded appropriately	14	1		
5	I/we received full and clear explanations of the care that was needed	15			
6	I/we were involved as much as I/we wanted to be in decisions about care and treatment	12	2	1	
7	I/we am happy with the care I/we receive	12	1	1	1
8	I/we were given all the information we required about the Hospice at Home Service, including leaflets	9	6		
9	If you wish to do so, do you know how to raise any concerns or complaints about any aspect of our services?	8	5	2	
10	Would you recommend this service to your family & friends?	9	4	2	

The first survey results produced a number of low “Yes” scores for questions 6–10. As with all Hospice surveys, feedback remains anonymous unless contact details are provided. However, on this occasion it was possible to contact all individual survey responders and understand the reason behind the responses. This has supported us to develop actions, where required, to improve our services. An example of this is we have revised our approach to improve the provision of information. All users contacted spoke very positively about the Hospice at Home night sits which is in keeping previous survey feedback, as summarised by latest comments shown below:

“Excellent all round.

The only thing would be a follow up call once the sitting ended to help with bereavement.”

“The night sitters were very supportive.

Thank you and to the nurse and MacMillan nurse too.”

“I am very grateful to Hospice at Home for the lovely young lady who gave me a good night’s sleep whilst she took excellent care of my husband 3 nights per week until his death.”

Bereavement Café

The Bereavement Café has been an outstanding success during the year. From the founder café opening at Stockton Heath, **a further café was opened** at Bank Quay Park in July 2022. Both venues offer a drop-in session once a month.

Over the year, a total of **21 drop-in sessions** have been held, with a total of **264 drop-in visits**. We received 138 feedback forms, all of which highly commend this service.

A selection of feedback received is below:

“Really helps me to get my emotions out.”

“Looking forward to the new café opening. I really appreciated the support from volunteers and others in my situation.”

“Really good atmosphere. Very grateful.”

“Wonderful as always. Highlight of my month.”

Publicity is widespread through the town and surrounding areas; this has seen the service accessed by people from Warrington, Northwich, Runcorn and Halton. Many GP surgeries refer their patients for bereavement support. The café sessions have been attended by Warrington Social Services. In addition, Talking Matters Support Workers have attended with their bereaved clients, many of whom have learning difficulties, mental health issues and live challenging and difficult lives.



The two café venues are supported by a cohort of 19 volunteers, one of whom is an experienced signer and interpreter and therefore the café can offer **support to people from the deaf community**. Additionally, **therapy/assistance animals are welcomed**, and people can, and do, bring in well controlled animals.

In further applause of the Bereavement Café, the service lead spoke with radio presenter Helen Jones on her BBC Radio Merseyside Sounds Show on Monday 28 November 2022.

The Bereavement Café form has been revised to capture demographic information for the coming year to help inform future service provision.

Art Therapy



The Hospice was pleased to welcome the introduction of a new art therapy service commencing in October 2022. The therapy is provided one day a week by a student in her 4th and final year of her university course on this subject. Following referral, all clients are offered 3 assessment sessions to ensure the therapy style is suitable for them. Following this, 12 sessions are offered.

For the period up to the end of April 2023, the therapist recorded 6 referrals had been made to the service via the Counselling and Emotional Care Team (CAECs), the Craft Group, the Warrington Integrated Palliative Care Hub and the Complementary Therapies Team. A total of **22 therapy sessions** have been offered, of which 17 have been attended. Client feedback is obtained midway through the therapy programme and also upon conclusion. Verbal feedback from two clients at the midway point stated the positive impact sessions had on their wellbeing and were able to identify aims for their therapy and work towards meeting these. The one completed feedback form received gave a very positive view:

"I have really enjoyed the art therapy. It has given me something tangible, a physical way to express how I feel. I also now have these physical images and objects I can use in my continued thought processes. I was a little nervous at first but soon felt comfortable. I realized it was a tool for expression, not a test of my ability or lack of it. There is nothing I would change about the art therapy sessions. I would like to continue with art therapy."

To extend the number of referrals, the therapist has proposed an offer of an art therapy group and will be exploring this further in liaison with the CAEC team and also the Bereavement Café.

Service feedback will continue to be monitored to assess possible procurement of future service provision. Art therapy services are known to exist in other Hospices.

Compliments

During the year a total **of 224 compliments** were logged. These were received via verbal compliments, 'thank you' cards and social media posts. This shows another increase on that recorded for the preceding year, which stood at 200.

The Hospice will review its recording of compliments to ensure it is inclusive of all departments, including clinical services within the Hospice and supporting operational activity in non-clinical departments, shops and at events.

External Surveys

FAMCARE

The Hospice participated in the annual FAMCARE user feedback survey in the summer of 2022 for the 7th successive year. The survey is run by the Association of Palliative Medicine and looks at service evaluation of a bereaved next of kin/relative's satisfaction with end-of-life care received in the Hospice setting and is benchmarked against national data.

