



St Gemma's Hospice

Quality Account

2022/23

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Hospice Vision and Strategy

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

Our Strategy 2018 - 2028:



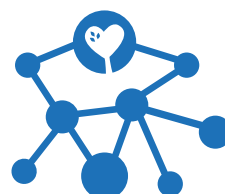
Impact

St Gemma's University Teaching Hospice will improve care for patients and families through research, education and translating evidence into practice



Connect

St Gemma's Hospice will work in partnership with others to provide the standard of care we would want for our own families



Extend

St Gemma's Hospice will develop palliative and end of life care services in Leeds to meet the needs of more people in the future

Our Foundations:

Quality

Continuous improvement is sought across all areas of the Hospice

Sustainability

Our Hospice services, estate and workforce are financially viable and fit for the future

Scope

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

Statement on Quality from the Chief Executive

Welcome to the St Gemma's Hospice Quality Account 2022/23. Our Quality Account sets out how we deliver our vision of meeting the needs of individuals with a terminal illness and supporting their loved ones. It also sets out the quality improvements that we have introduced this year and those we are planning for the year ahead.

Patient and family feedback about their experience of our services has continued to be excellent, reflecting the Outstanding rating we received from the Care Quality Commission in our most recent inspection in November 2021. We continue to expand the range of feedback we receive each year, to provide assurance about care quality across all areas of St Gemma's.

The impact of the COVID-19 pandemic has finally reduced and, alongside unrestricted patient visiting, we have been able to return the Hospice to a more normal operating environment, welcoming more people back onto site for education as well as more volunteers and visitors from our local community and stakeholder groups.

Much of our activity remains stable compared with prior years. In-Patient admissions have increased to pre-pandemic levels following a challenging year in 2021/22 with high staff absences related to COVID-19 as well as recruitment challenges, both of which are

now improved. Bereavement service activity has significantly increased as we have widened our offer to meet high need in the community.

Our ambition to widen access has continued, with increased numbers of homeless and vulnerably-housed people cared for at the end of life, and a growing proportion of patients referred with a diagnosis other than cancer. In a very challenging year for all health and care services, the Hospice expanded the admission criteria for In-Patient care, to support increased admissions from the hospitals during the key winter months.

The number of clinical incidents has increased this year, in part related to increased activity and improved reporting. All incidents are reviewed, and themes are collated; there are no areas of particular concern. The introduction of the new NHS Patient Safety Incident Response Framework in the coming year will ensure the Hospice's approach is consistent with the rest of the health system within Leeds, and enhance the emphasis on safety, patient and family engagement and learning within all the quality improvement work we undertake.

Our quality improvement priorities for 2022/23 were: improving discharge planning; implementing a virtual ward; introduction of a quality improvement



methodology (Community Services); and improving mental health services for patients. We made good progress across all four areas. Our pilot of a virtual ward resulted in a decision not to adopt this model of care, and we now intend to pilot a rapid response service for community patients in urgent need of support. The Quality Improvement methodology work continues into 2023/24, working together with the NHS Improvement Academy.

Our quality improvement priorities for 2023/24 are focused on operational improvements in the day-to-day provision of palliative care and support. They are:

- ♥ Introducing the Patient Safety Incident Response Framework
- ♥ Improving Community Triage Processes (with NHS Improvement Academy)
- ♥ Enhancing Tracheostomy and Laryngectomy Care
- ♥ Improving the Safety Huddle

St Gemma's staff and volunteers are the heart of our Hospice; their wellbeing and engagement continues to be a high priority. Outstanding, compassionate care can only be provided when staff and volunteers feel engaged and committed to the Hospice. Our staff forum, Engage, has continued to support wellbeing initiatives, our Multicultural Network continues to flourish, and we have established an LGBTQ+ forum. We were ranked 31st in the Inclusive Top 50 UK Employers List 2022/23 and again achieved a two star rating in the Times Top 100 Best Companies list.

We are committed to improving care through evidence and through learning, not just for staff at the Hospice, but those working in palliative and end of life care across the region and nation. The Academic Unit of Palliative Care (AUPC), a partnership between St Gemma's and the University of Leeds, is a leading centre in its three focus areas of Research; Learning and Teaching; and Evidence into Practice. In 2022 we celebrated the important contribution made in the first 10 years of the AUPC and worked with the University of Leeds on our strategic plans for the future.

St Gemma's is committed to ongoing review of all longer term plans, ensuring we focus on opportunities for improvement in care to meet the needs of our community. During 2022/23 we conducted a strategic review of our In-Patient and Community services; this review has shaped our Business Plan priorities for 2023 to 2025.

We seek to amplify the voice of those approaching the end of life and the bereaved. This is partly achieved through directly hearing about what matters to local people and their experience of health and care services, and partly achieved through active engagement with other health and care providers across the city.

The Leeds Palliative Care Network (LPCN), hosted by St Gemma's, brings together health, social care and academic professionals across Leeds, working in partnership to deliver systems-wide improvement. One important project is a collaboration with the Seacroft Local Care Partnership (LCP), seeking to better integrate and improve care by involving individuals from the local community, third sector organisations and the wider LPCN. St Gemma's is also a member of the new Leeds Population Health Board for End of Life care, which aims to shape strategy for the city.

This year's Quality Account has been prepared by our Chief Nurse, with support from teams across the Hospice. The Hospice Leadership Team has been closely involved in setting our priorities and in leading improvements within the Hospice. The Board of Trustees has endorsed our Quality Account for 2022/23.

Kerry Jackson
Chief Executive



Statement of Assurance from the Board

The Board of Trustees works closely with the Hospice Leadership Team (HLT) to assure the quality and safety of all St Gemma's services, and to ensure that the Hospice continues to plan for the changing face of future need with ambition and innovation, but always ensuring the Hospice is sustainable for the long term.

Our strategic review work on the future direction of our core clinical services gave rise to much debate and challenge and has shaped our clinical priorities for the coming years.

The Board receives regular updates from the HLT and at the start of every Board meeting we hear a patient story. This keeps Board members connected to the reality of patient and family experiences. These stories are very powerful and showcase the expert and compassionate provision of patient-centred palliative care, often working in close partnership with other services.

We gain assurance about care quality through more detailed reports and discussions at the Clinical and Academic Governance Committee, including consideration of risks and incidents as well as updates on quality improvement initiatives.

We are finally able to meet face to face again as a Board, and we are very pleased that we have been able to reintroduce our regular sessions for Board members to meet staff and volunteers. This is another vital way in which Trustees can stay really connected to the work of the Hospice.

We were privileged to welcome three new individuals to the St Gemma's Board in July 2022; Dr Eileen Burns, Jackie Murphy and Brigid Reid. Dr Peter Belfield retired as Chair of the St Gemma's Board during 2022/23 and I was delighted to take up the post of Chair, having a background in NHS leadership and having previously chaired the Hospice Clinical and Academic Governance Committee. Dr Jon Smith took up the post of Deputy Chair and Dr Mo Sattar continued his valuable role as our Equality, Diversity and Inclusion Champion.

The Board is pleased by the progress made against key priorities for 2022/23, including the decision not to continue with a project which did not deliver real improvements in day-to-day care. The Board supports the quality improvements planned for 2023/24.

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.

Care is based on a simple idea – that the person is more than the illness. Each of us, sick or well, has unique physical, emotional, social and spiritual needs. St Gemma's tries to respond to these needs in ways which place the highest value on respect, choice and empowerment.



Our clinical services are provided by a multi-disciplinary team comprising:

- ♥ Doctors, including Medical Consultants
- ♥ Registered Nurses, Registered Nursing Associates and Healthcare Assistants
- ♥ Therapists: Physiotherapy, Occupational Therapy and Complementary Therapy
- ♥ Social Workers
- ♥ Spiritual Care staff and volunteers
- ♥ Bereavement Counsellors
- ♥ Support services providing cleaning, catering and laundry services for patients.

During 2022/23 St Gemma's Hospice provided the following clinical services:

Out-Patient Services providing patients with extra support to manage symptoms and optimise quality of life, through individual consultation with a Doctor, Clinical Nurse Specialist or Therapist, and a range of group activities.

Community Services providing specialist support and advice, usually in a patient's home or a 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.

In-Patient Unit (IPU) 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, some in shared bays. In-Patients are able to access support from the full multi-disciplinary team.

