



St Gemma's Hospice

Quality Account

2024/25



**St.
Gemma's
Hospice**

Contents

Part One | Overview

Our Vision, Purpose and Values	4
Statement on Quality from the Chief Executive	5 - 6
Statement of Assurance from the Board	7
Our Services, Funding and Activity	8 - 11
Care Quality Commission	12

Part Two | Priorities for Improvement

Quality Improvement Priorities	13
Progress Against Priorities 2024/25	13 - 14
Quality Improvement Priorities 2025/26	15

Part Three | Quality of Service

Review of Quality and Safety	16 - 20
Service Development	21
Academic Unit of Palliative Care	22 - 24
Leeds Palliative Care Network	25

Part Four | Hospice Experience

Patient and Family Experience of the Hospice	26 - 28
Involvement and Engagement	29 - 32

Part Five | External Statements

Statement from the NHS West Yorkshire Integrated Care Board in Leeds	33
Statement from Healthwatch Leeds	34

Glossary and Further Information

35 - 36

Bobbie's Story

“The best care you can get”

Bobbie is a former professional carer who has faced a challenging health journey. Diagnosed with stage-four cancer in 2021, Bobbie has overcome significant setbacks, including being admitted to intensive care with sepsis. Despite these challenges, she was determined to remain at home, supported by visits from carers and the St Gemma's community team.

We first met Bobbie in 2022 when one of our community nurses visited her for the first time to help with symptom control following her treatment for sepsis.

When her health stabilised, Bobbie began attending St Gemma's Outpatients for physiotherapy, occupational therapy, and wellbeing classes, including Tai Chi and Zumba, which has greatly improved her quality of life. For over two years now, Bobbie has enjoyed and benefited from her visits to St Gemma's.

Bobbie shares her heartfelt gratitude for the support and care she has received:

“When I was diagnosed, I asked myself, ‘Why? Why me?’ But now I feel blessed - I’m here with my family, my children, and my grandchildren. I haven’t yet got to where I want to be, but with help and encouragement from St Gemma’s, I know I will.”

“St Gemma's is like a second home to me. The staff and volunteers have been incredible. They provide me with moral support and ensure my wellbeing is always monitored. The care here is the best you can get.

The wellbeing classes have been a lifeline. I was introduced to Tai Chi and Zumba, and they've done wonders not just for my physical health but also for my emotional wellbeing. It's such a comfort to be part of a community where everyone understands and supports one another.”

Bobbie also shared with us how St Gemma's care has had a really positive impact on her whole family, with staff going above and beyond with their advice and support.

“St Gemma's has also been a great support to my family, which means so much to us. As a former carer, I truly value the dedication and compassion that make this personalised care possible. I've defied doctors' expectations and am now enjoying some of the best days of my life with those who have helped me so much”.





Our Vision, Purpose and Values



Our Vision

The needs of people living with a terminal illness and those close to them are met with care, compassion and skill



Our Purpose

St Gemma's Hospice acknowledges the value of life and the importance of dignity in death. We provide and promote the highest quality palliative and end of life care, education and research



Our Values

Caring

Treating each person with kindness, empathy, compassion and respect

Aspiring

Continually learning and developing; striving for excellence in everything we do

Professional

Delivering high standards through team work, a skilled workforce and good governance

Statement on Quality from the Chief Executive

I am pleased to introduce you to the St Gemma's Hospice Quality Account for 2024/25, my first as St Gemma's Chief Executive and reflecting many achievements that form the legacy of my predecessor, Kerry Jackson, who left at the end of 2024.

As for all hospices, funding for the work that we do is an ongoing challenge. Our status as an NHS provider, part of citywide integrated palliative care provision to the people of Leeds, earned us £4.6M in 2024/25 (around 30% of our total funds raised). Quality is a foundation of our strategy at St Gemma's. This Quality Account provides an overview of our services, setting out our progress against quality improvement priorities for 2024/25 and our ambitions for quality improvement in the year ahead.

Demand for our services continues to increase with growing numbers of referrals overall, in-patient admissions and community nursing and medical contacts. For the first time we are reporting on our Leeds Palliative Care Inclusion Service, work to improve care for homeless and vulnerably housed people at the end of life, providing vital learning on how this group can be better supported whilst reducing demand on acute services. I am looking forward to attending my first Bereavement Café, a growing service which is enabling us to better meet demand for bereavement services following some staff changes earlier in the year.

Education, both through teaching and placements, is central to our mission at St Gemma's and an essential part of improving the quality of palliative and end of life care not only at St Gemma's but also across Leeds and beyond. In 2024/25 we trained a record number of healthcare professionals (over 1,400), and hosted 184 student doctors, nurses, allied health professionals and social workers.

We use NHS improvement methodology in many of our quality improvement projects, which in 2024/25 has enabled us to deliver a fully embedded mortality review process, develop a toolkit to improve staff confidence and capability in supporting people with dementia at the end of life, improve our recognition and response to patients at risk of pressure ulcers and further improve the safety culture in our In-Patient Unit.

I am confident that St Gemma's provides a safe environment for patients, evidenced by the data in this report, and due to the systems and processes we have in place. We continue to work on how those systems and processes align with the NHS Patient Safety Incident Response Framework, which remains a priority for 2025/26.



This Quality Account describes how our services are developing, with tackling inequality of access being a theme that takes us right back to our founding principles, that St Gemma's is here for everyone, regardless of race, religion, gender, sexual orientation, age or diagnosis. It also sets out how we support the loved ones of patients in our care, for instance through the 29% increase in complementary therapy referrals in 2024/25, and the continued development of our young people's service in our award-winning Cabin. It describes how we learn from all feedback, positive or less so and particularly complaints, to generate improvements for the future.

I am proud to present this Quality Account and confirm that to the best of my knowledge, the information reported in it is accurate and a fair representation of the quality of healthcare services provided by St Gemma's.

Laura Squire
Chief Executive



Statement of Assurance from the Board

As a Board of Trustees we have seen some important changes in the leadership of St Gemma's Hospice this year with the departure, in December 2024, of Kerry Jackson, who led the hospice as Chief Executive for 14 years, and in March 2025 Jason Kirk, who was Chief Operating Officer for 11 years. We recognised the risks to the Hospice of the loss of two such experienced and influential leaders and were reassured by the robust handover plans which have now enabled a smooth transition to Laura Squire, who started as the new Chief Executive in February 2025.

The focus on quality under the new leadership remains strong, with Board assurance on key areas such as quality improvement initiatives, patient experience, safety and performance metrics, incident reporting, complaints, service developments and workforce challenges being provided through our Clinical and Academic Governance Committee. This is chaired by Jackie Murphy, a St Gemma's Trustee and experienced Chief Nurse, clinical leader and Improvement Academy facilitator.

The Board also prioritises ensuring that the quality of our care is maintained through a programme of Trustee Hospice visits where Trustees engage with patients, families, staff, and volunteers to gain deeper insight into the care environment. Trustees also meet staff and volunteers before each full Board meeting and meetings begin with a member of staff sharing a patient story. In March, the Board reviewed the outcome of the first of a series of internal self-assessments against the new Care Quality Commission (CQC) Framework with a view to ensuring St Gemma's continues to deliver to our purpose of providing the highest quality palliative and end of life care, education and research.

