

Quality Account

Reporting period April 2017 to March 2018



**Future Farleigh:
Engaging with our Community**

Farleigh Hospice exists to meet the needs of local people affected by life-limiting illnesses and to support those who have been bereaved. Through the ongoing generosity of the mid Essex community we provide a range of high quality services totally free of charge. By giving people choice and involvement in the care they receive, we strive to make a real difference when and where it matters the most.

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Part 1: Introduction

Introduction by Chief Executive



Welcome to our seventh Quality Account. This report is for our patients, their families and friends, our supporters, the general public and Mid Essex Clinical Commissioning Group, who part fund our services. The aim of this report is to give clear information about the quality of our services. We want patients to feel safe and well cared for and their carers and families to feel supported and reassured that all of our services are of a very high standard and well governed throughout the organisation.

In this year we completed a comprehensive consultation programme seeking the views of people who use our services, our key stakeholders and the public on what they would like to see from Farleigh Hospice in the future. We collated the results into themes which were shared for discussion at our Annual General Meeting. The new strategy was approved by our Board in March and launched on 1st April. As an organisation we are excited

by our future direction and we look forward to being able to reach out to more people in our community in different ways and to empower people to help one another where they can. We hope our funders and local communities will be inspired to continue to support us so that we can invest in further growth and development for the future.

In April 2017 we received our CQC inspection report and were delighted to receive a rating of outstanding for care. We also won the Essex Business Contribution to Community Award for 2017. Both of these achievements demonstrate our commitment to delivering high quality care, both in our inpatient unit and in the community.

I wish to thank all of our staff and volunteers for their ongoing hard work and commitment to Farleigh Hospice and to our local community and NHS funders for their continuing support.

This Quality Account follows the model requirement set out in the regulations by the Department of Health. To the best of my knowledge, the information reported in this Quality Account is accurate and a fair representation of the quality of healthcare provided by Farleigh Hospice.



Alison Stevens RN, DipHSM, MA
Chief Executive

For any queries, comments, or any further information, please email us at comments@farleighhospice.org

Board of Trustees

Commitment to Quality

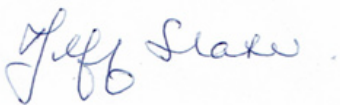
Statement in Respect of the Quality Account

The Trustees are required under the Health Act 2009 to prepare a Quality Account for each financial year as Farleigh Hospice is part funded by the NHS. The Department of Health has issued guidance on the form and content of the annual Quality Account (which incorporates the legal requirements in the Health Act 2009 and the National Health Service (Quality Account) Regulations 2010 (as amended by the National Health Service (Quality Account) Amendment Regulations 2017).

In preparing the Quality Account, the trustees are required to take steps to satisfy themselves that:

- The Quality Account presents a balanced picture of the hospice's performance over the period covered;
- The performance information reported in the Quality Account is reliable and accurate;
- There are proper internal controls over the collection and reporting of the measures of performance included in the Quality Account, and these controls are subject to review to confirm that they are working effectively in practice;
- The data underpinning the measures of performance reported in the Quality Account is robust and reliable, conforms to specified data quality standards and prescribed definitions and is subject to appropriate scrutiny and review; and
- The Quality Account has been prepared in accordance with Department of Health guidance.

The trustees confirm to the best of their knowledge and belief they have complied with the above requirements in preparing the Quality Account.



Jeff Slater, Chair of the Board of Trustees



Alison Stevens, Chief Executive

Our Vision, Our Mission, Our Values



Working Together - Making a Difference

Part 2: Priorities for Improvement and Statements of Assurance from the Board (in regulations)

This quality account mainly considers quality issues within the provision of clinical care and relevant support services necessary to provide this care. It does not fully take into account the fundraising and administrative functions of the organisation.

Future Priorities for Improvement 2018 - 2019

The Board of Trustees is committed to the delivery of high quality care which is safe, effective and meets the needs of people who use our services and to support the continuous development and improvement of these services.

These priorities have been developed through consultation with people who use our services including patients, carers, staff and volunteers.