Bereavement Services working with families to provide both pre and post bereavement support, including provision of a citywide children's bereavement service.

Education and Research increasing and sharing knowledge to improve palliative and end of life care wherever it is provided.

Our Activity

Patients and families come into contact with St Gemma's services in many different ways. Patient numbers reflect individual people who access our services, although many will access more than one service over time, for example, specialist palliative care at home, support in Out-Patients or an In-Patient admission.

In 2022/23 there was a marked reduction in the impact of the COVID-19 pandemic on the whole Hospice, although some restrictions continued within clinical areas. St Gemma's team worked together, making collective decisions when guidance changed, adapting and balancing competing risks, and engaging with other care providers. We are delighted that we have been able to re-establish open visiting for families and expand the use of the Hospice for external events, such as education and volunteer celebrations.

We made the decision in January 2023 to stop wearing facemasks for routine face-to-face patient care, which has been greatly welcomed by patients and families and has not caused additional risk.

The number of new referrals is consistent with previous (non-pandemic) years. There has been a continuing increase in the proportion of patients cared for by the Hospice with non-cancer diagnoses, reflecting our commitment to widening access to people with a range of conditions.

The number of community contacts by medical and nursing staff is comparable with 2021/22 and includes all telephone and face-to-face consultations with patients, relatives and carers. We are delighted that in 2022/23 we were able to re-establish our in-person Out-Patient group activities and have seen a positive response to these both in attendance and in feedback about the sessions.

In-Patient length of stay is consistent with previous years. The number of admissions is higher than last year when admissions were limited due to staffing pressures, partly related to COVID. Occupancy rates continue to be high, with patient referrals for admission discussed daily to ensure use of the available beds is optimised or alternative support is provided.

Bereavement services have significantly increased their activity in the last year, through recruitment of additional volunteers and student counsellors, and provision of different service offers. Further details of the expanded service are outlined in the Review of Quality Performance.

Education provision has remained above pre-pandemic levels as the Hospice continues to support workforce development across the city and in the region. The spike in activity during 2020/21 reflected the unusually high levels of demand for training in response to the pandemic around infection control, advance care planning and verification of expected death. During 2022/23 the Hospice increased face-to-face education, as well as continuing to provide high levels of online learning opportunities.

Student placement numbers have increased in the last year, despite continuing to operate in a pandemic. Further detail about our educational activity is provided in the Academic Unit of Palliative Care section.



New Patient Referrals to the Hospice

2020/21	1,236	2022/23 1,365
2021/22	1,330	

Percentage of Patients with a Non-Cancer Diagnosis

2020/21	29%	2022/23 34%
2021/22	31%	

Admissions to In-Patient Unit

2020/21	508	2022/23 492
2021/22	416	

Average In-Patient Length of Stay (days)

2020/21	11	2022/23 12.2
2021/22	12.5	

Community Nursing & Medical Contacts

2020/21	19,787	2022/23 19,842
2021/22	21,448	

Bereavement Contacts

2020/21	1,437	2022/23 2,967
2021/22	1,202	

External Healthcare Professional Trained

2020/21	1,445	2022/23 1,054
2021/22	998	

Student Placements

2020/21	98	2022/23 128
2021/22	125	

Other MDT* Community Contacts

2020/21	3,908	2022/23 5,797
2021/22	5,662	

Out-Patient Group Contacts

Previously included in community contacts	2022/23 918
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*MDT = Multi-Disciplinary Team including Allied Health Professionals, Social Workers, Spiritual Care

Our Funding

The running costs of St Gemma's Hospice in 2022/23 were £13.5 million. The majority of this funding continues to be provided through the generous support of our local community in the form of donations, legacies, fundraising initiatives and our chain of charity shops.

The core grant income received from the NHS of £4.3m represents 30% of the total income generated by St Gemma's Hospice in 2022/23. All the financial support we receive from the NHS is spent directly on patient services. We also received one-off (non-recurrent) funding of £272k from West Yorkshire Integrated Care Board as part of a £1.8m NHS distribution to West Yorkshire hospices.

We are always conscious of the external environment in which we operate, including the cost of living crisis, other socio-economic challenges, and changes in demographics and the health needs of the population. We continue to review all our services on an ongoing basis to ensure we are operating as efficiently as possible, that we are spending wisely in delivering our care, and that we are responsive to the changing palliative and end of life care needs of local people.

We are actively engaged in local and national discussions about future NHS funding support and reviewing in depth our voluntary income generation opportunities and plans.



Care Quality Commission

The Care Quality Commission (CQC) inspected St Gemma's Hospice on 2 November 2021. The inspectors spent the day with staff in both Community and In-Patient services, as well as with the senior leadership team. We received the final version of our inspection report from the CQC on 10 January 2022.

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. The summary findings stated:

Inspected and rated

Outstanding ☆



- ♥ There was a holistic approach to assessing, planning and delivering care and treatment to people who use the services. 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. Teams were committed to working collaboratively and found innovative ways to deliver more joined-up care to people who use services.
- ♥ Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. They provided emotional support to patients, families and carers and went above and beyond what would have been expected to meet individual needs and wishes.
- ♥ Services were delivered in a way to ensure flexibility, choice and continuity of care and were tailored to meet patients' individual needs and wishes. 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.
- ♥ Leaders ran services well, led innovations and supported staff to develop their skills. Staff understood the vision and values, and how to apply them in their work. Staff were motivated to provide the best care they could for their patients.
- ♥ There was a common focus on improving the quality and sustainability of care and people's experiences. 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. The service engaged well with patients, staff and the local community.



St Gemma's continues to engage with our CQC relationship manager and to monitor and update evidence to ensure ongoing compliance as regulatory standards evolve and in preparation for any future inspection.

Quality Improvement Priorities

St Gemma's is committed to continually improving practice to ensure our services and the processes we use are effective, efficient and providing the best experience. Our Quality Account priorities are in line with the Hospice Strategy and integrated into the annual Business Plan.

To identify our priorities for quality improvement we:

- ♥ Review new evidence on how best to provide care and treatment
- ♥ Listen to patient and family feedback
- ♥ Consider staff suggestions for improving patient and family care
- ♥ Identify learning from clinical incidents and the small number of Hospice complaints
- ♥ Look for gaps in access to palliative and end of life care through our engagement with local people as well as other healthcare providers and partners in the city such as Healthwatch, the Leeds Palliative Care Network and acute and community NHS Trust colleagues

Progress Against Priorities 2022/23

Priority 1: Improving Discharge Planning – Patient Experience

System pressures across Leeds, seen particularly during the COVID-19 pandemic, impacted on the safe and efficient transfer of patients in and out of the Hospice. Impacts included reduced face-to-face discharge planning opportunities, restricted visiting, reduced availability of community staff to discuss patient discharge and a heightened need for clear and timely communication by St Gemma's staff with community providers.

The project's key targets were to:

- ♥ Enhance the coordination of discharge from the In-Patient Unit (IPU)
- ♥ Ensure patients achieve their preferred place of care (PPC) and preferred place of death (PPD).

Project Summary:

Following the successful appointment of a Patient Transfer Nurse, we have been able to make significant progress. We have implemented a code on SystmOne, our patient electronic record, to identify when a patient is medically fit for discharge, which ensures information is shared across the Multi-Disciplinary Team (MDT) and enhances the coordination of discharge from the IPU in a timely way.

A leaflet has been developed with the wider Hospice team to provide useful information for patients and carers regarding their stay in the Hospice and what to expect when discharged. This is routinely used by both the IPU and Community teams.

We continue to support the majority of patients to achieve their PPD. However, we recognise that discharge is a complex process; therefore, our Discharge Focus Group will continue to meet, review and develop current practice, which will include an audit of our documentation.





Priority 2: Implementing a Virtual Ward – Clinical Effectiveness

There are increasing numbers of patients with complex needs being cared for by St Gemma's Community team. Many of these patients prefer to be cared for, and die, at home. The Community Specialist Palliative Care team offers a responsive, patient-centred, holistic service using a model of triage and stratification to prioritise and standardise caseloads.

The project's key targets were to:

- ♥ Provide enhanced multi-disciplinary specialist palliative care in people's homes and effectively meet the needs of patients with the most relevant health care professional, service or intervention
- ♥ Reduce admissions to hospital and Hospice and help achieve patients' preferred place of care and death
- ♥ Promote earlier discharge from the Hospice and hospital for patients with complex needs.