The duration of the service evaluation in 2022 was 1 August to 30 September and covered 17 deaths in the period 1 June to 30 August 2022.

The table on the following page illustrates the responses for St Rocco's Hospice in 2021 and 2022 compared to the national hospice data for the same period.



FAMCARE Results

Question		St Rocco's Hospice IPU		Other National Hospice IPU	
		% Very satisfied/ satisfied with service		2021	2022
		2021	2022	1363 forms returned (all services)	1245 forms returned (all services)
NUMBER OF FORMS ISSUED (St Rocco's)		19	17	494 returns (IPU)	522 returns (IPU)
NUMBER OF FORMS RETURNED (St Rocco's)		6	7		
1	The patient's comfort	100%	100%	93%	94%
2	The way in which patient's condition and likely progress had been explained by the palliative care team	100%	100%	87%	89%
3	Information given about side effect of treatment	67%	86%	64%	65%
	Not relevant to situation	33%	14%		
4	The way in which the palliative care team respected patient dignity	100%	100%	93%	94%
5	Meetings with the palliative care team to discuss the patient's condition and plan of care	100%	100%	77%	84%
6	Speed with which symptoms were treated	100%	100%	85%	86%
7	Palliative care team's attention to the patient description of symptoms	83%	100%	80%	82%
	Not relevant to situation	17%			
8	The way in which the patient's physical needs for comfort were met	100%	100%	91%	91%
9	Availability of the palliative care team to the family	100%	100%	90%	89%
10	Emotional support provided to family members by the palliative care team	100%	100%	84%	88%
11	The practical assistance provided by the palliative care team (eg bathing, home care, respite)	50%	71%	65%	68%
	Not relevant to situation	50%	29%		
12	The doctor's attention to the patient's symptoms	100%	100%	87%	87%
13	The way the family was included in treatment and care decisions	100%	100%	83%	87%
14	Information given about how to manage the patient's symptoms (eg pain, constipation)	67%	71%	65%	65%
	Not relevant to situation	33%	29%		
15	How effectively the palliative care team managed the patient's symptoms	100%	100%	91%	92%
16	The palliative care team's response to changes in the patient's care needs	100%	100%	90%	88%
17	Emotional support provided to the patient by the palliative care team	100%	100%	85%	86%

Summary

The table shows that **St Rocco's exceeds the national data set across all questions**. The table also shows **an increased satisfaction rate** in 2022 compared to the previous year over 4 areas. Four individual text comments were received, all highly complementary of St Rocco's:

"The team offered/provided such an amazing support to both my mum and family. I cannot thank them enough. We as a family will fund raise to help keep this wonderful facility available. God Bless."

"I have nothing but admiration for the palliative care team. They are rare individuals who should be immensely proud of themselves, they carry out their roles with dignity, ensuring patient care is at the forefront. I could not imagine what it would have been like going through my own personal loss without the aid and assistance from this fantastic team. They were there when my wife and I needed them and for that I will be forever/eternally grateful."

"I know the marks are high but my wife had MND and there is no treatment only pain relief and to be made as comfortable as possible to which the team did a wonderful job in the final days of her life and they will always have my thanks."

The FAMCARE report will be shared with the Board of Trustees, Quality and Safety Committee and members of staff.

5.2 Sharing User Feedback and Learning Across the Organisation

An overview of service user feedback is shared with staff via summary display notices on information boards and also copied to the Hospice website. We aim to introduce additional mechanisms to share learning including our newsletters, reflective sessions and information cascades through our internal governance processes.

As part of its strategic priorities, the Hospice will also review its **internal communications plan** to ensure the sharing of learning outcomes and/or actions are optimised; this was in process during 2022-23.



Part 6 – Staff & Volunteer Experience

6.1 Our People

Our workforce has shown an exceptional amount of **commitment, dedication and motivation** again throughout this year. We have been in a position to maintain and grow our total workforce which is an achievement in the current recruitment market.

Recognising that our people are our most valuable asset we have identified this area as a key priority in our current strategic work. We have therefore recently invested in our people function and over the course of the next year we will prioritise the following:

- Developing our workforce plan to support us to forecast our future workforce needs. This is essential to help us utilise our resources wisely to support the development of our staff but also to ensure our future sustainability.
- We will also evaluate our current health and wellbeing offer. This will provide the opportunity to refresh and relaunch our existing health and wellbeing strategy.
- We will draw the clear synergies between our patient safety and Just Culture work by ensuring these principles are reflected in our people policies and procedures.



6.2 Volunteers

Volunteers are integral to the services that St Rocco's Hospice provides and we aim to create an environment where we are open to new ways of working to **enhance and develop the volunteering programme** to support the vision, mission, and values of the Hospice.