The priorities we have selected will impact directly on each of the three domains of quality:

- Patient safety
- Clinical effectiveness
- Patient experience

Looking forward Farleigh Hospice confirms that the top five quality improvement priorities for 2018 - 2019 will be:

Future Priority for Improvement 1

Quality Domain (Clinical Effectiveness and Patient Experience)

Communication and engagement campaign, including developing a team of ambassadors, to improve people's understanding of hospice care.

Why was this priority identified?

In 2017 the hospice set up a Strategy group to develop the new hospice strategy for the next 4 years. As part of this preparation the hospice embarked on an engagement campaign 'Future Farleigh - Every Voice Matters,' asking people already connected with Farleigh and the wider public to share their views by answering one question:

'What would you like to see from Farleigh in the Future?'

One of the key themes that emerged from the results was people did not know what hospice care is and how we deliver it in mid Essex.

How will this be achieved?

As part of the new strategy (see Priority for improvement 4) we aim to address this through an extensive public engagement campaign; we will also encourage everyone connected with Farleigh Hospice to be ambassadors for our work, helping people understand what the hospice does. To improve people's understanding of hospice care, we will promote the work of the hospice through VIP events and supporting national initiatives such as Dying Matters Week and Hospice Care week.

How will this be monitored?

The Board and Senior Management team, along with the strategy group will review progress throughout the year. They will look at feedback from events and key performance indicators related to the achievement of the new strategic objectives.

Future Priority for Improvement 2

Quality Domain (Patient Safety, Clinical Effectiveness and Patient Experience)

Enhanced Community Services – increasing and improving hospice care in the community.

Why was this priority identified?

The hospice, working with Mid Essex Hospital Trust (MEHT) and other key providers, identified a number of gaps in service provision for people at the end of life:

- A lack of 24 hour specialist palliative care telephone advice for the public and professionals
- A lack of a rapid response service in the community to support patients who are end of life
- No clearly defined end of life pathways
- Lack of recognition that someone is dying and a lack of the skills necessary to have sensitive conversations
- Delays in the discharge from hospital for patients who are end of life and wish to die in their preferred place of care

The hospice is keen to work with key providers to improve the experience for patients and their families.

How will this be achieved?

Increased resources from Mid Essex Clinical Commissioning Group (CCG) have enabled the hospice to appoint additional staff to support an enhanced community service providing:

- An extended Clinical Advice Line which will be available between the hours of 08:00 - 20:00, seven days a week
- An In-Reach Nurse who would work within MEHT to:
 - Support and educate ward staff in the identification of patients who are end of life
 - Promote open and honest communication around the cessation/withdrawal of treatment to facilitate patient choice
 - Provide advice and support to the clinical teams in order to facilitate options for discharge
 - Support the safe and timely discharge of rapidly deteriorating patients who want to be discharged to the community as their preferred place of care/death

An enhanced Hospice at Home service which will:

- Provide crisis support in the community from 08:00 to 20:00, seven days a week in order to avoid inappropriate hospital admissions and to facilitate patient choice in their preferred place of care/death
- Undertake in-reach into MEHT to facilitate the rapid discharge of patients who are in last days of life and whose preferred place of death is their usual place of residence

In addition to this the hospice will devise new pathways which will allow more timely streamlined discharge from hospital.

How will this be monitored?

The Mid Essex Clinical Commissioning Group (CCG) and the hospice are monitoring the number of discharges achieved, as well as the number of people who achieve their Preferred Place of Death (PPD). Surveys will be issued to patients and professionals who use the service to seek their feedback.

Future Priority for Improvement 3

Quality Domain (Clinical Effectiveness)

New model to deliver hospice education to care homes and the community.

Why was this priority identified?

The Mid Essex Locality Education Group have identified the need for ongoing education on all palliative care and end of life matters for all groups of professionals in the community.

How will this be achieved?

The hospice has signed up to an exciting project called Project ECHO. This is a hub and spoke virtual model which allows several providers simultaneously to connect via video conferencing to the hospice multidisciplinary team (MDT) and receive advice, support and education.