Project Summary:

After a trial period, St Gemma's evaluated the 'virtual ward' model, which was initiated and developed by Wheatfields Hospice; we identified no additional benefits for our patient group, their admission rates or their experience. A decision was therefore made to step back from the virtual ward model.

A wider strategic review of potential areas for improvement in our Community services provision was undertaken. The team determined that the area of greatest need would be met by developing a consultant-led, multi-disciplinary rapid response service for patients with specialist palliative care needs who develop an urgent, unexpected and severe palliative care problem in the community. We are in the process of developing a rapid response model to pilot over the next two years.

Priority 3: Improving Mental Health Services – Patient Safety

The mental and emotional wellbeing of patients, families and loved ones is of paramount importance during the palliative and end of life phase. The Hospice teams already value and provide high quality emotional care. This project is about improving the mental health offer ensuring equality, inclusion and consistency of provision. The plan would also provide greater clarity for professionals and patients about service availability.

The project's key targets were to:

- ♥ Develop an overarching and coherent mental health plan at St Gemma's Hospice
- ♥ Establish the optimal structure and leadership for embedding and improving psychological and emotional care
- ♥ Establish and begin to deliver a training plan for staff to support improvements in mental health and wellbeing.

Project Summary:

A Hospice-wide psychological care working group was established to scope and support the development of an improvement plan. A comprehensive plan has been developed which outlines the optimal structure and leadership for improving psychological and emotional care.

It also defines an ambitious training plan to support this improvement. An additional part-time Specialist Mental Health Practitioner has also joined the MDT as expert support. Although the implementation phase was delayed given competing priorities, work is ongoing and now forms part of the Hospice Business Plan 2023-25 supported by the Hospice Leadership Team.



Welcome to the Dales W

Priority 4: Introduction of Quality Improvement Methodology

Quality Improvement (QI) is a framework used to systematically improve care using a standardised approach to achieve predictable results and improve outcomes for patients and organisations. QI should engage staff and patients by providing them with the opportunity and skills to contribute to improvement work.

The Community Specialist Palliative Care Service at St Gemma's is required to continuously adapt to growing demand and to patients living and dying at home with increasingly complex needs. During the COVID-19 pandemic the Community team adapted traditional models of care in order to support patients at home, whilst managing the clinical challenges posed by COVID-19. As we moved on from the pandemic, we were keen to ensure that our service met future demand and continued to deliver high quality patient care.

We planned to work with the NHS Improvement Academy to apply a QI approach to our Community Service developments, creating a core team of St Gemma's staff who would be competent and confident in the use of recognised QI methodology which would be transferrable to any future service improvement project.

The project's key targets were to:

- ♥ Understand the experience of patients and Hospice Community staff of receiving or delivering palliative care within our service
- ♥ Prioritise areas for improvement benefitting from a QI approach, based on feedback
- ♥ Train clinical staff to use a number of recognised methodologies and apply these to the agreed project/ challenge
- ♥ Work with the NHS Improvement Academy to initiate the agreed improvement plan
- ♥ Agree defined outcome measures to evaluate the impact of the project and the learning achieved.

Project Summary:

The Project plan identified three phases. Phase One 'Diagnostics for Improvement' is complete. We have now moved into Phase 2 'Deliver Improvement in Agreed Key Areas.' The Community team agreed the project would focus on understanding the effectiveness of the triage process. A multi-disciplinary project group was formed, supported by the NHS Improvement Academy, to explore improvement ideas and reduce workload pressures and wellbeing as well as developing skills in quality improvement methodology. During 2022/23 some of the ongoing demands on community services impacted progress with the project, therefore the project will continue into 2023/24 as Priority 2: Improving Community Triage Processes.



Quality Improvement Priorities 2023/24

The following priorities have been identified for 2023/24:

Priority 1: Introducing the NHS Patient Safety Incident Response Framework – Patient Safety

Over the coming year, the Hospice will align its incident assurance and improvement programme with the new Patient Safety Incident Response Framework, as outlined in the NHS Patient Safety Strategy (2019). The aim of this work is not only to ensure the Hospice's approach is consistent with the rest of the health system within Leeds, but also to enhance the emphasis on safety, patient and family engagement and learning within all the quality improvement work we undertake.

The project's key targets are to:

- ♥ Complete a review of the statutory and sector requirements for implementation
- ♥ Generate a patient safety plan, including recommendations for training.

Priority 2: Improving Community Triage Processes (with NHS Improvement Academy) – Clinical Effectiveness

Priority 4 from 2021/22 completed the initial 'Diagnostics' phase, identifying Community Triage as the focus for improvement.

Phase 2, 'Deliver Improvement in Agreed Key Areas', using an iterative process of Plan, Do, Study, Act (PDSA) cycles, is being applied with new ways of working being tested in a controlled environment. This area remains important to us and therefore the project will continue as a priority in 2023/24.

The project's key targets are to:

- ♥ Train clinical staff to use a range of recognised methodologies and apply these within the project
- ♥ Work with the NHS Improvement Academy to implement the Community Triage improvement plan
- ♥ Agree defined outcome measures to evaluate the impact of the project and the learning achieved.



Priority 3: Enhancing Tracheostomy and Laryngectomy Care – Patient Experience

This priority was chosen to enhance safety and continue to provide access to Hospice In-Patient care for patients with complex needs and a high risk of adverse outcomes if the tracheostomy is managed incorrectly. The low number of patients seen in the Hospice with a tracheostomy or laryngectomy makes it difficult for staff to maintain confidence and clinical competence.

To address this, the senior clinical and education teams have identified a need for staff development and ongoing support, to be based on a solid framework of education and practice development.

The project's key targets are to:

- ♥ Develop a tracheostomy/laryngectomy Special Interest Group
- ♥ Create a training package for all clinical staff on the care of patients with tracheostomy/laryngectomy (including emergency care)
- ♥ Develop guidelines and competencies to be written by the Special Interest Group using national best practice guidance.

Priority 4: Improving the Safety Huddle – Patient Safety

A safety huddle is a short multi-disciplinary briefing, held at a pre-arranged time and place, which focuses on patients most at risk. The NHS Improvement Academy advocates the use of safety huddles to support effective communication for the care of individuals, and thus improve safety.

The IPU currently holds a daily safety huddle on each ward involving the whole Multi-Disciplinary Team (MDT). Attendance can be poor due to ward pressures, and the quality of information shared is variable, with different expectations of the huddle across the team. As such, the decision was made to review the whole process of safety huddles.

We aim to achieve a more effective way of meeting to identify and share holistic, concise and accurate clinical information relating to patient safety across the IPU, which should in turn reduce the number of clinical incidents on the unit. By raising awareness of risks at the safety huddle, we will ensure that information is cascaded to all teams and that the MDT works collaboratively to look for potential risk mitigation. Clear communication also improves the efficiency of referrals to different teams, reducing the time a patient waits for intervention.

The project's key targets are to:

- ♥ Reduce In-Patient-related incidents
- ♥ Improve communication between members of the MDT
- ♥ Reduce waiting times for interventions.



Review of Quality Performance

Safe and effective patient and family care is central to everything we do at St Gemma's. We aim to make care personal, working with patients and their loved ones to understand what is important to them and how best we can meet their needs.

We are committed to continuous improvement in our services by monitoring performance against key indicators, looking for any gaps in practice or areas of risk.

The Hospice aims to learn from safety incidents and any concerns raised, and to implement new research findings and best practice guidance.

The Hospice uses a range of key performance indicators (KPIs) from nationally recognised measures of quality or harm such as pressure ulcers and falls, to more locally agreed indicators such as clinical activity or the proportion of staff taking up clinical supervision. A monthly KPI report is reviewed by the Quality Assurance Group and reported to the Board of Trustees through the Clinical and Academic Governance Committee. We submit safety data to Hospice UK's benchmarking programme and have regular meetings with the newly formed Leeds Integrated Care Board (ICB) to review citywide hospice services.

Leadership and Governance

The Board of Trustees provides strategic, financial and governance oversight, ensuring that the Hospice remains focused on delivering its core purpose and vision. The Board has three committees: Clinical and Academic Governance; Finance and Business; and Corporate Governance.