The Board of Trustees supports the 2025/26 Quality Improvement priorities and is pleased with the progress made in 2024/25 as set out in this report. We welcome the continued focus of the Hospice Leadership Team on ensuring quality remains central to the St Gemma's business plan and to its vision for the future.

Phil Corrigan
Chair of the Board of Trustees



Our Services

St Gemma's Hospice provides care and support for adults with active, progressive and advanced disease. The Hospice team provides specialist palliative care, where the patient has unresolved needs that exceed the expertise of the referring team, and end of life care.

Our services are open to people regardless of race, religion, gender, sexual orientation, age or diagnosis. We provide care to people with a range of diagnoses including, but not limited to, cancer, neurological conditions, end-stage respiratory and heart disease. We also provide support to families and carers including children and young people.

Each of us, sick or well, has unique physical, emotional, social and spiritual needs. St Gemma's responds to these needs in ways which place the highest value on respect, choice and empowerment.

Our palliative and end of life care services are provided by a multi-disciplinary team (MDT) comprising:



Support services work alongside the MDT to provide administration, cleaning, catering and laundry services.

Throughout the Quality Account, we use the term 'clinical' to refer to all the services and teams who provide direct patient and family care, which during 2024/25 were:

In-Patient Unit

providing 24-hour specialist palliative and end of life care for up to 20 patients in individual rooms, or in times of high demand 22 patients using shared bays. In-Patients can access support from the full MDT.

Outpatient Services

providing patients with extra support to manage symptoms and optimise quality of life, through a range of group activities.

Bereavement Services

working with families to provide both one-to-one and group bereavement support, including provision of a citywide children's bereavement service.

Community Services

providing specialist support and advice, usually in a patient's home or care home and extending to those who are homeless or in temporary housing. Services are delivered by medical, nursing, therapy, social work and spiritual care staff.

The Academic Unit of Palliative Care at St Gemma's also contributes to the development of knowledge and skills in palliative and end of life care through education and research.

Our Funding

St Gemma's Hospice provides services free of charge to patients, families, friends and carers.

Running costs in 2024/25 were £15 million. NHS provision for palliative care is a statutory requirement of the Health and Care Act 2022 and our NHS core grant of £4.6m represented 30% of the total income required to deliver our services in 2024/25. Most of our funding is provided in the form of donations, legacies, fundraising initiatives and our chain of charity shops. We continue to work as part of the West Yorkshire Hospice Collaborative, comprising ten local hospices, to secure more sustainable NHS funding for core and specialist clinical resources in our region. This is particularly important given the predictions for rising numbers of deaths in the UK over the next two decades, but we expect to always need to rely on the generous support of our local community to provide the support to patients and families that makes up St Gemma's care.

We continue to review all our services on an ongoing basis to ensure we are operating as efficiently and as sustainably as possible. For example, in 2024/25 we installed a 60kW solar system across our roof which is delivering significant savings of up to £5,000 per month. These panels are offsetting approximately 20% of our monthly energy costs. This is one example of how we are spending wisely in delivering our care, allowing us to continue to remain responsive to the changing palliative and end of life care needs of local people.

“

Caring staff. Fantastic room, looked after Dad brilliantly.

PATIENT'S FAMILY
In-Patient Unit



Our Activity

St Gemma's Hospice delivers compassionate, patient-centred care through a wide range of services that support individuals and families across Leeds. Our integrated approach ensures that most patients engage with multiple services, reflecting the complexity and continuity of care we provide.

Highlights from 2024/25:

♥ Growing Reach and Access

- New patient referrals rose to 1,490, a 9% increase over two years.
- Non-cancer diagnoses remained steady at 37%, reflecting our commitment to inclusive care.
- In-Patient Unit admissions increased to 535, while average length of stay decreased to 11.2 days, indicating more efficient care transitions.

♥ Community-Centred Care

- Despite staffing challenges, community nursing and medical contacts remained high at 19,420.
- Multi-Disciplinary Team (MDT) contacts held steady, supporting holistic care delivery.
- The Inclusion Service, newly reported this year, recorded 1,446 contacts, highlighting our focus on equitable care for complex needs.

♥ Outpatient and Bereavement Support

- Outpatient group contacts remained strong at 2,170, with excellent feedback on reducing isolation and improving wellbeing.
- Bereavement support saw a temporary dip to 2,337 contacts, reflecting staffing transitions, but recent increases in bereavement cafés show responsiveness to community needs.

♥ Education and Workforce Development

- As a University Teaching Hospice, we expanded our educational impact:
 - » External professionals trained increased by 30% to 1,439.
 - » Student placements rose to 184, reinforcing our role in shaping the future palliative care workforce.



	2022/23	2023/24	2024/25
New Patient Referrals to the Hospice	1,365	1,382	1,490
Percentage of Patients with a Non-Cancer Diagnosis	34%	37%	37%
Admissions to In-Patient Unit	492	503	535
Average In-Patient Length of Stay (days)	12.2	11.9	11.2
Community Nursing & Medical Contacts	19,842	18,742	19,420
Other MDT* Community Contacts	5,797	5,917	5,880
Inclusion Service Contacts			1,446**
Outpatient Group Contacts	918	2,258	2,170
Bereavement Contacts	2,967	2,974	2,337
External healthcare professionals trained	1,054	1,013	1,439
Student placements	128	174	184

*MDT = Multi-Disciplinary Team including Allied Health Professionals, Social Workers, Spiritual Care
** Previously unreported



Care Quality Commission

The Care Quality Commission (CQC) inspected St Gemma's Hospice on 2 November 2021. St Gemma's Hospice services were rated as Outstanding, which is a wonderful reflection of the whole Hospice team, and the commitment of staff to deliver the very best care for patients and families. The full 2021 inspection report is available on our website: www.st-gemma.co.uk/keypublications



Highlights of the summary report include:

- ♥ The safe use of innovative and pioneering approaches to care and how it is delivered were actively encouraged. All staff were actively engaged in activities to monitor and improve quality and outcomes.
- ♥ Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions.
- ♥ The service planned and provided care in a way that fully met the needs of local people, and the communities served. It also worked proactively with others in the wider system and local organisations to plan care and improve services.
- ♥ Staff were proud to work at the service and felt respected, supported and valued.
- ♥ Leaders operated effective governance processes and staff at all levels were clear about their roles and accountabilities.



In 2024/25 the CQC has been undertaking a major transition to reset strategic priorities, which impacts on all aspects of monitoring and inspection. St Gemma's has reviewed its internal governance information and CQC evidence collection in line with the current assessment framework. We have also undertaken a detailed review of the Hospice's progress against the 'Well-Led' standards which has been presented to and discussed by the Board of Trustees.

Quality Improvement Priorities

Quality is a foundation of the Hospice Strategy. St Gemma's is committed to improving practice continually to ensure our services and the processes we use are effective, efficient and providing the best experience. To identify our priorities for quality improvement we:

- ♥ Review latest evidence-based practices
- ♥ Listen to patient, family and staff feedback
- ♥ Learn from incidents and complaints
- ♥ Use data to identify care access gaps, in collaboration with partners like the Leeds Palliative Care Network.

Progress against Priorities 2024/25

Priority 1: NHS Patient Safety Incident Response Framework (PSIRF) - Patient Safety

Goal:

- ♥ Align the Hospice's incident management and quality improvement programme with the NHS PSIRF to enhance safety, patient and family engagement and learning.

