

# Quality Account

1 April 2024 - 31 March 2025



#### **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 12*

#### Part 2 – Priorities for Improvement

- 2.1 What We Achieved Last Year 2023-2024 Page 13
- 2.2 What We Will Achieve Next Year 2024-2025 Page 14

#### Part 3 - Quality of Services

- 3.1 Statement From the Care Quality Commission *Page 17*
- 3.2 Education & Training *Page 18*

#### Part 4 – Quality Markers

- 4.1 Summary of Quality Metrics *Page 20*
- 4.2 Clinical Audit and Research Page 21

#### Part 5 – Patient and Family Experience

5.1 Feedback Surveys *Page 25* 

#### Part 6 – Staff and Volunteer Experience

- 6.1 Our People Page 30
- 6.2 Volunteers Page 31

## Part 7 – Statements from Healthwatch Warrington and Cheshire & Merseyside Integrated Care Board – Warrington Place

- 7.1 NHS Cheshire and Merseyside ICB Statement *Page 32*
- 7.2 Healthwatch Warrington Statement *Page 34*

### Part 1 - Overview

#### 1.1 Statement from The Chief Executive



St. Rocco's is an independent registered charity providing support to our Warrington community and partners with palliative and end-of-life care needs, helping them to live well and have a dignified death with individualised care.

It is with our pleasure that we share with you our Quality Account 2024-25 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. This is our opportunity to demonstrate our achievements and tell you about how well we have delivered our services over the last 12 months.

St. Rocco's Hospice was officially opened in 1985 and so at the start of 2025, we began a year of celebrations to mark 40 years of hospice care. Throughout this time, we are proud that we have always seen the person and not their illness, remembering that each of our patients has a unique history.

I am extremely proud of our incredible workforce, and every day they deliver care and compassion through dedication and hard work, and they are a vital part of our community. No matter what area our teams work in, they all play a pivotal role in ensuring that we are delivering the highest standard of care.

As a charity, St. Rocco's relies on our committed volunteers, including our supportive and passionate Trustees, along with students, local businesses and community supporters – we would like to share our thanks to this never waning support. Without this we would not be able to continue.

During 2024, we worked closely with the Patient Safety Lead at Cheshire and Merseyside Integrated Care Board to implement the National Safety Strategy and Patient Safety Plan so that we can continuously improve patient safety, building a safer culture. We also listened to feedback from patients and partners which led to the development of a medical-led palliative virtual ward, and we welcomed Healthwatch Warrington to undertake an independent evaluation of our Hospice to support our ongoing process of improvement.

As demand for our services rises, with people with life-limiting conditions living longer, finances are becoming increasingly challenging. Healthcare funding attributed to hospices is already under pressure nationally and this is no different for us. However, we also recognise that challenges bring opportunities for change and development. Without a significant shift in how we operate, and how we increase and secure our financial stability, our ability to provide the compassionate and individualised care we are known for is at risk.

Over the next 12 months, we will develop our services to make sure they are resilient and fit for the future using data and feedback, and we will explore our digital offer for new ways of working. We will grow our community provision, further developing our virtual ward to provide specialist end-of-life care for patients at home. We will share our learning to support the advancement of National Virtual Wards. We will continue to focus on high quality and safe patient care, embedding a just culture and we will strive to offer equitable access to our care in response to the changing needs of our population, listening to them at every step and taking time to understand them.

I would like to thank you for taking the time to engage 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

I have been a member of the Board of Trustees at St. Rocco's Hospice for 8 years now and every day I am proud of how positively the Hospice is spoken about throughout our Warrington community. This is testament to the hard work of everyone involved and is a reminder of the passion and dedication of our workforce and team of volunteers.

It is a pleasure and a privilege to work alongside a devoted and knowledgeable Board of Trustees. We are here to support and advise St. Rocco's staff so that they can continue to deliver an effective and imperative service to those who need it at their most vulnerable time.

However, we are not complacent. It is well publicised in the media that hospices continue to face financial challenges. In 2024, Hospice UK published an urgent call to the government to urge them to review their commitment to end-of-life funding as many hospices are running in deficits which threaten their closure.



The Board is responsible for holding the senior leadership to account in legal terms and we monitor the day-to-day running of the hospice. We want our community to feel confident and assured that we offer a high standard of care throughout all our services whilst being responsible and ethical with the money we receive. We monitor the Hospice's financial situation very closely, implementing changes to help to protect the future of St. Rocco's.

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.

We would like to thank all our patients, and their families and carers for sharing with us their comments and suggestions about what the Hospice does well and how we can improve. We don't want to stand still, and our aim is to constantly 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.

This report is an opportunity to share an accurate reflection of the work that was carried out at the Hospice during 2024-25 and we hope you find it interesting and reassuring. We welcome your engagement and feedback through this Quality Account to support us in our aspiration to make every day count for those that need us.