The Hospice has a well-established and mature Hospice Leadership Team (HLT), leading on strategy development and overseeing the quality and sustainability of clinical and support services. The HLT is supported by skilled and experienced Heads of Department (HODs) who closely manage day-to-day service provision.

St Gemma's has an agreed vision and 10-year strategy. We recently completed a review of the strategy to establish our priorities for the next two years, with a focused evaluation of our IPU and Community clinical services. Our vision and strategy are supported by a 5-year financial plan, a business plan which will run across two years and annual budget-setting.

Hospice leaders strive for a positive organisational culture, focusing on the needs of patients and families and promoting equality and diversity. Staff and volunteer engagement and wellbeing are key priorities for St Gemma's, as well as offering staff opportunities for education and career development.

St Gemma's promotes an open culture of reporting, recognising that patient safety is everyone's business. 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.

Good governance is a high priority. Hospice risks are identified, monitored and actively managed including those relating to data security. KPIs support our understanding of the quality of care, and lessons from incidents, near misses and complaints are shared to improve practice.

The HLT and HODs work closely with other health and care services in the city including NHS providers, care homes and GPs to improve integration and coordination of care. We also engage at a regional and national level to respond to the challenges we face collectively in providing excellent palliative and end of life care.



Clinical Incidents

All events that cause actual or potential harm or risk to patients, known as clinical incidents, are documented via an electronic database (Vantage). All clinical incidents are reviewed monthly by service leads to identify patterns and to draw out any learning. Incidents are rated by the level of actual or potential harm/risk and any rated as moderate or severe are investigated and presented through the Quality Assurance group. Learning is cascaded within each clinical service to ensure staff receive information that is relevant and actionable for them.

	2020 /21	2021 /22	2022 /23
Notifiable Patient Safety Incidents	3	2	2
Medicines Incidents	76	102	156
Medicines Incidents - Moderate+ Harm	2	2	5
Falls	47	72	39
Falls - Moderate+ Harm	2	1	2
Inherited Pressure Ulcers	176	138	218
New Pressure Ulcers	98	88	140
New Pressure Ulcers - Moderate+ Harm	45	34	56
Overall Incidents	499	445	614

The overall number of incidents in 2022/23 is higher than previous years, mainly due to the higher bed utilisation over the last year, a significant rise in the number of inherited pressure ulcers and the continuing trend towards improved reporting of incidents. Analysis of the overall data shows high rates of reporting of No and Low Harm incidents and an increase in incident reporting from Community Services.

Key Findings

Notifiable Patient Safety Incidents - the Hospice reported only two notifiable patient safety incidents in 2021/22. Both patients were found collapsed on the floor, in their rooms, unresponsive and with no signs of life. In both cases, the patients had been seen by staff a short time before the collapse.

The investigations identified that the patients had most likely collapsed, rather than fallen, and were at high risk of a sudden death due to their underlying condition. The cases were discussed with the Coroner's office with no further actions to be taken.

The families involved were kept fully informed throughout our investigations in line with Duty of Candour processes and the Care Quality Commission (CQC), the Board of Trustees and the Leeds ICB were notified as necessary.

Medicines – a further rise was seen in medication errors in the last year. As in previous years there are no worrying trends or specific drugs related to this rise and most continue to be documentation errors. This will form a key area of focus during the introduction of the Patient Safety Incident Response Framework (PSIRF). Four of the five moderate harm incidents related to prescribing and/or administration of drugs by other community providers. The errors were identified by our Clinical Nurse Specialists and shared with the relevant clinical teams.

Falls – patient falls have significantly decreased in the last year despite increased In-Patient activity. Patients at risk of falls are highlighted at ward handover meetings and at daily safety huddles, and additional supervision (including one-to-one supervision) is put in place as required. This reduction in falls may be related to the relaxation of COVID-19 visiting restrictions meaning that families are present more often. Falls are routinely discussed by the Hospice Falls Interest Group and recommendations shared through the Learning Bulletin.

Pressure Ulcers (PUs) – recording of PUs has increased significantly over the last year. There has been a substantial rise in the number and severity of pressure damage at the point of admission. The Head of In-Patient Care is working with acute and community providers to agree the best way to share this information. We hope that recent work on a city-wide pressure ulcer care plan will help to reduce this in the future. There has also been an increase in reporting for lower-level skin damage, which can support better overall prevention of deterioration. All Category 3 and above PUs are reported to the CQC and any acquired in the Hospice are investigated. The Hospice clinical leads for PUs provide regular education, which has increased the confidence of staff to identify and report pressure damage.

Other Incidents – other incidents reported in 2022/23 include a small number of Safeguarding and Deprivation of Liberty Safeguards notifications, equipment failure, accidents, information governance incidents and concerns about staff safety.

Infection Prevention & Control (IPC)

The Head of In-Patient Care is the designated lead at St Gemma's for IPC and has worked closely with clinical and estates teams to introduce new national IPC standards. These are now fully established in the clinical areas of the Hospice, with non-clinical areas planned for 2023/24. St Gemma's has engaged with the IPC leads in Leeds Community Healthcare NHS Trust and has shared the work on the national standards at the Hospice UK conference.

The management of the pandemic over the last three years provided an excellent opportunity to revise and update all IPC processes in the Hospice. The senior team continued to meet regularly throughout 2022/23 to review guidance as restrictions relaxed, which has meant returning to open visiting for families, removal of face mask use across the Hospice, including in patient interactions, and a return to face-to-face meetings and education. We have implemented an inclusive approach to these changes to ensure that anyone in the Hospice feels safe to continue to wear a mask if preferred, and to promote good general IPC measures.

Staffing

In 2021/22 the Hospice had to reduce IPU capacity to 15 beds due to nurse staffing. A recruitment project was started, engaging teams from across the Hospice in a broad campaign. In 2022/23 we successfully recruited 12 Registered Nurses and Nursing Associates onto the IPU, achieving full establishment for the first time in over four years. This has enabled the Hospice to return to the use of 20 beds across the two wards, with the ability to admit additional patients where there is a high level of need or distress.

Good staffing levels have been maintained across all the other clinical services – community nursing, medical, family support and therapies – throughout the year. Increased numbers of spiritual care volunteers has meant better day-to-day support for clinical services.

Audit

Monthly patient safety and environmental audits are completed by the senior nursing, therapy and facilities teams to monitor essential standards. In 2022/23, these have consistently shown high standards of cleaning, personalisation of care plans and essential safety checks such as fridge temperatures and resuscitation equipment. These audits were reviewed during the implementation of the IPC standards to reduce unnecessary duplication.

Wider clinical audits are overseen through the Evidence Based Practice Group, outlined in the section on the Academic Unit of Palliative Care.



Personalisation
of Care

An important aspect of St Gemma’s care is sensitive, skilled discussion with individuals about their preferences for the type of care they would wish to receive and where they wish to be cared for.

This process of Advance Care Planning is threaded through all discussions with patients, whether at home or in the Hospice. The use of a shared record across primary care, community services and the two Leeds hospices using SystmOne enables an individual’s preferences about their wishes for the future to be updated and accessible to all appropriate staff.



The proportion of patients who achieved their preferred place of care and death in 2022/23 is consistent with previous years. Those who are unable to achieve their preferred place of death in the Hospice or in community are usually those who experience a crisis or sudden deterioration at the end of life or those who are reluctant to engage in planning discussions.

Indicator	Location	2020/21	2021/22	2022/23
Number of patients achieving preferred place of death (where preferred place recorded)	IPU	85%	77%	82%
	Community	82%	81%	80%
Number of patients with a personalised care plan for care of the dying	IPU	80%	82%	89%

Engaging with family and friends is an important aspect of our approach to person-centred care. We pride ourselves on going the extra mile, with many examples of little acts that have made a huge difference to patients. In 2022/23 we were able to celebrate a marriage and arrange a number of birthday and anniversary celebrations. Supported by donors, we established a hardship fund to pay for taxis and other items to support those families in most need.

Accessibility

St Gemma's founding values are based on providing palliative and end of life care for all people, regardless of ethnicity, gender, age, sexual orientation, disability, faith or ability to pay. Our teams work hard to ensure services are accessible to all people who require specialist palliative care and provide admission to the IPU for people approaching the end of life who wish to die in St Gemma's.