How will this be monitored?

The hospice will monitor the frequency of the interactions, topics covered, and evaluate new learning for the participants. In addition the confidence of staff in caring for people who are end of life will be evaluated.

Future Priority for Improvement 4

Quality Domain (Patient Safety and Patient Experience)

Continued refurbishment of the Inpatient unit to improve facilities for our patients and their families.

Why was this priority identified?

In 2006 the hospice moved into a brand new building in North Court Road, Chelmsford. Over the years some redecoration has taken place on the Inpatient unit but following the refurbishment of two rooms to create family rooms, it was felt that the whole unit was in need of refurbishment. Three further rooms were refurbished in 2017.

How will this be achieved?

The refurbishment of the remaining five bedrooms and the relative's rooms will provide patients, carers and families with a comfortable modernised environment and include new equipment, fixtures, fittings and soft furnishings. Refurbishment will not only enhance the patient and carer experience but also continue to facilitate the delivery of therapeutic care and safe manual handling and infection control procedures. The Hotel Services Manager and Maintenance Manager will coordinate the work of refurbishing rooms while causing as little disruption to patients and families as possible.

How will this be monitored?

Feedback from patients, families and carers will be monitored by the Ward Manager of the Inpatient Unit with regular updates at the Heads of Department meetings.



Room 9, the young adult suite
refurbished 2017

How will progress be monitored for all future priorities for improvements 2018 - 2019?

The Farleigh Hospice Board of Trustees will monitor and report on progress through a variety of methods including:

- Annual General Meeting
- Annual Review, Audited Report and Accounts
- Events such as Open Days, Staff and Volunteers' Events
- Farleigh Hospice Lantern, website, leaflets, PR and social media
- Quality Account
- Clinical and Corporate Governance Committee meetings
- Quality and Audit Activity reports and Patient Surveys
- Updates posted on the Farleigh intranet, in the Little Lantern newsletter, weekly staff updates and meetings
- Trustee Provider visits



Volunteers' thank you evening October 2017

Looking Back: Priorities for improvement from 2017 - 2018

The aim of the Quality Account is to not only look forward by setting future priorities for improvements but to also look back and evidence achievements on the priorities for improvement from the previous year.

In last year's report we set out five priorities for improvements for our services. All the areas identified were specifically selected as they would impact directly on the care patients, carers and the bereaved received either through improving patient safety, clinical effectiveness or the patient's experience.

The quality improvements for the previous year 2017 - 2018 were:

Priority for Improvement 1

Quality Domain (Clinical Effectiveness and Patient Experience)

Improve links with non-cancer specialist services

With the increase in the number of people with non-cancer related conditions being referred, it will be important to improve links with other specialist services.

Farleigh Hospice contributed to the development of 'The Live Well – Die Well' Mid Essex Strategy 2016 - 2020.

'That everyone can live well in their last year of their life and die well, having a dignified death with support available for anyone who needs it.'

This linked well with Farleigh's strategic objective: 'To widen access to Farleigh Services - endeavouring to reach more people affected by life-limiting illness.'

This resulted in an increase in the number of people with non-cancer related conditions being referred to the hospice, this was a total 26.5% of all referrals in 2017 - 2018.

- The hospice improved current partnership links and established new partnerships with other specialist services, providing advice for those with conditions such as Motor Neurone Disease and Dementia. This enabled services to identify models of joint care delivery, share best practice, facilitate reciprocal exchange of learning in end of life care and enabled staff to provide appropriate and coordinated care when needed.
- Clinical Heads of Department monitored referrals to the service to ensure staff were equipped to provide the appropriate care for those referred to the service.
- Closer links were forged with the relevant organisations supporting education and information sharing about best practice in palliative and end of life care and resulted in several new initiatives including:
 - The commencement of a one year pilot post for a Motor Neurone Disease (MND) Coordinator to support patients and families affected by MND. The post is based in Farleigh Hospice and supported by the MND Association.