Progress:

- ♥ Developed escalation processes and improved incident review formats
- ♥ Training and full implementation delayed due to capacity issues
- ♥ Remains a priority into 2025/26 to revise and implement incident response processes Hospice-wide.



Priority 2: IPU Improvement Academy Project - Clinical Effectiveness

Goal:

- ♥ Improve safety and culture on the In-Patient Unit (IPU) using Quality Improvement (QI) methods.

Progress:

- ♥ Assessed patient and staff experience using an evidence-based tool
- ♥ Outstanding patient feedback received and shared with teams
- ♥ Mixed staff feedback allowed improvement areas to be prioritised; two initial changes made: earlier rota publication, launch of a staffing and skill mix review
- ♥ QI group formed; comprehensive training provided, priorities set for 2025/26.

Priority 3: Medical Device Pressure Ulcer Project - Patient Safety

Goal:

- ♥ Reduce the number of pressure ulcers caused by medical devices.

Progress:

- ♥ The discovery phase showed that practice changes, guidance and staff training had already led to early risk recognition and preventative measures
- ♥ Project suspended due to reduced incidence and pending further evidence of need assessment.

Priority 4: Community Dementia Project - Patient Experience

Goal:

- ♥ Improve end of life care for patients with dementia/ cognitive impairment through the development of a staff toolkit.

Progress:

- ♥ Toolkit co-produced and launched with the St Gemma's community team
- ♥ Resources shared citywide through the Leeds Palliative Care Network
- ♥ Training events planned to promote the toolkit with staff; full evaluation scheduled for 2025/26.



Priority 5: Mortality Review Process - Patient Safety

Goal:

- ♥ Implement a standard, multi-professional approach to reviewing deaths in the Hospice and identify learning to inform quality and safety improvement plans within the PSIRF.

Progress:

- ♥ Collaborated with Sue Ryder Wheatfields and Manorlands Hospices and NHS Improvement Academy
- ♥ Process fully embedded into the clinical governance framework; standardised end-to-end process established and documented
- ♥ Key staff trained in Structured Judgement Reviews
- ♥ Learning logged for insights, actions and themes, with learning integrated across service development, audit, clinical education, guidelines and policies
- ♥ Examples of excellent care shared, contributing to a culture of safety, continuous learning and reflective practice.

Priorities for 2025/26

Priority 1: NHS Patient Safety Incident Response Framework - Patient Safety

The Hospice is aligning its incident management and quality improvement processes with the NHS PSIRF to strengthen patient safety, engagement, and learning. While initial progress has been made, further work is needed to integrate all learning sources and finalise implementation plans.

Key targets for 2025/26 are to:

- ♥ Finalise incident policy and plan in line with national requirements
- ♥ Agree management processes for all incidents, including non-clinical incidents
- ♥ Refine combined learning log, to inform future quality improvement.

Priority 2: Reablement Project - Patient Experience

This two-year project aims to support patients on the IPU likely to return home by maintaining their physical function and independence. It seeks to reduce deconditioning, improve psychological well-being and streamline discharge planning through early rehabilitation.

Key targets for 2025/26 are to:

- ♥ Undertake an audit of discharged patients to identify population characteristics
- ♥ Identify appropriate outcome measures for evaluation
- ♥ Develop a rehabilitation framework suitable for the patient group, which can be personalised to need, using a QI approach.



Priority 3: IPU Improvement Academy Project - Clinical Effectiveness

This project uses QI methods to enhance staff well-being on the IPU, focusing on improving access to regular breaks. It builds on findings from the discovery phase and aims to test and evaluate practical solutions to support staff health and performance.

Key targets for 2025/26 are:

- ♥ To understand the drivers and challenges of getting regular breaks at work
- ♥ To test opportunities to improve access to regular breaks
- ♥ To evaluate changes made and the impact by repeating staff surveys and regular measurement of access to breaks.

Review of Quality and Safety

St Gemma's Hospice's purpose is to provide high-quality, safe, and effective specialist palliative and end of life care. Through a personalised, patient-centred approach, the care is tailored to patients and their loved ones, focusing on what matters most to them.

We rigorously monitor our performance and identify gaps in practice and opportunities for improvement. Our Key Performance Indicators (KPIs) include national metrics (pressure ulcers, falls and medication incidents) and local measures such as clinical activity, staffing and patient experience.

All clinical quality data is reviewed by our Quality Assurance Group and shared with the Board of Trustees via the Clinical and Academic Governance Committee. Hospice risks are identified, monitored and actively managed. We submit safety data to Hospice UK's benchmarking programme and attend meetings with the NHS Integrated Care Board (ICB) to continuously monitor care quality.

Learning is generated from a variety of sources, such as incidents, complaints, patient feedback, national guidance, safety alerts, and detailed case note reviews. The senior clinical team regularly assesses this information to generate key messages and highlight areas for service development; a Learning Bulletin is produced and shared with all clinical staff.

Through transparent reporting, a dynamic learning culture and robust governance, the Hospice upholds its commitment to delivering exceptional palliative and end of life care. This comprehensive approach ensures that every patient receives compassionate, safe, and effective care, while providing a clear framework for continuous improvement and service development.

Leadership and Governance

St Gemma's vision and strategy are supported by a five-year financial plan and two-year business plan. We strive for a positive organisational culture, focusing on the needs of patients and families and promoting diversity, equality and inclusion across our services.

The development and wellbeing of our staff and volunteers are priorities for St Gemma's. We had a 71% response rate to our 2024 staff survey with an overall engagement score of 83%. The results provided positive feedback and highlighted priorities for improvement, as outlined in the Involvement and Engagement section. We are recruiting to both the Board of Trustees and the Hospice Leadership Team (HLT) to strengthen our people focus and ensure we have clear plans in place to remain a great place to work.

The Board provides strategic, financial and governance oversight, supported by three sub-committees - Clinical and Academic Governance; Finance and Investment and Corporate Governance.

The HLT delivers the business plan and oversees the quality and sustainability of clinical and support services. Heads of Department (HODs) reporting to the HLT closely manage day to day service provision and provide vital insight to enable ongoing strategy development.

In June, the Hospice appointed a Quality and Governance Practitioner to support the HLT and HODs in driving high quality patient and family care. This has led to improvements in oversight and management of incidents and creation of a central log to bring together learning from a range of sources.

Partnership is central to the way we work with other health and care services in the city to improve integration and coordination of care. We also engage at a regional and national level to understand current and future challenges, as well as drawing on our experience and expertise to inform the ongoing provision of excellent palliative and end of life care.

Freedom to Speak Up (FTSU)

We are committed to fostering a culture where staff feel safe and supported to raise concerns. Our FTSU approach is now well established, with two trained Guardians, seven Champions, an Executive Lead, and Board-level representation.

FTSU is embedded in staff induction, and we are training leaders to build a stronger culture of openness and psychological safety. Over the past year, staff have raised a range of concerns, all managed with care and confidentiality. We continue to promote speaking up as a core value, and all FTSU data is shared with the National Guardian's Office.

Clinical Incidents

St Gemma's promotes an open culture of incident reporting, recognising that patient and staff safety is everyone's responsibility and the more we report, the safer we become. A clinical incident is an event that deviates from expected practice.