People are referred to Hospice services by GPs, as well as generalist and specialist teams across Leeds. In 2022/23 we continued to increase the proportion of patients within our services living with non-cancer diagnoses. In 2022/23, these accounted for 34% of all referrals. Much of this success is down to focused work across Leeds to create speciality-specific MDT meetings, to enhance referrals and provide clinical advice. Alongside our established MDTs for Respiratory Conditions, Heart Failure, Motor Neurone Disease and Parkinson's Disease, in the last year we have introduced a new Liver/Alcohol MDT as part of the Inclusion Service.

The Inclusion Service, set up to support homeless or vulnerably-housed people in Leeds, secured additional funding in 2022/23 to establish a substantive service for the city, and expand the workforce. The team works across Leeds with homeless services and temporary accommodation providers. The activity in the service expanded significantly across the year and, with the additional resource, the team has been able to set up education about palliative care for non-healthcare staff who work with this vulnerable group.

Admission to In-Patient beds in the Hospice is available 24 hours a day, coordinated through our daily referrals meeting with Leeds Teaching Hospitals NHS Trust (LTHT). Capacity and demand are monitored through this process to ensure our services are responsive to need, and in 2022/23 most patients (81%) were admitted for care within one day of referral.

The Emergency Care pathway enables patients to be directly admitted to the Hospice from the Hospital Emergency Departments in Leeds across the out of hours period, which in turn avoids unnecessary and inappropriate hospital admissions. In 2022/23, the Hospice also agreed expanded admission planning criteria to support discharge and capacity at LTHT during the key winter months for those requiring palliative or end of life care.

As part of the work done through our internal Involve Group, we report the ethnicity of our patient population, benchmarked against our catchment area. We are proud that this data shows that St Gemma's cares for a more diverse group of patients than is recorded for the catchment area. At St Gemma's our patient population was recorded as 67% white British and 33% all other ethnicities, in contrast to the catchment area population of 77% and 23% respectively.

We recognise that not all those who would benefit from our care are currently being identified or offered the opportunity to access St Gemma's services, and that many parts of our community experience significant inequity in healthcare services. As part of the strategic review of clinical services, our teams identified the need for further work addressing these inequalities, which will begin during 2023/24. We also work closely with the Leeds Palliative Care Network (LPCN) and other partners across Leeds to monitor population change and look for further opportunities to meet the needs of the Leeds population.



Complaints

The Hospice responds rapidly to any clinical complaints or potential complaints, taking any concerns about the quality of patient and family care seriously. We aim to meet with anyone who raises concerns to fully understand these; often this means that concerns or comments are addressed in the moment, and do not escalate to formal complaints. Where complaints are received, they are fully investigated, and the implementation of recommendations is overseen by the Clinical and Academic Governance Committee. We always aim to learn from complaints and recognise that they form only a minority of the feedback we receive.

In 2022 the Hospice received one clinical complaint, relating to the experience of a nursing student on placement in the IPU. The student raised concerns through the Leeds Beckett University about Hospice culture and our ability to make reasonable adjustments. An investigation by the Head of Learning and Teaching, in collaboration with the student's personal tutor, identified no grounds for the complaint and no further action was required from St Gemma's.

The Hospice received a number of comments during the year which did not become formal complaints. There was no overarching theme in these concerns, but each one was considered by the relevant Head of Service to identify improvements in care or learning to be shared with their teams.



Service Development

Out-Patient Services

Our Out-Patient Services have evolved through the pandemic, adapting not only to the restrictions but also to the changing needs of patients and their families. We consulted with patients, carers and other external stakeholders regularly during this period to ensure that services we were offering were meeting their requirements.

We re-introduced face-to-face group activities in March 2022, with an initial evaluation in December 2022. The Out-Patient offer provides a range of activities and services for patients to engage with, aiming to improve wellbeing and provide psychological support for service users. Our groups include a Gardening Group, Carers' Group, Creative Arts, Men's Shed and a number of symptom management groups for symptoms such as breathlessness and fatigue. We have seen a gradual increase in engagement across the year and will continue to monitor activity and develop the service for further evaluation in 2023/24.



Bereavement Services

With the relaxation of pandemic restrictions the Hospice has been able to review the bereavement services. This year we have focused on increasing accessibility and choice in the bereavement offer, at the same time as increasing the number and diversity of volunteers and students. The service now provides evening appointments for those who cannot attend during standard service hours.

We have also restarted our Bereavement Café, held every two weeks, where people affected by bereavement can meet others in a similar situation. The bereavement team continues to provide training on bereavement and loss to Hospice staff, and in 2022/23 started a new programme called Growing Around Grief, a focused programme which is available to anyone bereaved in Leeds.

We are aware of the importance of our young people's service to many families in Leeds which provides support at a traumatic and critical time in the lives of children and young people. This year, with external funding and donations, we were able to begin the construction of a purpose-built cabin in our gardens. Due to be completed in the summer of 2023, the cabin has been designed with those we support, to give an accessible and interactive area for therapeutic play, counselling and reflection.



Abbie's mum and dad were both cared for by St Gemma's and they sadly died within three years of each other. Abbie was a teenager at the time and was supported by the team for several years afterwards. She really valued the bereavement service and told us:

“ St Gemma's gave the most exceptional care to my parents throughout their illnesses and in their final days, something I will be forever grateful for.

The Hospice was the constant that helped to provide a sense of comfort within the hardest of circumstances. They helped me come to terms with my future without my Mum and Dad. I attended group sessions, went on trips and weekends away. These sessions allowed us to have some fun and be around other young people going through similar situations. I really believe the support I received had a positive impact on me and equipped me to deal with the challenges that would lie ahead.

Without that support from them, and other people around me, I would not be where I am today. The new cabin looks amazing and it will make a massive difference to the children who use it. I'm delighted to support the Hospice so they can continue caring for people like me and my parents. In April I'll be running the London Marathon to raise funds.

”

Academic Unit of Palliative Care

The Academic Unit of Palliative Care (AUPC) consists of three areas: Research; Learning and Teaching; and Evidence into Practice. The AUPC has continued to grow and develop over the last year and has consolidated its position as a leading centre nationally for research and education in palliative care. The AUPC strives to provide the highest quality education, deliver quality research and make sure this has an impact for patients and their families wherever they are cared for.



• UNIVERSITY TEACHING HOSPICE •

In 2022 we celebrated the 10-year anniversary of the AUPC, to acknowledge St Gemma's long-standing commitment to teaching and research in collaboration with the University of Leeds. Across the year we celebrated the important work of the Academic Unit and worked with the University of Leeds on our strategic plans

Research

The research team, based at the University of Leeds, continues to thrive, creating a strong leadership team with four new strategic senior appointments in the last year – a Professor of Palliative Care and three Associate Professors of Palliative Care. The 15-strong team leads a £4 million portfolio of research that aims to improve the assessment and management of pain, increase access to palliative care, improve identification and management of symptoms towards the end of life and reduce inequalities in palliative care delivery locally and globally. In 2022/23 the team published over 50 papers in peer-reviewed journals.

Education

Over the last few years, the AUPC has seen an increase in demand for training in palliative and end of life care, particularly in areas of Communication Skills, Advance Care Planning and Bereavement and Loss. Our well-established online learning platform has enabled us to expand our offer, reaching more health and social care services and geographic locations, which ultimately increases our impact.

New education programmes and projects, commissioned by a range of providers, have been delivered in 2022/23, including a regional Advance Care Planning training toolkit and a Personalised Care Programme for care coordinators, health coaches and social prescribing link workers based in Primary Care.

We continue to take a range of health care students on placement and have introduced a placement for trainee and newly qualified paramedics. All students have a comprehensive induction and the feedback from students about their placements is outstanding.

4th Year Medical Students	35
Medical Elective Placements	21
Pre-Reg. Nursing Students	33
Elective Nursing Placements	7
Nursing Associates Students	5
District Nursing Apprentices	5
Paramedic Science Students	9
Newly Qualified Paramedics Elective	6
Bereavement Counselling	4
Pre-Reg. Therapy Students	3

“St Gemma's is amazing, everyone was incredibly welcoming and flexible to whatever we wanted to learn.
(4th year medical student feedback)”



Evidence Based Practice

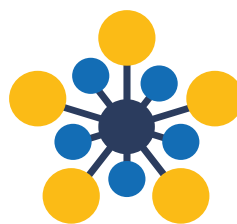
The Evidence Based Practice group promotes a culture of effective decision-making, based on the best available evidence and clinical debate. The group has overseen a broad range of clinical and national audits this year and updated clinical guidance against emerging evidence. These include audits of Falls, Delirium, Non-Medical Prescribing, as well as the National Ethnicity Audit, and Mouthcare and Hyperkalaemia guidelines. Each audit generates a report highlighting good practice, future learning needs and recommendations.