The Voluntary Services team are **proactive** in our approach and strive to be supportive by being **visible, accessible, and welcoming** in our engagement with our volunteers. We have had a good year for recruitment, which is demonstrated in our quarterly reports. We understand the need that more creative work needs to be done by the whole Hospice team to make sure we are raising the profile of volunteering, particularly within our shops.

We continue to develop and support our successful partnership working with the Warrington network at all levels through **influencing, advising, and guiding**.

After coming through the pandemic, Voluntary Services began a cleanse the volunteer data we hold. This cleansing has significantly changed the number of active volunteers we have but is now a true reflection of our actual numbers. We now have **374 active volunteers** with some volunteers taking on more than one role; therefore, this equates to **420 roles** being carried out within the Hospice and shops. The valuation these volunteers bring to the Hospice is:

	Hours	Value
Hospice	11,843	£144,753
Shops	52,169	£637,644
TOTAL	64,012	£782,397



In 2022, we held a successful awards ceremony which saw **146 volunteers receiving an award**, ranging from 2 years to 35 years. In total, 26 of our volunteers have completed 20 years or more, which is an achievement to be celebrated, especially with the ever changing and challenging face of volunteering nationally.







Cheshire and Merseyside

Quality Account Statement 2022-23

St Rocco's Hospice

I am writing on behalf of partners to express our thanks for the submission and presentation of St Rocco's Hospice Quality Account for 2022 – 2023. This statement provides the response collectively on behalf of NHS Cheshire and Merseyside ICB Warrington Place and our partners at Warrington Borough Council.

In your 22-23 priorities, the introduction of the patient safety role is exemplary in terms of patient safety requirements and having a trustee with a dedicated lead role was heartening to see. There will be significant changes in terms of the management of patient safety over the coming year, and having dedicated resources is to be applauded. The Palliative Virtual Ward initiative demonstrated a true partnership approach, and I was pleased to read this has influenced national rollouts. The Covid-19 pandemic impacted on all systems and learning from what went well, what we will continue and what needs to change is a positive response. Reviewing services delivered by the Vitality Centre, will I am sure benefit the wider population in terms of offering your expertise in outreach services.

The priorities set out for 2023/24 will build on the exemplary work to date and see St Rocco's continue to be a significant partner in the delivery of palliative support services.

Caroline Williams, the incoming Director of Adult Social Care has provided her comments in your Quality Account as follows:

"Our hospice is such an important and highly valued part of our system, and I am delighted to see the consolidation and progress Sonya and the team are making especially in such a challenging financial environment. The quality of care, underpinned by a strong values driven culture are palpable in the hospice and reflected in the Quality Account.

During the winter months, we worked together to support people who may have otherwise spent their last days in hospital waiting for a care home to transfer to the hospice, making a material difference to their experience and that of the people closest to them. Building on this success, work continues under Sonya's leadership to become an even more of a specialist, peer partner organisation in our town responding to people, partner and system needs.

WBC as an enabling partner remains fully committed to continuing to work with and support the hospice in fulfilling its strategic aims."

Lydia Thompson, CEO Healthwatch Warrington has also provided feedback:

"Clear Quality Accounts and reflects what we hear from the Warrington Public.

It is clear that there is a learning culture, and processes to capture patient experience. This has been used to allow St Rocco's to improve, year on year.

The priorities for improvement are challenging and are demonstrated.

Focus on service user experience has driven quality. For example, opening the second bereavement cafe.

Appointed Patient Safety Lead and encourages transparent reporting.

Virtual wards being evaluated.

Implemented incident reporting management system (Vantage) across all divisions in January 23.

Worked with community and volunteers to improve Vitality Centre, recovering from Covid.

Future priorities are well selected, patient safety, clinical effectiveness and service user experience.

I would like to add that with the positive appointment of Sonya and Sara the Hospice has increased partnership working and processes.

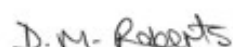
One area I would like to see increase, is the 'Independent' feedback from service users, although I would like to confirm that this is underway with Healthwatch Warrington.

Excellent work, well done."

As partners, we look forward to working with the Hospice Team during 2023 – 2024 to observe your work and progress on the above priorities and your continued improvement in service quality.

Finally, I would like to take this opportunity to say thank you to you and the team at St Rocco's for their care and commitment to the ensuring the people of Warrington receive high quality, safe and effective care and for your on-going commitment to integrated partnership working.

Yours sincerely



Denise Roberts
Associate Director of Quality and Safety Improvement
NHS Cheshire and Merseyside ICB
Halton Place and Warrington Place

We welcome feedback on this Quality Account. If you would like to do this, please email enquiries@stroccos.org.uk or write to:

Sonya Currey
Chief Executive Officer
St. Rocco's Hospice
Lockton Lane
Warrington
WA5 0BW