All clinical incidents and near misses are reported electronically and rated by the level of actual or potential harm or risk. Those involving moderate or severe harm are reviewed in detail and shared with the Care Quality Commission (CQC). Where appropriate, an investigation is carried out and any findings or learning are shared with the Quality Assurance Group.

We support and uphold the Duty of Candour and inform patients and families of errors or incidents that have resulted in patient harm under Hospice care. Where possible, they are involved in investigations to enhance learning and to reduce risk of further harm.

Incident Category	2022/23	2023/24	2024/25
Falls - All	39	45	50
Falls - Moderate+ Harm	2	2	2
Information Governance Incidents	17	13	10
Medicines Incidents - All	156	91	104
Medicines Incidents - Moderate+ Harm	5	4	1
Safeguarding Incidents	4	7	6
Other Clinical Incidents	37	39	50

- ♥ **Totals** – the overall number of incidents in 2024/25 - 406 – is lower than reported in previous years (more than 460), despite high levels of clinical activity. This reduction may be attributed to changes made to pressure ulcer reporting by standardising terminology and removing duplicate records.
- ♥ **Falls** – these remain a significant risk in hospice care. While we recognise that not all falls are preventable, we minimise risk through comprehensive assessments, detailed falls care plans, modern monitoring devices and regular reviews of clinical equipment.

On the IPU, we record an average of four falls per month, with those patients experiencing recent mobility changes being most at risk, due to reduced awareness of their limitations and a determination to maintain their independence. Falls prevention remains a priority at the Hospice and this is reinforced through diverse training and systematic evaluation of incidents and trends during the Quality Assurance and Falls groups

- ♥ **Medication Safety** – incident numbers remain stable with fewer cases of moderate harm. One incident which was due to a calculation error involving a controlled drug (CD), was investigated and findings shared with the CQC
- ♥ **Other Incidents** – 50 incidents were reported in this category during 2024/25, encompassing issues related to accidents/injuries, admission-related matters, assault/anti-social behaviour, choking, communication and equipment.

Pressure Ulcers	2022/23	2023/24	2024/25
Inherited Pressure Ulcers - All	218	213	193
Inherited Pressure Ulcers - Moderate+ Harm	78	66	60
Newly acquired Pressure Ulcers - All	140	130	95
Newly acquired Pressure Ulcers - Moderate+ Harm	32	18	8

- ♥ **Pressure Ulcer (PUs)** – 288 areas of pressure damage were identified in 193 patients. there has been a significant reduction in the number of new PUs, both overall and those involving moderate/severe harm. Staff have annual updates on pressure area care to maintain knowledge and we have started work to simplify how pressure damage is monitored and reported.

The Hospice submitted 75 notifications to the CQC, mostly related to patients who were admitted to the Hospice with pressure damage (63). Other reported incidents included new pressure damage (7), medication errors (2), falls (2) and one episode of self-harm in the community. Each incident was fully investigated and findings shared with the CQC, the patients’ families, and our clinical teams to promote learning.

Measures taken to improve incident reporting and reduce risk include:

- ♥ Education in recognising and reporting incidents and near misses, especially those that happen outside the Hospice, or in partner services
- ♥ Increased scrutiny of potential safeguarding concerns
- ♥ Added the risk of violence and aggression to the Risk Register and developed a policy to support all parts of the Hospice
- ♥ Reviewed the escalation process for incidents generated outside the Hospice, for example, inherited pressure damage, primary care prescribing errors.

Infection Prevention & Control (IPC)

The Head of In-Patient Care is the designated lead at St Gemma’s for IPC and works with both the clinical and facilities teams to ensure we are aligned with national IPC standards. St Gemma’s engages with IPC teams in Leeds Community Healthcare NHS Trust and Leeds Teaching Hospitals Trust (LTHT). Audits are completed as per the national standard IPC guidance and results shared Hospice-wide, including being visible to patients and visitors within the IPU. We are currently reviewing our IPC training program on a new online platform to ensure that all staff members have training appropriate to their role.



Staffing

The Hospice reports staff availability monthly to monitor the impact of long-term sickness, vacancy and maternity leave. In 2024/25 there was some natural staff turnover in the IPU and Therapy teams, but with proactive recruitment the Hospice has maintained 20-22 available beds on the IPU with support from the whole multi-disciplinary team.

This year, the Community Team has experienced significant staff absence, including turnover and maternity leave, which has impacted on staff wellbeing. The team has been supported throughout this period by the Community and Hospice Leadership Teams and HR. Patient feedback continues to be excellent, and we have had no concerns about patient safety through this episode.

The Hospice is now working with Establishment Genie, a data-driven tool for workforce analysis, benchmarking and planning. Teams have submitted data to assess their current workforce and productivity, which will be followed by a detailed review of care levels and staffing requirements, benchmarked against peer hospices.

Audit

Monthly patient safety and environmental audits are completed by the Senior Nursing, Therapy and Estates and Facilities teams to monitor essential standards.

Uniform, hand hygiene and various documentation audits form part of a wider annual schedule managed by the Ward Sisters, with results shared in team meetings. These supplement a programme of clinical audits overseen by the Evidence Based Practice Group, as outlined in the section on the Academic Unit of Palliative Care.

We have undertaken work to create an umbrella audit and to centralise audit tools on one platform, which will enable us to oversee all mandatory and evidence-based practice audits that take place within the Hospice.



“
My husband died
with great care and
dignity.
PATIENT’S FAMILY
In-Patient Unit

Accessibility

St Gemma’s mission is to provide palliative and end of life care for all those who would benefit from our care and our teams work hard to ensure services are accessible through:

- ♥ **Referrals** – people are referred by GPs, as well as generalist and specialist teams across Leeds
- ♥ **Pathways** – expanding the number of non-cancer palliative care pathways for people with respiratory, cardiac, neurological, renal and liver disease. This has expanded our reach and skills to care for increasingly complex patients
- ♥ **Self-referrals** – people can engage early through our Outpatient groups
- ♥ **Coordination** – daily admissions meetings with Sue Ryder Wheatfields and LTHT to optimise timely hospice admission. In 2024/25, 84% of patients were admitted within 24 hours of referral
- ♥ **24/7 admission** – patients can be admitted to the IPU at any time, including from the Emergency Department, to prevent unnecessary hospital admission
- ♥ **Specialist services** – through the creation of the Leeds Palliative Care Inclusion Service, now fully established and working specifically with the homeless and vulnerably housed people in Leeds, we work with healthcare and non-healthcare staff to ensure patients access palliative care wherever they live in a timely way
- ♥ **Engaging with communities** – we still do not reach everyone who would benefit from our care, so we continually monitor our referral and activity data for gaps to try to address specific communities in need. This is done through our Involve work, described under Involvement and Engagement.

Personalisation of Care

At St Gemma’s Hospice, we treat every patient as an individual, focusing on what matters most to them. We involve family and friends in care and often go the extra mile organising special moments like weddings, movie nights, and memory-making activities.

We support patients in making choices about their care through Advance Care Planning, discussing where and how they want to be cared for. When someone is in their final days, we create a personalised care plan that reflects their wishes and includes their loved ones in decisions.