In 2022/23 Practice Enquiry sessions and our community Journal Club were held monthly to encourage staff from within St Gemma's to scrutinise evidence, share knowledge and continually challenge practice. We also introduced a bi-monthly Book Club for all Hospice staff, with each book chosen to explore topics of relevance to the Hospice, such as bereavement, family dynamics and emotional wellbeing, to prompt reflection and fresh insights.



The Leeds Palliative Care Network

The Leeds Palliative Care Network (LPCN) is hosted by St Gemma's Hospice. As a collaborative partnership group, the LPCN is committed to the highest quality, 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 transcends traditional boundaries to bring about system-wide change.



Leeds Palliative Care Network

During 2022/23 the LPCN, along with all its partners, adapted to the changing governance infrastructure as the West Yorkshire Integrated Care Board (ICB) came into effect.

The Chair of the LPCN is a key member of the Leeds Population Health Board (PHB), enabling the LPCN to provide insight and to inform and influence strategic planning and decision-making for the future.

The LPCN's website www.leedspalliativecare.org.uk continues to be a forum for sharing guidance, new service responses and materials for virtual training with all partners across the system. New information to support patients, carers and those close to them has been added.

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

- ♥ Development of a Timely Recognition Tool for GP surgeries to help identify people approaching the end of life in Leeds
- ♥ Completion of the Leeds Bereaved Carers Survey with support from Healthwatch Leeds; follow up on actions from the 2021/22 survey results
- ♥ Establishment of a new Evidence into Practice Group to oversee practice guidance and consider recommendations from audit and research findings, including the update of two patient information leaflets
- ♥ Audit of issues regarding access to medicines in the community out of hours to support the review across the West Yorkshire Integrated Care Board
- ♥ Continuation of improvements in access to comprehensive data to better inform future service delivery and commissioning, ensuring the inclusion of relevant hospital and hospice data
- ♥ Delivery of Planning Ahead training to clinicians across the city to improve Advance Care Planning, the use of ReSPECT plans and coordination of care.

A significant project led by the LPCN as part of its longer-term strategy is Dying Well in the Community, the aim of which is to adopt a whole systems approach to supporting patients at the end of life. The first discovery phase of the work resulted in a report published by Leeds Beckett University in November 2022, with recommendations on next steps: <https://leedspalliativecare.org.uk/wp-content/uploads/2022/12/Leeds-Dying-Well-in-the-Community-Report-FINAL.pdf>.

The second phase is work within Seacroft Local Care Partnership (LCP) to consider how to better integrate and improve patient care. This includes consulting with local people and active engagement from the third sector organisations. Morley LCP has also agreed to start a similar project next year.

Another element of this project is to evaluate the need and opportunity for a Single Point of Contact for Palliative and End of Life Care in Leeds. A scoping document was produced in January 2023 for further consideration by all stakeholders.

Experience of the Hospice

Involve

The Hospice Involve Group was established to bring together and review all areas of engagement with St Gemma's Hospice, including patients, staff and the public, with the aim of obtaining feedback to inform future developments.

The scope of Involve is wide ranging, focusing on six key themes: workforce, experience, community engagement, governance, accessibility and communications. Involve reports to the Board through the designated Equality, Diversity and Inclusion Champion at Corporate Governance Committee.

In 2022/23 the Hospice:

- Established a substantive citywide Inclusion Service based on the pilot Homelessness project, funded by the Integrated Care Board
- Completed a review of Hospice toilet facilities in relation to accessibility
- Participated in the Pride parade in Leeds
- Established regular events and displays to celebrate different religious festivals
- Gave staff the opportunity to add their pronouns to their email signatures.

The Multicultural Network continues to meet regularly and have hosted a number of cultural and religious celebrations. In 2022/23 St Gemma's staff also established a forum to expand support and awareness for LGBTQ+ communities. These networks create safe spaces to share experiences, learn from one another and influence Hospice practice.

The Hospice was pleased to have been included again in the Inclusive Companies Top 50, ranking 31st in our 2022/23 submission. This is an improved ranking and reflects the continuing work the Hospice has prioritised to improve access and inclusivity.



Patient and Family Experience

During 2022/23 the Hospice continued to have a robust programme of engagement with the patients and families who use our services. Patient and family feedback is extremely important. We use the information to assure quality, and to improve and transform our services. It also enables us to recognise and celebrate outstanding care.

The governance and reporting mechanism for all feedback is overseen by the Director of Transformation and Culture. Feedback is shared with relevant Heads of Department. Detailed quarterly reports are presented to the Hospice Involve Group and the Clinical and Academic Governance Committee.

Citywide, the Hospice sits on the patient experience workstream 'How Does It Feel for Me?' led by Healthwatch Leeds. Healthwatch also support the annual city-wide Bereaved Carers Survey, run in partnership with all key providers of palliative and end of life care.

Bereaved Carers Survey

Throughout the year we conducted a bereaved carers survey for families of patients who died on the In-Patient Unit (IPU). The same survey is conducted annually through the Leeds Palliative Care Network, across the city for a more limited period (February - April 2023).

This year St Gemma's received the following feedback from 91 responses:

100%

felt that their relative died in the right place.

98%

were satisfied with the pain relief provided.

100%

were satisfied with the management of other symptoms.

99%

were satisfied that their relative was cared for with dignity.

“

The service and care are wonderful. I personally don't think you can improve on perfection. My first husband passed away on the Dales ward 18 years ago and when asked if I would like end of life care for my husband in a hospice, St Gemma's was my choice. Every member of staff no matter what their job are so kind and caring. St Gemma's is a wonderful calm and serene place to be.

”



“

The exceptional care was always extended to family members whenever we visited.

”

“

Excellent individual care and attention to patient and family. Excellent room and surroundings. Dedication of staff. Time and patience shown to family.

”

“

The care given to my mother was excellent. She was well cared for. The staff are very caring and have time to stop and talk to you when you need them. Everything was explained, I see no need for improvement.

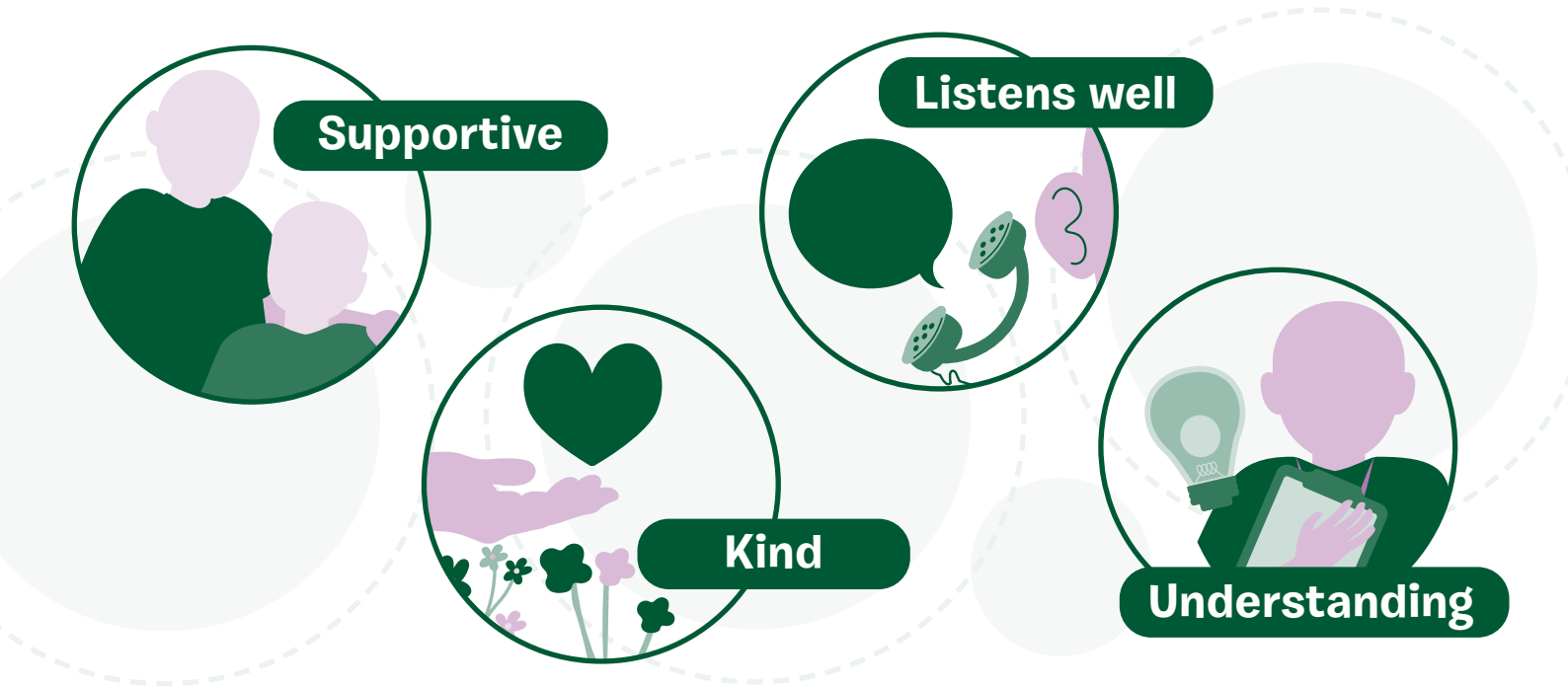
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Service Specific Feedback