- Farleigh has worked in partnership with Dementia UK, NHS and Adult Social Care to support the implementation in mid Essex of Admiral Nurses who are specially trained in Dementia Care. A new Admiral Nurse post has been agreed and will be based at the hospice as part of the dementia care programme
- Links developed with local Chronic Obstructive Pulmonary Disease (COPD) groups to work together to support COPD patients
- Submitted a bid to support Heart Failure patients. Not successful but developed useful links with clinicians for non-malignant conditions
- Working as part of Frailty Oversight group, whole system approach to frailty led by Mid Essex Clinical Commissioning Group (CCG)

Priority for Improvement 2

Quality Domain (Patient Safety, Clinical Effectiveness and Patient Experience)

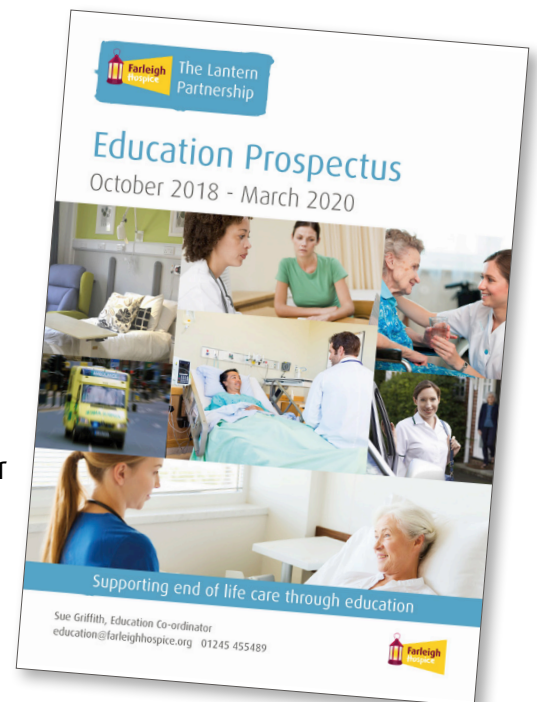
End of Life Education Project

Workshops led by the Die Well Working group identified a lack of education in end of life care across the health & social care sector. This project will aim to address this.

- A series of 'Transforming End of Life' workshops led by the Die Well working group were held during 2015 and 2016 for professionals working in hospitals and the community as well as service users. The evaluations of these workshops identified a number of key challenges in relation to education in End of Life Care including:
 - Lack of knowledge to deliver good end of life care
 - Lack of system wide education for health care professionals including care home staff and carers
 - Lack of awareness of existing resources

The End of Life Education Project aimed to work at addressing these challenges:

- With money secured from Health Education England and in collaboration with Anglia Ruskin University and other providers in the NHS Sustainability and Transformation Plans (STPs), an End of Life Education programme was rolled out. Two phases of workshops were completed, phase one was for medical staff and phase two for other Health Care professionals (train the trainer) as part of the STP wide programme. These focused on care planning at end of life and difficult conversations.
- The Die Well working group, in conjunction with Anglia Ruskin University, monitored the delivery of the workshops.



Priority for Improvement 3

Quality Domain (Clinical Effectiveness and Patient Experience)

New Hospice Outreach Vehicle (HOP)

The current Hospice Outreach Project (HOP) vehicle has been decommissioned and as this outreach project had proved very successful supporting the work of the Information Service it was agreed that a suitable replacement was needed.

- The HOP vehicle was introduced in 2008 and was decommissioned in 2016 due to problems with the vehicle. As part of the Information Service, the Outreach project had been highly successful.
- The aim was to source funding and purchase a suitable replacement vehicle which would be able to be used flexibly across a range of both large and small locations right into the heart of the community.
- The Information Service Team sourced a vehicle based on specified requirements which would be able to offer a flexible range of services.
- The replacement costs for the new vehicle have partly been funded through the sale of the original vehicle along with corporate funding and grants.
- The new HOP has now been ordered and will be available for use in the autumn 2018.
- Healthwatch Essex are interested in linking with the Information Service once the vehicle is in use.