#### 1.2 Vision and Values

Our vision at St. Rocco's is to care for adults in our community with a life limiting illness wherever and whenever they need us.



#### Saying Thank You:

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



Thinking differently and being open to change.





#### Resilience:

Having resilience physically, psychologically, emotionally, and financially.

#### Outreach:

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





#### Compassion:

Care in all we do.

#### Connection:

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





#### **Outstanding:**

Trying to be the best we can be

#### Standards:

High quality care in all that we do.



#### 1.3 Our strategic focus

During 2024, our focus was led by four strategic principles, supported by an annual strategic delivery plan approved by our trustees.

Our key strategic principles are:

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 in 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, Faith and Social Enterprises (VCFSE) partners to provide care to our community.



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 work closely with partners to provide a timely response whilst offering continuity through a single point of contact. During 2024 as part of the Warrington Palliative and End-of-Life Care Services review, a review was undertaken of the Integrated Palliative Care Hub. This review was led by the Senior Commissioning Manager in palliative and end-of-life care to understand the changes in the population demand and how the integrated hub can be transformed to support the changing population needs. A new model is planned to be implemented in 2025/26.

During 2024-25, the Palliative Virtual Ward (PVW) medical model continued to develop and was incorporated into the joint virtual wards offer at Place, including the Frailty Virtual Ward and Acute Respiratory Virtual Ward. 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 and learning** from the first year of the nurse-led pilot. We were able to share our learning and integrated approach to virtual wards at Place to support the development of the Frailty Virtual Ward.

During 2024/25 Healthwatch Warrington have supported us by conducting an independent evaluation of the Integrated Palliative Virtual Ward. This evaluation ended in April 2024 and was published and shared June 2024.

#### **Community Outpatient Services**

Our community outpatient service is led by our Palliative Care consultant and supported by our senior clinical team with the focus around **complex symptom control** and improving quality of life. The Hospice outpatient clinics at St. Rocco's have been running for over 13 years.

We have continued to offer our **outpatients and ascites services** throughout the year to ensure we can maintain community access for this specialist procedure, reducing the need for patients to access the hospital setting. We have also supported developing our Advanced Nurse Practitioner, working within the medical team, to offer a nurse-led outpatient clinic.

#### **Inpatient Unit**

During the year we have maintained, where possible due to safe staffing levels and patient acuity, our ten-bed inpatient unit. 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. During 2024-25 we have continued to support our neighboring hospice to provide **Specialist Palliative Care for complex patients**.



#### **Counselling and Emotional Care (CAEC)**

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.

Bereavement support is offered through twice monthly bereavement support cafés in Warrington. The cafés run as a drop-in service and are open to anybody who is grieving. They are assisted with the help of **25 volunteers** who provide one-to-one listening support or the option of connecting with others experiencing a similar bereavement for **peer-to-peer support**.

The cafés rely on volunteers from a vast array of backgrounds and skills including counsellors, teachers, engineers, nurses, social workers, and many others who have benefited from CAEC services in the past and want to give something back to St. Rocco's.

Over the last 12 months the cafés have supported over 370 people. The team received 124 feedback forms, and 100% of respondents said they benefitted from the café and 100% said they would recommend it to a friend.



"A lovely atmosphere, it was great to talk to other people.
The counsellor was lovely.
Thank you."

This year, the CAEC Team have introduced new initiatives, including **Letters to Loved Ones**. This project offers anyone the opportunity to write their thoughts, wishes or a special message on wildflower seeded paper and post it in the box. When the box is emptied in Spring, the messages are planted in a special flowerbed in the hospice gardens where the seeds grow and flourish. Our community can come and visit the hospice gardens at any time to see their flowers and take a moment to remember their loved ones.

In November 2024, our CAEC team was nominated for a "Shine a Light" Award through the Good Grief Trust because of their commitment to deliver outstanding support and determination to reach as many people as they can through innovation and new ways of working.



#### **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 2024-25 we continued to provide additional support to enable people to stay at home and assist our community providers to source timely packages of care. Unfortunately, following a change in the Continuing Healthcare commissioning process, the Hospice at Home service was no longer viable and is at present no longer provided through the Hospice. We will remain committed to exploring future opportunities in the areas in line with population and system needs.

#### **Vitality Centre**

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

Complementary therapies
Relaxation
Activity therapies
Dedicated symptom control clinics

Our volunteer-led groups continue to grow and offer community-led support in the Vitality Centre. This includes the **hospice choir**, **craft therapy group**, **gardening group**, **yoga and wellbeing** and **relaxation group**.