Most patients, both in the Hospice and in the community, continue to achieve their preferred place of death (PPD) and have a personalised care plan in their last days of life. This year, for the first time, we have monitored this data for Inclusion Service patients, reported under Involvement and Engagement.

We also learn from cases where personal wishes are not met, often due to sudden health changes, unrecognised signs of dying, or carer challenges. These insights help us improve care for everyone.

Indicator	Location	2022/23	2023/24	2024/25
Number of patients achieving preferred place of death (where preferred place recorded)	IPU	82%	79%	83%
	Community	80%	81%	80%
Number of patients with a personalised care plan for care of the dying	IPU	89%	90%	85%

Service Development

Complementary Therapy Service

Our Complementary Therapy Service is delivered by staff and volunteers who work across the In-Patient Unit (IPU), Outpatients and in patient homes. Available to both patients and their carers, the service offers treatments, including clinical aromatherapy, reiki, acupuncture, massage and reflexology to ease pain, anxiety, fatigue, stress, carer strain, skin issues and malodours.

In addition, we produce our own clinical aromatherapy products for use within the IPU and the community. Feedback has been outstanding, with 100% positive responses, as reported under Patient and Family Experience.

Our aim for 2024/25 was to increase the team’s presence and effectiveness across the Hospice, evidenced by 527 referrals (a 29% increase) and 1,237 face-to-face appointments (up 38%). For 2025/26, we plan to further expand the team and strengthen its capabilities through ongoing training and peer support.

Adult and Young People’s Bereavement Services

Adult bereavement services support hundreds of bereaved people through their one-to-one and group work, including the Bereavement Cafe and the course ‘Growing Around Grief’. More volunteers have been recruited to support the service and 2025/26 will see the introduction of a third Bereavement Cafe to meet growing service demand.

Our Young People’s Service (YPS) receives referrals from across Leeds, including hospital, schools, GPs, and Sue Ryder Wheatfields Hospice. The Cabin, our purpose-built space for young people, is well utilised for one-to-one support and group sessions. The team have introduced ‘Open Cabin’ every Tuesday morning, which is a drop-in session for children, their families and professionals. As well as regular family events, they have also started a new therapeutic group, Express Yourself, which allows children the opportunity to work creatively in a safe environment to process their feelings.

Bathing Service

In the last year, a bathing service was introduced for patients known to St Gemma’s Hospice who are unable to access a bath at home. Bathing is widely recognised for its capacity to provide relaxation, comfort, and overall well-being. This service aims to alleviate symptoms such as pain and sleep disturbances in cases where pharmacological interventions alone have proven ineffective.

As many of the patients referred are highly complex, a comprehensive risk assessment is completed before a bath is organised. Each patient has provided feedback as part of the evaluation, and even in its first few months we have seen significant benefits for patients and for the staff involved.

“

...treats mum with so much compassion and respect she visits every couple of weeks and I know that on every visit she gives mum peace of mind and comfort... thank you.

COMMUNITY/THERAPY

Patient Survey

Academic Unit of Palliative Care



A key part of St Gemma's charitable activities is the provision of education and training for professionals and volunteers engaged in palliative care. The Academic Unit of Palliative Care (AUPC), a partnership between St Gemma's Hospice and the University of Leeds, has an integrated offer of Learning and Teaching, Research and Evidence Based Practice. The AUPC continues to grow as a centre of excellence, advancing care for people approaching the end of life through innovation, collaboration and knowledge translation, locally, nationally and across the world.

Learning and Teaching

- Expand and modernise communication skills training
- Commercialise targeted areas of training
- Review and develop the education infrastructure and environment

Research

- Build research capacity, capability and delivery at the Hospice
- Develop the Hospice as a hub for a network of research active units

Evidence Based Practice

- Strengthen engagement, culture and clinical utility of evidence-based practice (EBP)
- Integrate EBP with education and quality improvement

General

- Create a sustainable model of collaborative partnership between the Hospice and the University of Leeds

Overview of 2024/25

Learning and Teaching

The Education Team delivered a high-quality, wide-reaching programme during the year supporting both internal and external training. Some of the highlights are:

- ♥ 1,439 health and social care professionals trained across the UK in a range of established and new programmes
- ♥ New programmes embedded, such as the Principles and Introduction to Palliative Care courses funded by the West Yorkshire Combined Authority
- ♥ Bespoke training through new collaborations, e.g. communications skills training for Sheffield Teaching Hospital Trust
- ♥ 25 internal training topics, including tracheostomy care, project management and communication skills
- ♥ Staff apprenticeships supported with four completed during the year and three commenced, including two Trainee Nursing Associates.

All courses are fully evaluated and 100% of external participants would recommend the training they undertook to colleagues.

As a University Teaching Hospice, St Gemma's continues to provide a range of clinical placements. Demand has increased, with consistently excellent feedback.

In 2024/25, St Gemma's hosted **184** students across a range of disciplines:

- ♥ Medical Students and Physician Associates: **89**
- ♥ Nursing (IPU and Community): **62**
- ♥ Paramedics and wider multi-disciplinary team: **33**

The team is exploring innovative ways of supporting and teaching students. This year, we started to pilot a Virtual Clinical Experience involving remote video transmission from consultation room to student audiences online. This project will be fully evaluated and then plans made to progress this work.

Research

The AUPC research team, based at the University of Leeds, had a highly productive year:

- ♥ £3.3 million in research funding secured across more than 20 active projects
- ♥ Additional bids submitted to major funders including the National Institute for Health Research (NIHR) and Horizon Europe
- ♥ Recruitment of three new clinical academics and two PhD students focusing on bereavement and economic evaluation in fragile settings
- ♥ Notable appointments and awards:
 - Dr Lucy Ziegler appointed Pro-Dean for Research and Innovation
 - Dr Matthew Allsop received two international best paper prizes
- ♥ 33+ peer-reviewed publications in leading journals
- ♥ Findings shared at major conferences including the European Association of Palliative Care, the Multinational Association of Supportive Care in Cancer, and Palliative Care Congress.

The team continues to have an exceptionally broad reach in its work, contributing to national policy via the NIHR Palliative and End of Life Care Policy Research Unit, providing oral evidence to the House of Lords Commission on Palliative and End of Life Care, working with other national research teams and hosting international scholars.

Cognisant of the disparities in access to palliative care, the University research team continues to build a strong programme of work in this area, particularly for minority ethnic communities, carers, people living in deprived areas and those experiencing serious illness in humanitarian settings. This includes research exploring the cultural accessibility of assessment tools and studies with refugee and asylum-seeking communities.

In the last year, with dedicated resource at the Hospice, we have supported research studies and projects, promoted research culture and built partnerships with universities, hospices, and NHS trusts.

Future goals include forming a research group and increasing staff capability. All these efforts are laying strong foundations for expanding research activity, embedding research into clinical practice, and contributing to national palliative care evidence.

“

What a fantastic course! The course was really engaging, with brilliant actors and facilitators. ...I would definitely recommend to colleagues in palliative care and beyond.

FEEDBACK FROM ADVANCED COMMUNICATION SKILLS TRAINING

Evidence-Based Practice

The Evidence Based Practice (EBP) group includes representation from all clinical and academic services, and has nurses, therapists, pharmacists, the research practitioner and doctors attending regularly. The vision for the group is to widen its membership to encourage all staff to understand why we practice in the way we do and to have the confidence to question and challenge each other.