Regular experience surveys are conducted for all clinical and bereavement services. In July-September 2022 the Hospice introduced new surveys for both adult and young people's bereavement services at point of discharge.



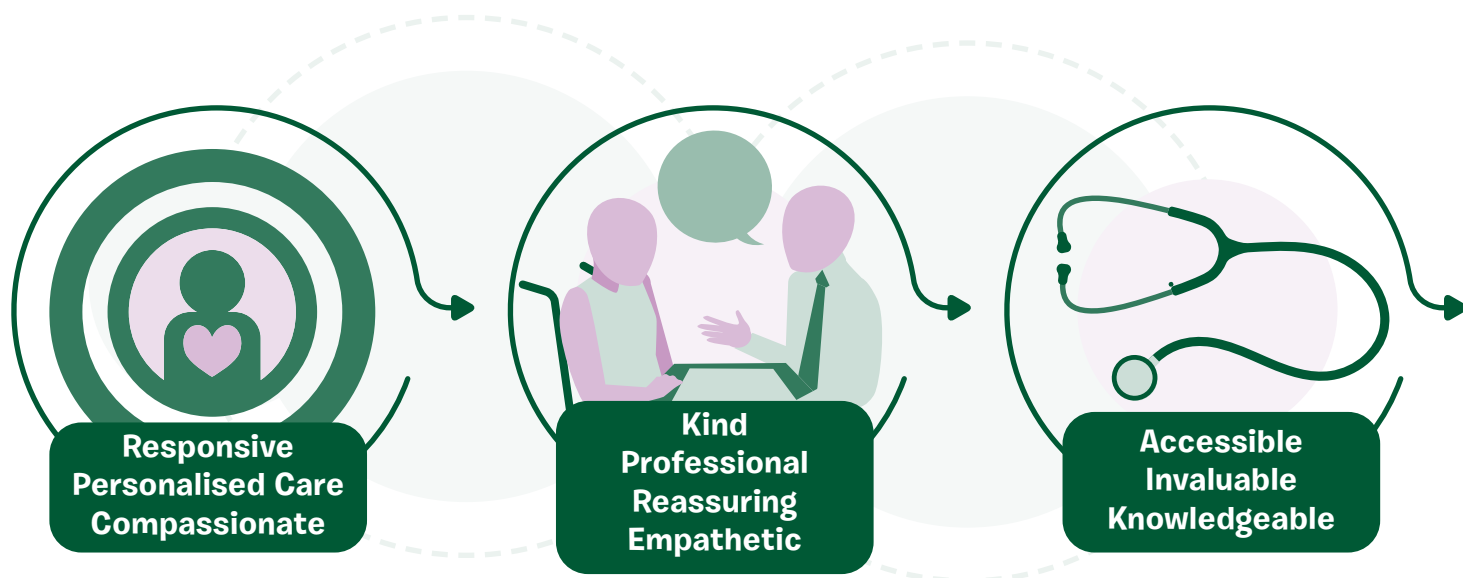
The feedback received acknowledges that both services are highly valued by those receiving bereavement counselling. These are the key feedback themes:



This year, the Community Specialist Nursing Service received 71 survey responses, with the following results:



The Community Specialist Nursing Service is highly valued by those patients and families receiving specialist palliative and end of life care. The feedback received demonstrates repeatedly acknowledged themes:



Patient & Family Improvement Feedback Register

During 2022/23 we captured nine improvement comments:

- Two comments highlighted dissatisfaction with the nurse call system. One related to access to the call button and the second to response time. Both comments were fed back to relevant teams for reflection and information about the use of call button extensions and expected response times were reiterated. No further concerns have been raised.
- Other comments related to care at the end of life, including sharing patient information with a visiting family member who was not the next of kin and the timing of the removal of a deceased relative's belongings. These were both shared with the team and the Care after Death Improvement Group for reflection. A further comment related to a member of the Maintenance team entering a room without knocking which had been unintended and due to miscommunication across the ward team.
- There were two symptom management comments, one relating to the administration of analgesia and the other relating to someone with uncontrolled symptoms in a community setting. Both comments were investigated, with no further action required.
- One comment related to the temperature of a meal delivered to a patient on the In-Patient Unit. This prompted an update on food delivery training, focusing on food temperature and probing checks.
- The final comment concerned consistency in visiting during COVID-19 restrictions. This was fully investigated and had been at a point of change in government guidance.

Although feedback is usually anonymous, where we can we engage with families who have identified areas of improvement. We continue to use the service improvement register to capture feedback which allows us to identify and respond to any emerging and recurring themes.

The Hospice strives to engage with patients and families to understand their experience and continuously looks for new ways to encourage their involvement in service development and transformation.



Staff & Volunteer Experience

Employee Engagement & Staff Wellbeing

The Hospice Engage Group allows employees across the organisation to contribute to, and improve, staff engagement and Hospice culture. The group continues to play a key role in developing the staff wellbeing offer and supporting the organisation of events.

Throughout 2022/23 staff wellbeing continued to be a priority. We embedded Wellbeing Champions across the workforce structure to design and drive a programme to support staff with their mental and physical wellbeing.

Some of the key elements of the programme were to:

- ♥ Work in partnership with external experts 'We Are Wellbeing'
- ♥ Prioritise improvements in workforce support and supervision
- ♥ Hold several workforce wellbeing events, with activities ranging from mindfulness and yoga to salsa dancing and pizza, all of which were really well received by staff

Based on staff feedback and their own research, the team has now designed a more comprehensive and extended programme for 2023/24, including quarterly updates and evaluations, and a focused wellbeing week in October 2023.

The "Gem of St Gemma's" quarterly awards and an annual Staff Awards Evening were introduced in 2022. These initiatives provide staff with the opportunity to nominate their colleagues in recognition of exceptional contribution and demonstration of Hospice values and behaviours.



Dr Bhajneek Grewal recently reached the end of her year-long rotation at the Hospice and shared some of the things that make St Gemma's such a positive and empowering place to work.

“St Gemma's restores your faith in human care and kindness. I come into work every day trusting implicitly that the team around me are going to do their absolute best on any given day. How many people can say that about the place they work?”

Staff Survey

We again participated in The Sunday Times Best Companies Survey in 2022. The Hospice was ranked as a two star organisation and 16th in the Times Top 100 Best Charity Organisations to Work for.

Feedback from the survey demonstrates that staff view the Hospice as a supportive environment, providing outstanding care provision with a highly skilled team. Staff highlighted that the Hospice has a culture of strong teamwork, and that the organisation is proactive and champions workplace wellbeing.