During 2024-25, following support from Cheshire Community Foundation, we continued to be able to develop a community-led offer providing **group support for carers and patients**. The **We Care Coffee Group** meets on Tuesday afternoons and has continued to provide psychological, social and financial peer support. The group was initially facilitated by our outreach team, working closely with our volunteers to support a volunteer-led sustainable model working in partnership with wider partners including social care and VCFSE.

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

#### **Harp Therapy**

During 2024-2025, we supported Cathy, a trainee **harp therapy student**. Harp Therapy offers support emotionally, psychologically, physiologically, and spiritually. Harp music promotes relaxation and support through a cradle of sound. It can ease discomfort and promote calmness and wellbeing. During her placement, Cathy volunteered 107 hours with time spent on the in-patient unit, Vitality Centre groups, Bereavement Café and at wellbeing sessions.

"We experienced a truly magical and beautiful moment with our dear friend.

She was serenaded by the Harpist in a peaceful and tranquil manner, playing her favourite song."



#### 1.5 Our funding

St. Rocco's Hospice is a local charity and costs around five 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 2024-25 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. This grant funding was allocated Capex funding and has supported a project into 2025 to develop and support transformation of clinical services and BI data, to ensure our future operating model is data driven.

A 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 ICB Warrington Place, the latter being a requirement of our NHS contract terms. We also use this data when evaluating existing or developing new services.

SERVICE		Activity 2023- 2024	Activity 2024- 25
MEDICAL OUTPATIENT	Consultations	244	255
	Ascites *	2	10
	TOTAL	246	265
IN PATIENT	Admissions	198	152
	TOTAL	198	152
	Average length of stay (days)	14.9	17.4
HOSPICE AT HOME *note service	Nurse assessment visits	45	8
ceased provision mid-year (see	Number of sits	277	104
page 10)	TOTAL	322	112

<sup>\*</sup>Within our IPU we also provide Ascitic drain procedures, this is included in our IPU activity.

During 2024-25 we have developed our provision of ascites clinics through supporting patients within the inpatient unit as a day case.

Our outpatient appointments have seen a small increase. During 2024-25 we have seen a small decrease in the number of patients within the inpatient unit and patient flow, which is reflected in the increase in length of stay. This is reflective of the increasing complexity of patient needs and system pressures to support discharge into the community.





## Part 2 – Priorities for improvement

## 2.1 What we achieved last year 2024-2025

What we wanted to achieve	Progress we have made
Patient Safety  National Patient Safety Strategy	During 2024 we worked closely with Cheshire & Merseyside Integrated Care Board patient safety lead and implemented the National Patient Safety Strategy and Patient Safety Plan. During this implementation phase, we have focused on the cascade of training and supporting teams with the transition to the Patient Safety Incident Review Framework (PSIRF).
Clinical Effectiveness  Palliative Virtual Ward	During 2024-25 we continued to listen to feedback from patients and partners and continually improved and developed the Integrated Palliative Virtual Ward. During 2024 we developed a medical-led Palliative Virtual Ward, working with community and acute partners to ensure a system approach and delivery of care through the virtual ward model.  Healthwatch Warrington have undertaken an independent evaluation of the Palliative Virtual Ward to support continual improvement and development.  The Palliative Virtual Ward currently contributes significantly to reducing system pressures, with a focus on admission avoidance and early supported discharge to support patient flow in the acute trust; over the last year it has supported over 180 patients, and those important to them, to remain at home rather than be in a hospital bed.
Service User Experience  Review services delivered from our Vitality Centre	During 2024-25, following support from Cheshire Community Foundation, we continued to be able to develop a community-led offer providing group support for carers and patients. The We Care Coffee Group meets on Tuesday afternoons and has continued to provide psychological, social and financial peer support. The group was initially facilitated by our outreach team, working closely with our volunteers to support a volunteer-led sustainable model and working in partnership with wider partners including social care and VCFSE. We look forward to 2025-26 to further develop our community-led offers.  During 2024-2025 we supported a trainee Harp Therapist to complete over 100 hours of volunteer placement work at the Hospice. During this time, we were able to offer a wider choice of therapy support for our patients, those important to them and also our workforce, and we are currently exploring funding opportunities to offer harp therapy for an extended period.  Working collaboratively with Warrington Carers Hub (N-Compass) we supported an Afternoon Tea for carers. This provided an opportunity to listen to our community feedback to help us review the services offered at our Vitality Centre.

#### 2.2 What we will achieve next year 2025-2026

Looking forward to 2025-26, our improvement priorities are closely aligned to the review of our strategy and 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 consistent with the wider needs of this community.

Our priorities for 2025-26 continue to focus on achieving excellence in:

**Priority 1. Growing our community offer** 

Priority 2. Offering equitable access to high quality palliative care

Priority 3. Developing our services in a resilient way to make sure we are fit for the future



#### **Priority 1: Growing our community offer**

We will continue to develop our palliative virtual ward to provide specialist palliative and end-of-life care for patients at home. We will continue to **share our learning** with partners, locally and nationally, to support the development of National Virtual Wards.