Updated Guidelines

Examples of guidelines reviewed and updated in 2024/25:

- ♥ Constipation
- ♥ Assessment of pain in cognitive impairment
- ♥ Eating and drinking with an unsafe swallow
- ♥ Management of seizures

Lunch and Learn

Aimed at all Hospice staff different departments are asked to bring a topic and see how evidence in this area is used to improve quality and standards. Sessions have included:

- ♥ The Role of End of Life Doulas
- ♥ Learning Disabilities and Autism
- ♥ Reflective Discussion
- ♥ Self-management strategies for Fatigue and Anxiety
- ♥ The Role of the Medical Examiner
- ♥ Research in Palliative Care

Clinical Audits

The EBP team has completed clinical audits and taken part in national and international audits over the last six months. We are now improving the dissemination and implementation of learning from audits. Examples are:

- ♥ Non-medical prescribing in the Community and IPU
- ♥ Citywide anticipatory medications audit
- ♥ ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) on the IPU

Film and Book Club

The club brings staff together from the wider Hospice and encourages reflection and supportive group discussion in a safe environment. The books and films are on topics encountered in our work, for example palliative care, bereavement, family life and dynamics, or emotional wellbeing.



The Leeds Palliative Care Network



St Gemma's Hospice hosts the Leeds Palliative Care Network (LPCN). As a collaborative partnership of providers, the LPCN is committed to the highest quality, coordinated, consistent, equitable and sustainable care in the final phase of life. It brings together health, social care and academic professionals across Leeds, provides strong partnerships and crosses traditional boundaries to bring about system-wide change.

During 2024/25 the LPCN, continued to be an effective and essential partner with the West Yorkshire Integrated Care Board both regionally and in Leeds, contributing to work streams such as the WY Health Needs Assessment for end of life care (published March 2025) and supporting a priority project for the Healthy Leeds plan related to end of life and respiratory disease.

The Chair of the LPCN is a member of the Leeds End of Life (EOL) Population Board, enabling the LPCN to provide insight and to inform and influence strategic planning and decision making for the future, whilst delivering the agreed priorities established by the Board on the ground.

The LPCN links with the Leeds Directory to ensure the best information offer, to both the public and professionals.

In line with the Leeds Palliative and End of Life Care (PEOLC) Strategy 2021-2026 and the EOL Board, the LPCN delivered key quality improvement projects to support and drive change across the system. Notable examples are:

Audit and Data Initiatives

- ♥ Launched a new audit (starting Q1 2025/26) to analyse community ReSPECT data using both quantitative and qualitative methods
- ♥ Supported integration data into the Leeds Data Model, revealing widespread digital advance care planning and existing inequalities.
- ♥ Completed a validation review of the Timely Recognition Tool for GPs; determined it lacked added value, with alternatives now being explored
- ♥ Reviewed and approved updated clinical guidelines for opioid use in palliative care, end-of-life care in renal/liver disease, and palliative oxygen therapy.

Equality and Inclusion

- ♥ Established the LPCN Equality, Diversity and Inclusion Group
- ♥ Developed accessible 'easy read' materials for people with learning disabilities
- ♥ Initiated an audit to assess the needs of underserved communities in PEOLC.

Service Improvement

- ♥ Implemented measures to ensure the Leeds Palliative Care Ambulance

Education and Workforce Development

- ♥ Delivered PEOLC training to Allied Health Professionals
- ♥ Provided Planning Ahead training for current and prospective ReSPECT signatories
- ♥ Supported a one-year training project for Clinical Support Workers at Leeds Teaching Hospitals Trust, with a sustainable plan for ongoing staff development.

Patient and Family Experience of the Hospice

Hearing about the experience of patients, service users and loved ones is key to understanding the quality of our clinical services. It helps us to understand what is important to patients and families and to continuously improve our services. It also enables us to recognise and celebrate outstanding care as many of the comments name individual members of staff or whole teams.

In 2024/25 we implemented a new experience platform – I Want Great Care (IWGC) – with surveys accessed in paper or online. There is a direct link on the Hospice website and questionnaires are available in easy-read and translated formats.

Across the year we collected feedback in different ways:

- ♥ Ongoing: From bereaved families following In-Patient Unit (IPU) care and bereavement services
- ♥ Periodic: From specific services, such as community nursing or therapy teams, typically once or twice a year
- ♥ Event-based: Feedback from events and training (e.g. Growing Around Grief, Young People's Service events) to shape future activities.

This year, the Hospice received 239 survey responses, with over 300 positive comments. Common themes included:

Kindness
and
Compassion

Environment
and
Atmosphere

Caring for
everyone,
by everyone

Expertise
and Skill

All feedback is reviewed by the relevant Head of Department, so that they appreciate the extensive body of supportive comments, understand what matters to people, identify any issues or concerns and share across their services. Where complaints are received, they are fully investigated, and learning is shared with relevant teams.

Governance is overseen by the Chief Nurse, with quarterly reports presented to our internal quality groups.

We also contribute to citywide initiatives, including:

- ♥ Healthwatch Leeds' How Does It Feel for Me? programme
- ♥ The Leeds Palliative Care Network focus on feedback from minority ethnic communities.

IPU - Bereaved Carers

We received 110 responses from families of patients who died on the IPU, with 98 submitted via IWGC.

The overall
experience was
rated 5/5
100%

Question	Moors	Dales
Treated with dignity and respect	5.0	5.0
Involved in decisions	4.98	4.97
Received the right information	4.98	4.95
Staff were kind and caring	5.0	5.0
Confidence in staff	4.98	5.0
Satisfied with support	4.98	5.0

Bereavement Services

We received 18 responses from people who accessed bereavement counselling. The average experience score was 4.9/5. All respondents:

- ♥ Had confidence in their counsellor (5.0)
- ♥ Felt listened to (4.94)
- ♥ Were treated with dignity and respect (5.0).

Some feedback suggested a desire for more sessions and greater continuity with counsellors, although they acknowledged the pressures on the service.

Feedback is also gathered from Bereavement Cafés and the Growing Around Grief course and is reviewed by our Patient Experience Group.

We are currently reviewing how we collect feedback from children and young people, as no formal responses were received this year, despite regular informal praise from families.



Service Specific Feedback

In 2024/25, we surveyed patients from the Clinical Nurse Specialist (CNS) team and Therapy Services (Occupational Therapy, Physiotherapy, Complementary Therapy). We received 129 responses, with an overall experience score of 4.9/5.

100%
felt treated with
dignity and
respect

100%
said staff were
kind and caring

100%
were satisfied
with the support
received

97%
felt involved
in decisions

98%
received
the right
information

Complaints

In 2024/25 the Hospice received two clinical complaints and seven comments about care, two of which came through our feedback surveys. Eight of the nine were raised by relatives following the death of a family member.

- One complaint related to how the Hospice team managed their relative's pain, and concerns about their involvement in their decision-making. The relative expressed feelings of being excluded from clinical discussions and care. The investigation found clear documentation of the team's attempts to navigate complex pain management and involve both the patient and their partner in all aspects of care. It identified some gaps in communication with the family, specifically about sharing sensitive information across the Hospice team to provide consistency. We plan to integrate the case into future education about Psychological and Emotional care.
- The second complaint is ongoing and relates to complex family dynamics and the Hospice's response to a request around information sharing.