Some areas for improvement were identified through this engagement. We have addressed these through a pay increase and improved maternity/paternity benefits. Comments regarding opportunities for progression and development have been addressed through new posts within Community Nursing and a new training programme for managers.



Volunteers

We greatly value our volunteer workforce as an integral part of the Hospice and currently have 878 registered volunteers supporting all services. During 2022/23 we were delighted to be able to welcome many of our volunteers back after the pandemic.

The 2021 to 2024 Volunteer Plan has driven work to ensure the foundations of our volunteering service are robust. It also recognises the need to transform, drive consistency and efficiency with the ambition to be a centre of excellence for volunteering.

This year we have successfully introduced improvements in how departments identify volunteering opportunities and consider new roles to support service delivery. Improvements have also been made in volunteer data management. We have surveyed volunteers to understand their reasons for volunteering at the Hospice, what works well and what could be improved. From this we plan to create a volunteer forum to help develop our future volunteer workforce.



Community Engagement

St Gemma's community engagement takes many forms, some of which have already been referenced in this Quality Account.

We are active members of the Leeds Palliative Care Network, whose strategy is built on feedback received from hearing people's voices, both locally and nationally. We work across the city in forums such as the Partnership Executive Group, Clinical Senate and the West Yorkshire Hospices Collaborative to better understand the changing demographics of the population and identify any gaps in service provision or engagement.

We are members of the Healthwatch Leeds 'How Does it Feel For Me' project, following people's real experiences through the health and care system, and learning from them.

We are members of the Leeds End of Life Population Health Board, and have taken part in public engagement workshops led by the Leeds Health & Care Partnership.

We proactively seek feedback from patients and families about their experience of our services and about their outcomes. The reshaping of our Out-Patient offer in 2022/23 was informed by listening to patients, families and carers about what matters to them and how our services should be shaped; this resulted in an entirely new Out-Patient service offer. We learn from complaints and comments made about our services.

We work as an integral part of the Dying Well in Seacroft project, with input from local people and from health and care providers, seeking to understand how to improve care in a particular geographic location with high levels of deprivation, with an aim to utilise any resulting improvements more widely.



Our Inclusion project, improving care for homeless and vulnerably-housed people at the end of life, is entirely dependent on hearing the voices of this group of people, and, with others, building care around their needs.

We proactively seek to hear the views of our staff and volunteers about what matters to them and how we can improve their working lives, which in turn will improve patient and family care.

The Hospice's Involve Group meets regularly, tasked with keeping diversity, inclusivity, accessibility and community engagement high on our agenda. We have a Board Diversity Champion and recently completed a Board training session on Equality, Diversity and Inclusion led by a Professor from the University of Leeds.

Work continues reaching out into the community to ensure that as many people as possible are aware of St Gemma's Hospice, our range of services, how they can be accessed and our need for funds. We engage with a wide range of audiences across multiple channels.

Traditional methods of marketing such as our supporter newsletter, news stories in the local media and advertising in newspapers, magazines and on the radio, help us share our messages widely across Leeds. Our digital channels, such as our website and social media platforms, have increasing numbers of followers and enable us to communicate with these growing audiences quickly and effectively. Patients and their families regularly use our social media channels to share their experiences of the Hospice and thank the team.

Our 24 charity shops are an important part of the Leeds community, each providing a touchpoint to the Hospice across the city.

St Gemma's would not exist without the ongoing support of the ever-changing community. We are always mindful of this and remain proactive in the way we plan and evaluate our services, and communicate and engage with people and groups across the city.



St Gemma's Hospice

@stgemmahospice

Thank you to all who attended the poignant Light Up a Life ceremony yesterday, in person & virtually.

The light our loved ones bring to our lives never goes out & thousands of lights shine brightly in their honour.

A video of the service is available at lightupalife.st-gemma.co.uk



6:01 PM · Dec 12, 2022

Statement from the NHS West Yorkshire Integrated Care Board in Leeds

The Integrated Care Board (ICB) in Leeds would like to thank you for the opportunity to review and comment on your Quality Account and reflect on your achievements for 2022/23 and priorities for 2023/24.

We continue to work in partnership with St Gemma's Hospice and recognise your open, transparent, and engaging approach to delivering care and support for local people with life-limiting and terminal illnesses, including their carers.

Overall, we feel the Quality Account is well laid out, easy to read and aided by using pictures, graphics and testimonials from patients and relatives. The ICB in Leeds feel that you have a well stated vision, purpose, and values.

The ICB in Leeds thought the priority section was clear and well set out, and something we immediately looked for. It's pleasing to read the community bereavement service has been widened to offer support to meet high need in the community such as evening appointments for those who cannot attend during standard service hours.

The ICB notes the positive progress made against the Quality Account priorities for 2022/23. The Quality Account also acknowledges the pilot of a virtual ward resulted in a decision not to adopt this model of care, and that you now intend to pilot a rapid response service for community patients in urgent need of support. We look forward to reading the progress of this pilot in next year's Quality Account.

On page 19, the Quality Account captures that 54 additional medication incidents have occurred compared to 2021/22. The Quality Account reflects there are no trends or specific drugs related to this rise and that most incidents relate to documentation errors. It would have been helpful to understand what the learning and plan is to improve medication documentation going forward.

On the same page there was a noticeable increase in inherited pressure ulcers. It was pleasing to read the head of in-patient care is working with acute and community providers to agree the best way to share this information. If any collaborative pieces of work have been undertaken to reduce inherited pressure ulcers, it would have been good to celebrate it in this section.

The ICB congratulates St Gemma's Hospice on its staff recruitment to the inpatient unit. This was positive reading given the ongoing challenges of recruitment into the health and social care system.

The Quality Account has correctly captured the adoption of the Patient Safety Incident Response Framework (PSIRF) as a priority for 2023/24. The summary within the Quality Account identifies two key targets that we agree with:

♥ **Completing a review of the statutory and sector requirements for implementation; and**

♥ **Generating a patient safety plan, including recommendations for training**

Another priority identified within the Quality Account is Improving the Safety Huddle – Patient Safety. Again, the ICB look forward to reviewing the progress made in adopting a different style of safety huddle in the multi-disciplinary team meeting in next year's Quality Account.

It was useful to have sight of the Leeds Palliative Care Network (LPCN) update within the Quality Account. We can see the progress on delivery of a number of projects by that network. The LPCN chair is an active member of the End-of-Life Population Board for Leeds. We particularly look forward to updates from the Dying Well in the Community project as it considers a whole systems approach on how to better integrate and improve patient care at the end of life.

Once again, we would like to thank you for sharing the document and providing an opportunity to comment on your Quality Account and priorities for 2023/24. We look forward to continuing to work in partnership over the coming year.

Statement from Healthwatch Leeds

Thank you for this opportunity to comment on your Quality Account.

The account is presented well, easy to follow and highlights the excellent work St Gemma's has done over the last year.

We've continued to work closely with St Gemma's, and they have been committed partners of the 'How Does it Feel for Me?' project, a series of videos and reports which follow peoples real time experiences of health and care services in Leeds.

As mentioned in the Account, we have been involved in the Bereaved Carers Survey, alongside the Leeds Palliative Care Network, to find out about relatives/carers experiences of their loved one's care. It was great to see that St Gemma's have again achieved extremely high satisfaction rates and positive comments about the excellent care the staff provide. It is evident that, if there is ever a complaint about the services, responses and actions have always happened quickly and highlight a dedication to learning and improving.

It is also positive to see how St Gemma's recognises the importance of directly hearing from local people as well as health and care partners. We are particularly glad to see that each Board begins with a patient story and that feedback from service users inform quality improvement initiatives. We believe that St Gemma's is the shining light of person centred care in Leeds.

St Gemma's commitment to inclusivity and accessibility is impressive, as seen by your dedication to helping the homeless and vulnerably housed, the new liver/alcohol Multi-Disciplinary Team and being ranked 31st in the Inclusive Top 50 UK Employers List.

Many thanks again for the opportunity to comment on this Quality Account, it has been another great year for St Gemma's and we look forward to continuing our work with you throughout the year.





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 Recommended Summary Plan for Emergency Care Treatment

This process creates personalised recommendations for a person's clinical care and treatment in a future emergency in which they are unable to make or express choices. Although the process can be for anyone, it has increasing relevance for people who have complex health needs or who are likely to be nearing the end of their lives.



**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

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