Following the successful implementation of Vantage incident and risk reporting software and using the Quality Improvement Cycle to triangulate themes and trends of incidents, we will focus on quality improvement and targeted training. In line with the Patient Safety Strategy (2019) we will continue to implement the Patient Safety Strategy which has three primary aims: **insight, involvement, and improvement**. With a focus on quality improvement to include new models and ways of working, we will continue to grow our outreach services whilst delivering high quality and safe patient care.

We will continue to adopt organisational people policies and patient safety procedures to embed a **just culture**. We will continue to implement a speak out culture, encouraging people to speak up in a safe and supportive environment.



#### **Priority 2: Offering equitable access to high quality palliative care**

In response to the changing needs of our population, we will continue to work with our community to reach our seldom heard population and take time to understand them. As we learn more from our community we will continue to develop and adapt our **integrated palliative care hub**.

We will work with the hospice sector in reducing the stigma of death and dying and preconceptions of hospice care through providing clarity to our community and partners on our service provision.



## Priority 3: Developing our services in a resilient way to make sure we are fit for the future

We will work with our system partners and use system data to understand the needs of our future population to be able to adopt our models of care delivery for a sustainable service offer fit for the future. We will ensure future transformation of services is **data driven** and in collaboration with system partners and our community.

#### Our commitments are:

- To develop our feedback mechanisms to inform our future service offers
- To continue to support our volunteer led services and provide support and guidance to our volunteers to further expand our volunteer led services
- To develop our digital offer for new ways of working









## Part 3 - Quality of services

#### 3.1.1 Statement from the Care Quality Commission (CQC)

To provide our services, we need to meet essential quality and safety standards specified in the Health and Social Care Act 2008 (Regulated Activities) Regulations 2014 (part 3) and the Care Quality Commission (Registration) Regulations 2009 (part 4).

During March 2025 we received an unannounced focused CQC inspection. No immediate concerns were raised following the 3-day inspection and subsequently a data return has been submitted to inform the final report. We are expecting to receive our report during 2025.

Our previous 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 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.





#### 3.1.2 Enter and View Healthwatch

Healthwatch Warrington Authorised Representatives carried out an announced visit in June 2024. The team conduct visits to health and social care premises to find out how they are being run and make recommendations about where there are areas for improvement.

The report stated: 'The staff are dedicated and provide an excellent service with the support of amazing volunteers. Patients are always treated with dignity, and they were very complimentary of all the staff and the service provision.'

#### 3.2 Education and 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%** and is monitored internally by the division on a monthly basis and reported quarterly to our ICB Quality team.

#### 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 2024-25 **face-face training sessions** were delivered to support clinical competencies and development.



#### System Education for Palliative and End-of-Life Care

We delivered training to Warrington Borough Council social care teams to **educate others** to deliver optimal care. This formed part of our operating model to deliver our mission to work collaboratively with our community and partners to support people affected by life limiting illness to live well with dignity, comfort and choice towards the end of their life.

#### **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 continues to support the specialist 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 provides feedback, and this is shared with clinical teams to ensure we continue to provide an exceptional placement opportunity for students.

#### **Student Feedback:**

'All staff at St Rocco's have been so kind and helpful during my entire placement and I can't express enough how rewarding it is to be on a placement where we are actively paid attention to and taught.'

'I have really enjoyed my placement at St Rocco's Hospice. Every member of the team has been so lovely and they went above and beyond to make this placement one of the most memorable and inspiring.'

100% feedback strongly agreed or agreed the placement was valuable to their education, the placement organised and ran smoothly, received high quality teaching during clinical skills sessions, received weekly teaching including a patient and on the job training was of a high quality.



#### Nursing

In 2024-25, 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.

We were also pleased to support Izzi, a student at Priestly College. Izzi completed two placements at the Hospice as part of her **T-Level in Health and Social Care**.

'It has been such a great experience, and I have been encouraged to get involved in lots of aspects of care in the Hospice. I have attended the relaxation group, and it was nice meeting patients and carers and being able to help them. I also had the opportunity to attend a training session for clinical staff about how to diagnose certain conditions and spot the signs; it made me more passionate about my career choice.'

'Since starting my course, I have grown in confidence and my social skills have improved. All the staff at St. Rocco's have been lovely and so supportive and encouraging.'

During 2024-25 we also delivered training to Chester University Student Social Workers.

## 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.

During 2024-25 we fully implemented an electronic incident and risk reporting system. A summary of our most frequently presenting clinical incident categories are included in the summary below.