Of the comments submitted, many were fully addressed through early contact, and by agreeing any necessary actions to be taken. There were no recurring themes across the year, but they included concerns about a specific staff member, timeliness of the decision to admit, and concerns about distress at the very end of life.

Improvement Register

During 2024/25 we captured 13 improvement comments through the feedback platform, generating themes which are consistent with the findings from complaints and concerns:

- Communication around the final stages of life
- Timeliness of admissions and discharges
- Clarity on short-term admissions and respite care
- Environmental concerns (e.g. bed size, oxygen system noise)
- Support for wider family members
- Continuity in counselling support.

In response to this learning, we have reviewed the information given to families prior to and during their IPU admission to clarify the facilities available and manage expectations about length of stay. Comments about discharge are routinely shared with the Discharge Lead, as this continues to be a difficult transition for many families.

We continue to monitor the feedback programme to ensure it has impact and represents the voice of all service users.

“

All of the hospice staff are committed, compassionate, more than competent and exactly the people who I want taking care of me in the last phase of my life. They always go above and beyond, almost as a reflex. I cannot praise all of the St Gemma's teams enough.

COMMUNITY/THERAPY
Patient Survey

Involvement and Engagement

The founder of the modern hospice movement, Cicely Saunders, said 'you matter because you are you'. As a Hospice, we know that to deliver on that philosophy we must understand the needs of the community we serve. Keeping connected and engaging proactively across the city is vital to inform how we plan, evaluate and improve our services.

The Hospice's Involve Group brings together all areas of patient and public involvement, keeping diversity, inclusivity, accessibility and engagement high on our agenda. Involve reports to the Board through the designated Equality, Diversity and Inclusion Champion at Clinical and Academic Governance Committee.

In 2024/25 we revised the scope of the Involve Group to reduce duplication with the staff culture and engagement work. Achievements of Involve in 2024/25 include:

- Upgraded signage for the Hospice toilet facilities to improve accessibility and inclusion
- Specific projects to enhance access to Hospice services, such as implementation of Accessible Information Standard within the clinical record and engagement with the Pakistani community
- Celebrating diversity in the Hospice – a range of events celebrating and sharing key religious and cultural festivals, such as Christmas, Diwali, holding a community iftar during Ramadan and an Ethiopian coffee ceremony.
- Implementation of a new patient/service user experience platform, I Want Great Care
- Building a database of community engagement across all income generation, community and volunteering services.

The Hospice's ethnicity data shows a gap in support for people of Pakistani origin in Leeds. This is now an area of focus with project leads working with local community groups to understand their needs, address some of the myths around death and dying and enhance referrals into Hospice services.

Our Inclusion Service, improving care for homeless and vulnerably housed people at the end of life, makes a significant contribution to outcomes for patients and for the whole system. Data collected for patients in the Inclusion Service, over the past two years, shows:

- 85% reduction in Emergency Department attendance
- >90% reduction in hospital bed days
- 100% of patients having the opportunity to discuss their wishes for end of life care
- 80% of patients achieving their preferred place of death.

Although the population is thankfully small, this is strong evidence that a designated resource can have a substantial impact on outcomes citywide. The Hospice continues to work with commissioners to secure recurrent funding.



The Hospice Leadership Team is committed to ensuring that the voice of palliative and end of life care is integrated throughout the health and care sector, in forums such as the Partnership Leadership Team and Leeds Health and Care Academy. We are members of the Leeds End of Life Population Board and the West Yorkshire Hospice Collaborative, brought together to better understand the changing demographics of the population and identify any gaps in service provision or engagement, as well as to secure more sustainable NHS funding for hospices.

We continuously aim to strengthen our presence in the community, helping more people understand who we are, the support we offer, how to access our services, and why ongoing funding is essential. We use a range of communication channels to connect with a broad range of audiences across Leeds. This year we launched a new website with a strong focus on accessibility and user experience, making it easier for people to find information and connect with our services.

Our 26 charity shops remain an essential part of our community presence, providing vital income and serving as familiar, friendly connections to St Gemma's in neighbourhoods across the city.

Employee Engagement & Staff Wellbeing

Staff Survey 2024

In May-June 2024 we participated in the Birdsong Charity Consulting staff survey which allowed us to benchmark our results against those of 31 other hospices. We were very pleased to achieve a response rate of 71%, our highest so far.

The results were overwhelmingly positive, particularly in respect of St Gemma's care, staff experience and leadership. For example:



One of the valuable metrics in the Birdsong survey is overall engagement, based on the total agreement scores for seven questions. If most (or all) of these seven key indicators score positively, it usually indicates that solid building blocks of a healthy organisational culture are in place, even if some other areas of staff satisfaction need attention. We were delighted to see that our overall score was 84% compared to the hospice benchmark of 81%.

As always, there are areas for improvement, many of which we have already taken on board. We are addressing both what we do and how we communicate what are doing where our scores are not as we would expect, although we are still broadly in line with other hospices. For example:

- Only 59% of staff agreed that our processes and procedures help them do their job effectively
- 49% felt that St Gemma's is doing all it can to reduce its impact on the environment
- 27% of staff felt that our pay was not competitive in the sector.

Finally, we appreciate that working in the hospice sector can be challenging and at times stressful. 52% of staff commented that they sometimes feel overwhelmed with stress. This highlighted the need to understand the causes of stress to ensure we provide the most effective support. In addition to providing a broad range of wellbeing activities, we offer staff the Health Assured programme with benefits including additional therapeutic and medical support. All clinical staff are also able to access reflective discussion (an improved form of clinical supervision) on a regular basis. With the staff survey feedback in mind, we communicate these opportunities regularly and are looking to identify any potential gaps.

We plan to complete the Birdsong survey every two years.

Wellbeing

Our investment in wellbeing activities reflects our commitment to creating a positive, inclusive, and supportive workplace culture. In 2024/25 our network of Wellbeing Champions had four areas of focus - social, financial, mental and physical wellbeing. Some of the key achievements were:

- Annual Wellbeing Week in October providing a broad range of sessions across the week including pension planning, colour therapy, health checks, access to Leeds leisure facilities pottery painting and garden talks
- Regular wellbeing sessions across the year including calligraphy writing and visits from pizza and ice cream vans
- A staff party attended by 150 staff
- Monthly Cake Day - organised by the wellbeing champions to celebrate religious festivals or themes as broad as gratitude and safe use of display screen equipment.



Volunteering

Volunteers are a vital part of the support that St Gemma's provides to our community. We are proud to have 759 volunteers fulfilling 792 roles across the organisation. Of these, 76% contribute within our retail teams, 11% support our fundraising efforts, and 13% are based within the Hospice itself, including our Board of Trustees.

This year, we have made significant strides as we grow and invest further in our volunteer team. With a strong foundation already in place and ambitions to do even more, we welcomed two new members to our Volunteer Services Team and launched the Volunteers' Hub - a dedicated space for all things volunteering.



♥ **Launch of the Ward Support Volunteer role:** Designed to provide companionship and practical support to patients, families, and staff.

♥ **Retail Volunteers' Contributions:** Our retail volunteers play a crucial role in the success of our shops providing many hours of support, even during the worst weather. The retail hub continues to be extremely busy, and volunteers go above and beyond to sort through donations and distribute stock to the shops and our Ecommerce volunteers have supported us to increase sales including specialist volunteers in records and coins influencing the value of items.