#### 4.1 Summary of Quality Metrics

INDICATOR		2023/24	2024/25	
PATIENT SAFETY INCIDENTS				
PRESSURE ULCERS	Category 2 and above (Acquired)	10	4	
	Category 2 and above (Inherited)	13	20	
SLIPS/TRIPS/FALLS	Total number of slips/trips/falls	17	13	
MEDICINES	Medication incidents	93	60	
SERIOUS INCIDENTS (SI)	Reported to ICB Warrington Place	1*	0	
SAFEGUARDING	Safeguarding referrals	1	0**	
	Deprivation of Liberties Safeguards (DoLS)	0	0	
CLINICAL COMPLAINTS	Informal	0	0	
	Formal	0	0	

\*After Action Review

An increase in inherited pressure ulcers was found to be reflective of patient acuity during 2024-25 following analysis as part of our quality cycle. A decrease in medication incidents was noted in 2024-25, following the successful implementation of Electronic Prescribing and Medicines Administration following an initial post implementation evaluation.

<sup>\*\*2</sup> safeguarding queries were raised in the year but following investigation no safeguarding concerns were found.

#### 4.2 Clinical audit, research and Quality Improvement

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.

During 2024-25 we undertook a planned audit cycle to include audits of priority of patient care delivery. These focused on patient experience and patient safety.

Throughout 2024-25, we completed **FAMCARE and INFECTION CONTROL external audits**, examples of which are below:

#### **INTERNAL AUDIT ACTIVITY**

#### Driving-DVLA Guidance of Medication Adaptation

Driving-DVLA Guidance of Medication Adaptation audit was completed. An earlier audit of medical outpatient clinics was conducted and highlighted a critical gap in providing and documenting driving advice to patients.

A subsequent staff survey revealed a lack of confidence in initiating conversations about driving, uncertainty about specific medical conditions necessitating these discussions, and a desire for more up-to-date information and resources.

During 2024-25 a Quality Improvement project was implemented. This project aimed to enhance the provision of up-to-date, appropriate, and personalised driving advice as part of this holistic approach to care. By addressing this critical yet often overlooked aspect, the Hospice strives to promote the well-being and autonomy of its patients while fulfilling its commitment to the wider community.

While the formal twelve-month data collection period for comprehensive analysis is ongoing, preliminary findings indicate positive reception and implementation of the interventions. The educational presentation has been well-attended by staff, with high satisfaction ratings and self-reported knowledge gains being reported. The patient leaflet has demonstrated an excellent uptake rate, with a significant proportion of patients reporting that they found the information valuable and relevant to their circumstances.

The newly developed protocol has been readily adopted by staff and is currently utilised as a standalone document while the overarching policy undergoes revisions to align with its recommendations. This interim utilisation underscores the perceived value and practicality of the protocol in guiding staff on addressing driving safety concerns with patients.

These initial observations suggest that the project's interventions are on track to improve staff knowledge, confidence, and documentation practices related to driving safety in palliative care. The full extent of the impact will be assessed upon completion of the twelve-month data collection period and subsequent analysis.

EXTERNAL	EXTERNAL AUDIT ACTIVITY				
FamCare	The Hospice participated in the annual FAMCARE user feedback survey in the summer of 2024 for the 10th 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 (see summary below).				
Infection Control	This mandatory annual audit was completed in November 2023. The overall compliance audit score was 99%, which is displayed on notice boards in the clinical areas. All outstanding actions have now been completed. Our internal infection control audits throughout the year ensure we maintain our infection control standards.				

#### FamCare Audit 2024

The data shows that St. Rocco's exceeds the national data set across all questions. Individual text comments were received, all highly complementary of St. Rocco's.

Que	Question		St. Rocco's Hospice IPU % Very satisfied / satisfied with service		Other National Hospice IPU	
		2023	2024	2023 1129 Forms returned (all services)	2024 1017 Forms returned (all services)	
NUN	NUMBER OF FORMS ISSUED (St. Rocco's)		16	483 Returns (IPU)	380 Returns (IPU)	
NUN	MBER OF FORMS RETURNED (St. Rocco's)	9	5	(** - 7)	(,	
1	The Patient's comfort  Not relevant to situation	100%	80%	93% 1%	93% 2%	
2	The way in which patient's condition and likely progress had been explained by the palliative care team  Not relevant to situation	100%	100%	91%	2%	
3	Information given about side effect of treatment  Not relevant to situation	89%	100%	69%	69%	
4	The way in which the palliative care team respected patient dignity	100%	100%	95%	93%	
5	Meetings with the palliative care team to discussion the patient's condition and plan of care  Not relevant to situation	89%	100%	4%	5%	

6	Speed with which symptoms were treated Not relevant to situation	89%	100%	89%	87%
				5%	6%
7	Palliative care team's attention to the patient description of symptoms	100%	100%	87%	82%
	Not relevant to situation			8%	11%
8	The way in which the patient's needs for comfort were met	100%	100%	93%	92%
	Not relevant to situation			1%	2%
9	Availability of the palliative care team to the family	89%	100%	91%	89%
	Not relevant to situation			1%	2%
10	Emotional support provided to family members by the palliative care team	89%	100%	89%	89%
	Not relevant to situation			2%	3%
11	The practical assistance provided by the palliative care team (e.g. Bathing, home care, respite)	78%	80%	74%	73%
	Not relevant to the situation	22%	20%	21%	21%
12	The doctor's attention to the patient's	89%	100%	89%	87%
	symptoms				
	Not relevant to situation			3%	6%
13	The way the family was included in	100%	100%	89%	87%
	treatment and care decisions			4%	6%
1.4	Not relevant to situation	89%	100%	73%	73%
14	Information given about how to manage the patient's symptoms (e.g. pain, constipation)	89%	100%	73%	75%
	Not relevant to the situation	11%		19%	20%
15	How effectively the palliative care team managed the patient's symptoms	89%	100%	92%	92%
	Not relevant to situation			1%	3%
16	The palliative care team's response to	100%	100%	92%	89%
	changes in the patient's care needs				
	Not relevant to situation		1.0051	2%	4%
17	Emotional support provided to the patient	100%	100%	89%	87%
	by the palliative care team  Not relevant to situation			3%	7%
1	1	I	I	3/0	. , ,

'Overall, my wife couldn't have been in a better place at the end of her life. I couldn't have asked for better care.'

'Despite all the funding restraints St. Rocco's face, they do amazing work and the staff made a very tough time as bearable as it can be. Mum was very lucky to be in their care.'

'Excellent in every way. My sister couldn't have been in better hands. The care she received was above and beyond. The staff were all loving, gentle and caring with my sister and all family members. I get some comfort from knowing that she was in an environment of such peace and love in her final few weeks. Thank you for taking such good care of us all.'

#### **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 continues to provide an opportunity for professionals to share best practice.



## Part 5 - Patient and 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 an opportunity to understand where our services are working well and areas where we could perhaps make improvements. To that end we seek feedback in several 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 2024 we have worked collaboratively with Healthwatch Warrington who have undertaken an independent evaluation of the Palliative Virtual Ward.

During the year Hospice feedback activity has included:



#### **Feedback Friends**

There was a decrease in the number of forms received in 2024-2025. This may be partly due to a technical error after the launch of the new website. The feedback that was received was positive and several comments are detailed throughout this report. Our Feedback Friends questionnaires and process to capture feedback is a key priority for 2025-26.

High level of care and professionalism. All staff are friendly and empathetic.

Everything about St Rocco's makes me feel secure and safe.

A very friendly, helpful and relaxing place. Staff are kind and thoughtful. Please keep doing what you are doing, it is so invaluable.

Thank you very much.

#### **Outreach Services**

#### **Bereavement Café**

The bereavement cafés continued to be popular with total attendance across the year of **437 drop-in visits** which is an **increase** compared to last year, with a wide range of attendees from patients and families known to hospice services and out-of-area communities accessing the café support.

The results from the questionnaires are in the table below:

QUESTIONS	YES	NO	NO RESPONSE
Do you feel you have benefitted from the café today?	119	1	
		(noisy)	
Do you feel that the café is appropriate for your needs?	114	3	4
Did you feel comfortable whilst attending the café today?	119		
Do you like the venue?	119		
Would you recommend this support group to other bereaved	116		4
family members/friends?			
Have you or a member of your family been supported by services	44	55	21
at Hospice?			
If so please state hospice name:			
St Rocco's (8)			

A lovely atmosphere, it was great to talk to other people. The counsellor was lovely. Thank you

I find this bereavement café soothing and it is lovely to have someone to talk to. A very worthwhile place to come. Thank you so much for holding these sessions, they are much needed.



#### We Care Coffee Group

The We Care Coffee Group offers peer support to carers and patients and is facilitated by St. Rocco's staff and volunteers. Feedback was collected and reported as part of the conditions of the grant given by Cheshire Community Foundation. The funding ended on 31 July 2024 and following the success of the project the group has continued to run through a volunteer led sustainable model, working with our volunteers and community.



#### **Warrington Integrated Palliative Virtual Ward**

The Warrington Palliative Virtual Ward pilot commenced in April 2022 and was **the first national community Palliative Virtual Ward**. This programme was aligned with NHS England's national ambition for Integrated Care Systems to work towards the comprehensive development of virtual ward beds.

We are committed to continuous improvement, using feedback and lessons learned to enhance the Palliative Virtual Ward model consistently. A review of the service had been carried out in-house, and an overview of stats and figures of how the service has helped and its impact. However, to fully understand the impact of the Virtual Palliative Care Ward on patients and their families, it was decided an independent review was needed. Following the successful implementation and development of the Palliative Virtual Ward we worked together with Healthwatch Warrington to procure an independent review.