♥ **Recognition Events:** Over 200 volunteers joined us at our Thank You events in June and December, with distinguished guests including the Lord Mayor and the High Sheriff attending the December celebration.

♥ **Garden Development Project:** A brand-new garden area was beautifully developed under the leadership of two dedicated volunteers. Their collaboration with local company S9 Communications brought the project to life. This serene space will be enjoyed by patients, families, and staff for years to come.

♥ **Corporate Volunteering Growth:** Engagement from corporate partners continues to grow, with support from 45 companies in our retail hub, gardens, shops, and events.

We extend our heartfelt thanks to all our volunteers and Trustees for their unwavering support, generosity, and dedication.

“

From the first session to the last I always felt I was in a safe place. The sessions have helped me navigate through the raw pain of losing my gorgeous mum.

PATIENT'S FAMILY
Bereavement Survey



Statement from the NHS West Yorkshire Integrated Care Board in Leeds

The Integrated Care Board (ICB) in Leeds would like to sincerely thank you for the opportunity to review and provide feedback on your Quality Account. It has been a pleasure to reflect on your achievements in 2024/25 and your priorities for 2025/26.

The Quality Account is clearly presented, with well-organized sections that make it easy to follow. Opening the report with Bobbie's story is particularly impactful, offering a heartfelt insight into the positive difference St Gemma's makes for patients and their families.

While this report includes many excellent additions, we will focus on a selected few for the purpose of this feedback.

We were especially encouraged to read about the Palliative Care Inclusion Service, which is making a meaningful difference by improving care for homeless and vulnerable individuals nearing the end of life—a group that is often overlooked.

The impressive number of healthcare professionals trained in 2024/25 (over 1,400) highlights your commitment to education and proactive planning for the future of care services.

Throughout the report, there is a clear focus not only on immediate patient safety but also on learning from incidents. It is evident that St Gemma's fosters a safe and supportive environment where staff feel empowered to report openly and honestly, knowing that this transparency contributes to a safer organisation overall.

Your robust governance framework, supported by an experienced clinical team, is commendable. We also note the strong engagement from Trustees with both patients and staff, which is essential in capturing authentic experiences. The 100% positive feedback from patients and families, alongside encouraging staff survey results, speaks volumes.

St Gemma's active participation in the Leeds Palliative Care Network demonstrates a genuine commitment to collaborative working, bringing together diverse skills and perspectives to improve efficiency and outcomes.

Progress against your 2024/25 priorities is clear, and we appreciate your openness regarding areas where progress has been slower than expected. The goals outlined for 2025/26 promise to further strengthen an already excellent service.

It is inspiring to read about the ongoing improvement projects focused on safety around mortality, dementia, and pressure ulcer risk—initiatives that are enhancing patient care as well as boosting staff confidence and skills.

In summary, despite the challenges of losing a highly skilled Chief Executive and Chief Operating Officer, alongside a 9% rise in new referrals and a significant increase in in-patient numbers, St Gemma's continues to provide safe, compassionate care for the people of Leeds. Under the leadership of the new Chief Executive, strong guidance remains at the heart of the organisation.

This dedication is undoubtedly what sustains St Gemma's outstanding CQC rating.

Thank you again for submitting such an impressive and reassuring Quality Account. It has truly been a pleasure to review.

Yours sincerely

Karen Varley
Quality Manager

Statement from Healthwatch Leeds

Thank you for the opportunity to review your Quality Account. The account is well presented, visually easy to follow and highlights lots of the incredible work that St Gemma's Hospice has done in 2024-25 especially with an increase in new referrals to the Hospice.

St Gemma's is a committed partner of the 'How Does It Feel For Me' programme across Leeds which follows people's real time experiences of health and care in Leeds, including through a video series and complaints analysis. We are grateful for their dedication and look forward to strengthening this relationship further and see how St Gemma's work to implement the 3Cs (Communication, Coordination and Compassion) into everything that they do.

Throughout the account, it is evident that St Gemma's engages with people with the inclusion of feedback quotes. The dedicated chapter of the account on 'Patient and Family Experience of the Hospice' is clear and so is the efforts made by the team at St Gemma's to create a welcoming environment where people are treated with compassion. Some good examples in the account include:

- Comments and complaints being fully addressed through early contact and by agreeing any necessary actions to be taken (pg.28).
- The work of the Hospice's Involve Group to reduce duplication with the staff culture and engagement work including implementing the Accessible Information Standard within the clinical record, upgrading signage for toilet facilities, and building a database of community engagement across all income generation, community and volunteering services (pg.29).
- The Inclusion Service working to improve care for those who are homeless or vulnerably housed at the end of life which has had some remarkable outcomes (pg.29).
- Launch of a new website which focuses on accessibility and people's experiences as well as being able to find information and connect with services (pg.30)

We also note the effort made by St Gemma's to engage with staff, share learning and training, and ensure that the organisation is a good place to work. It's clear the work that all staff at St Gemma's are doing is having a positive effect on outcomes and experiences of hospice care.

Overall, this is a great Quality Account, and we are grateful for the opportunity to comment on them. It has been another great year for St Gemma's Hospice, and we look forward to continuing our work with you throughout 2025-26 and beyond.

Glossary

ACP Advance Care Planning

This is a process that supports adults at any age or stage of health in understanding and sharing their personal values, life goals and preferences regarding future medical care. Its aim is to ensure that people receive medical care that is consistent with those values, goals and preferences during serious and chronic illness.

AUPC Academic Unit of Palliative Care

Run in partnership with the University of Leeds, this delivers education, undertakes national and international clinical research and seeks to develop the quality of services through linking research into clinical practice.

CQC Care Quality Commission

This is the independent regulator of health and social care in England. It regulates health and adult social care services provided by the NHS, local authorities, private companies or voluntary organisations. www.cqc.org.uk

ICB Integrated Care Board

On 1 July 2022, individual clinical commissioning groups (CCGs) were replaced by integrated care boards (ICBs). ICBs are now responsible for planning and buying (commissioning) NHS services. They work at a regional level to help join up services and delegate some funding and decisions to local places, such as Leeds.

LPCN The Leeds Palliative Care Network

This is a collaborative partnership group which brings together all providers of palliative and end of life care services across Leeds to improve patient and family care.

ReSPECT

ReSPECT stands for Recommended Summary Plan for Emergency Care and Treatment. It is a process used within healthcare to create a personalised summary of recommendations for a person's clinical care in emergency situations when they are unable to make decisions or express their wishes.

**For further information about this Quality Account please
contact the Chief Nurse or the Chief Executive at
St Gemma's Hospice (0113 218 5500)**

St Gemma's Hospice is a local, independent charity, providing expert medical and nursing care to thousands of local people every year – all free of charge to patients and their families.

If you would like more information about our work, please contact us

📍 St Gemma's Hospice
329 Harrogate Road
Moortown
Leeds, LS17 6QD

🌐 www.st-gemma.co.uk
✉ hello@st-gemma.co.uk
Reception: 0113 218 5500

📘 www.facebook.com/st.g.hospice
🌐 www.linkedin.com/company/st-gemma-s-hospice
📷 www.instagram.com/stgemmahospice