Healthwatch Warrington conducted an independent review of our Palliative Virtual Ward. Over this 12-month period, St. Rocco's has supported **147 patients** and those important to them stay at home and ensure they are cared for. **90 unique patients** were supported during this time. Patients and

those important to them were contacted via direct contact from the Hospice virtual ward team, and the survey was shared on social media platforms. A total of **39 surveys were completed**, which is a **43% response** rate.



My mum received outstanding care from the Virtual ward. It alleviated so many of our concerns without visits or just to reassure her.







#### **Compliments**

During the year a total of **90 official compliments** were logged. These were received via verbal compliments, thank you cards and social media posts.

The capturing of feedback is a key priority for 2025-26 for the Hospice to review its recording of compliments to ensure it is inclusive of all departments, including clinical services within the Hospice and to support operational activity in non-clinical departments, shops and at events.





The ladies who offer the comp. therapy do such a wonderful job of creating a safe space to share our thoughts and feelings at a difficult time, never making us feel rushed. The therapies are excellent - thank you.



## Part 6 – Staff and volunteer experience

#### 6.1 Our people

Our workforce has again shown an **exceptional amount of commitment, dedication and motivation** throughout this year. Our total workforce at year end reduced slightly compared to our prior year, through restructures and new ways of working, and we have continued to be able to recruit successfully in a highly competitive recruitment market. Recognising that our people are our most asset, we are maintaining our focus on:

- Developing our approach to workforce planning, including talent development and succession planning. This is essential to help us utilise our resources wisely to support the development of our staff but also to ensure our future sustainability. During the year we have committed to a number of workforce development roles, including Apprenticeship opportunities at L3, L5 and L7 across a number of teams, utilising Apprenticeship Levy transfer from partner organisations in Warrington
- Evaluating our current health and wellbeing offer. In support of this we have an employeeled wellbeing group who shape and support the delivery of our wellbeing programme which is further enhanced by our Mental Health First Aiders and staff-led wellbeing team who have worked collectively to develop a series of wellbeing events
- Drawing clear synergies between work that we have undertaken in and around our clinical services for example, our patient safety and just culture work. We ensure that these principles are reflected in our People policies and procedures.

The People Sub-Committee meetings have continued throughout the year providing appropriate governance to decisions around People issues. This Sub-Committee has maintained oversight of workforce performance indicators including recruitment and retention, sickness and absence, and education and training. In addition, we continue to develop and improve our data reporting to increase our workforce insights.



#### 6.2 Our 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 program to support the vision, mission, and values of the Hospice.

The Voluntary Services team are proactive in their approach and strive to be supportive and encouraging by being visible, accessible, and welcoming in our engagement with our volunteers. We understand 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. Shop recruitment continues to be of the highest importance.

We continue to develop and support our successful partnership working with the Warrington volunteer network and continue to demonstrate that we provide a program of excellence, meeting with the criteria of or Pledge award, ensuring that our processes are working for everyone.

We held a successful awards ceremony which saw **111 volunteers receiving an award**, ranging from 2 years to 25 years of volunteering for the Hospice; we look forward to celebrating some 40-year awards next year. This shows an outstanding dedication and accomplishment by our dedicated volunteers, especially with the ever changing and challenging face of volunteering nationally.

We have **580 registered volunteers** which is an increase of **12%** from last year. The estimated valuation that these volunteers bought to the Hospice in 2024 was:

	Hours	Value
Hospice	22,776	£305,634
Shops	50,856	£682,443
TOTAL	73,632	£998,077





## **Part 7 – Statement Warrington Place**



Ref: St Rocco's Hospice

NHS Cheshire and Merseyside ICB No1. Lakeside 920 Centre Park Square Warrington WA1 1QY

13 June 2025

Sent by email to: Sara Black, Chief Operating Officer sarablack@stroccos.org.uk

Re: 2024/25 Quality Account Statement

Dear Sara

NHS Cheshire and Merseyside Integrated Care Board (ICB) have worked closely with St Rocco's Hospice throughout 2024/25 and recognise the achievements made with regards to quality throughout the year. The Quality Account demonstrates how the Team at St Rocco's continue to deliver excellent services whilst working with the challenge of financial stability seen in much of the hospice sector.

The Team have been very instrumental in the collaborative working with the ICB and its wider Hospice community to support patient safety development and the new ways of working that PSIRF presents. The Team strives for excellence, and this is demonstrated in the continued commitment and partnership working in delivering the Palliative & End of Life Care Hub and the Virtual Ward. The ICB acknowledge the positive work in supporting both medical and other clinical students, in their career pathways. Particularly the innovative work in offering wider student opportunities in the Hospice and giving them experience of the work of the Vitality Centre to engage their interest such as music, supporting the health and wellbeing of patients and carers.

Significant work has been undertaken to attain meaningful achievements against the identified quality priorities for 2024/25. St Rocco's have successfully launched their Patient Safety Incident Response Framework (PSIRF) policy and plan and trained staff on the principles, the ICB have worked closely with the hospice and will continue to support them on their journey of patient safety system learning. During 2024 the medical-led palliative care virtual ward has been developed which significantly contributes to reducing system pressures, it is positive to see the learning from this being shared both locally and nationally.

The work to support service user experience is commendable, it shows a good use of volunteers during difficult financial times to provide service users a supportive and safe space. The emotional support for patients and families and the importance of the patient story is evident in the account, highlighting a strong community in Warrington.



The engagement with N-Compass and Healthwatch highlights St Rocco's open and transparent work to enhance and continually improve services.

The hospice active clinical audit programme and governance process has been described within the account and assures oversight of clinical effectiveness. The journey described around driving safety in palliative care demonstrates improvements for both patients and staff confidence. The FamCare and infection control results are noteworthy. The ICB will work closely with St Rocco's to understand more of the clinical audit findings requiring action during 2025/26 and support this delivery to allow further improvement journeys to be presented in the next quality account.

Finally, it is recognised that the individual effort of staff and teams within the Trust make a huge impact to patient care. This is strongly recognised within the account through the highlighted achievements, and your patient feedback gives a strong message of how valuable the Hospice is to the community, and this is reflected in the positive comments we see across all areas of service provision, particularly the work of the Counselling and Emotional Care team and their work with the Bereavement Cafes providing aftercare to families. It is positive to see the continued improvement each year and the system integration and work with partners. Congratulations to the whole team and we look forward to working with you in 2025/26.

Yours sincerely

Chrotine on Douglas

Chris Douglas MBE (she/her) Executive Director of Nursing & Care NHS Cheshire and Merseyside ICB

cc.Kerry Lloyd, Denise Roberts

#### **Feedback from Healthwatch Warrington**

## 1. Does the draft Quality Account reflect people's real experiences as told to local Healthwatch by service users and their families and carers over the past year?

Yes, it does.

The Quality Account includes multiple references to Healthwatch Warrington, particularly their independent evaluation of the Palliative Virtual Ward (pages 8, 13, 17, 25, 27–28). The findings from Healthwatch are quoted directly, such as:

"The staff are dedicated and provide an excellent service with the support of amazing volunteers. Patients are always treated with dignity..."

Additionally, patient and family feedback is integrated throughout the report, including:

- FamCare survey results (pages 22–23)
- Bereavement Café feedback (page 26)
- Compliments and testimonials (pages 25, 29)

These inclusions demonstrate that real experiences have been captured and reflected in the report.

## 2. From what people have told Healthwatch, is there evidence that any of the basic things are not being done well by the provider?

No significant concerns are evident.

The Healthwatch evaluation and other feedback sources included in the report do not highlight any major failings in basic care. In fact, the feedback is overwhelmingly positive, with high satisfaction scores and comments praising the dignity, compassion, and professionalism of staff.

There is one minor note in the Bereavement Café feedback where a respondent mentioned the venue was "noisy," but this is isolated and not indicative of systemic issues.

## 3. Is it clear from the draft Quality Account that there is a learning culture within the Trust that allows people's real experiences to be captured and used to enable the provider to get better at what it does year on year?

Yes, a strong learning culture is evident.

The report outlines several mechanisms for continuous learning and improvement, including:

- Implementation of the Patient Safety Incident Review Framework (PSIRF) (page 13)
- Use of electronic incident and risk reporting systems (page 20)
- Regular clinical audits and quality improvement projects (pages 21–22)
- Journal Club for sharing best practices (page 24)
- Feedback loops through the User Feedback Group and service leads (page 25)

These structures show that feedback is actively used to inform service development and staff training, supporting a culture of reflection and improvement.

# 4. Are the priorities for improvement as set out in the draft Quality Account challenging enough to drive improvement and is it clear how improvement has been measured in the past and how it will be measured in the future?

Yes, the priorities are both challenging and measurable.

The three priorities for 2025-26 are:

- 1. Growing the community offer (e.g. expanding the Virtual Ward)
- 2. Offering equitable access to palliative care
- 3. Developing resilient, future-fit services

Each priority includes specific actions, such as:

- Embedding a just culture
- Enhancing digital services
- Using system data to inform service transformation

Measurement is addressed through:

- Quarterly reporting to the Quality and Safety Committee and ICB (page 12)
- Use of audits, surveys, and incident data to track progress (pages 20–22)
- Clear comparisons of activity and outcomes year-on-year (e.g. inpatient admissions, medication incidents)

These elements demonstrate a robust framework for tracking and evaluating improvement.

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