Priority for Improvement 4

Quality Domain (Patient Safety, Clinical Effectiveness, Patient Experience)

Developing a new hospice strategy

The current hospice strategy, 'Your hospice and the next four years 2014 - 2018', ends in March 2018 and therefore we need to develop a new Strategy to give direction to the hospice in future years.

To help plan the new strategic direction for 2018 - 2022 and to take the hospice through the next four years to its 40th birthday in 2022, it was important to engage with a wide range of people across mid Essex.

- Following a Board of Trustees away day in March 2017, the hospice embarked on an engagement campaign which included staff, volunteers, users of our services, organisations we work with and the general public. The objective was to develop a strategic direction which would be both manageable and based on the needs of the population of mid Essex.
- A strategy project group was established in August 2017. Strategy Champions, made up of staff, volunteers and trustees came forward to be involved in supporting events to promote Future Farleigh 'Every Voice Matters' campaign. The engagement campaign ran from August to November 2017, distributing engagement postcards asking one key question:

'What would you like to see from Farleigh in the Future?'

This was also available to complete on the intranet and the Farleigh website.



Future Farleigh Champions 2018

The Future Farleigh champions went out into the community delivering postcards and posters to key locations including GP surgeries and libraries across mid Essex. Our Trustees, Ambassadors, and Farleigh supporter groups worked alongside the champions to ask as many people as possible to have their say on Future Farleigh. They also attended various external events and asked the public for their views.

In October, the Farleigh Community Choir performed in the Amphitheatre outside John Lewis in Chelmsford to further promote the engagement campaign.

Information received from the engagement exercise was collated and analysed. Comments, views and suggestions proved really helpful in identifying themes to help in the process of shaping the new hospice strategic plan. The keys areas highlighted as important were:

- Local accessible services
- How we communicate with our supporters
- Our shops
- To keep doing what we're doing
- Bereavement and family support
- Opening a new day hospice in Maldon



Themes were shared and discussed with staff, volunteers and at the hospice's annual general meeting (AGM). The information was then used to develop strategic goals in November 2017.



Working together to make a difference

As part of this project, the hospice also considered its charitable purpose and how the public benefit from Farleigh services. The hospice's vision and mission were revised to set out what we hope to achieve both as part of the wider hospice movement and to make sure we are clear about what we offer on a day-to-day basis.

Our Vision

A world where hospice care is available to all

Our Mission

Empowering, caring and supporting anyone in our community affected by life-limiting illness or bereavement

The Board of Trustees gave the final agreement in March 2018 with a launch of the new strategic plan in April 2018. This will be followed by a number of events to launch the new strategy within the hospice and also externally to the mid Essex community.

Farleigh Hospice Strategic Plan 2018-2022

Our new strategic goals will take us through the next 4 years to our 40th Birthday in 2022. We aim to grow and help more people in the future. By working together to make a difference, we will reach out, empower, inspire and invest in our local community.



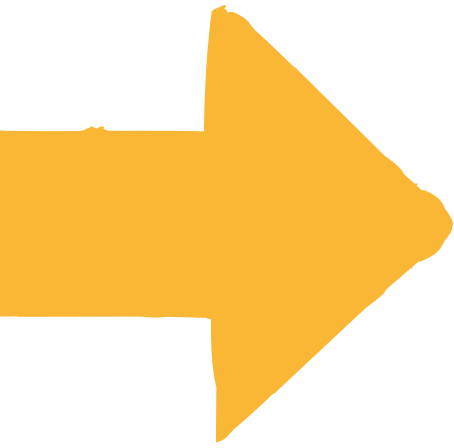
Reach out

- Reach out to provide hospice care for all who need it in our community.
- Reach out and be alongside people who want hospice support.
- Reach out to provide support and advice 24/7.

Empower



- Empower communities to care for those who are affected by life-limiting illness or bereavement through training, education and support.
- Empower people to work collaboratively.
- Empower people by providing accessible information.

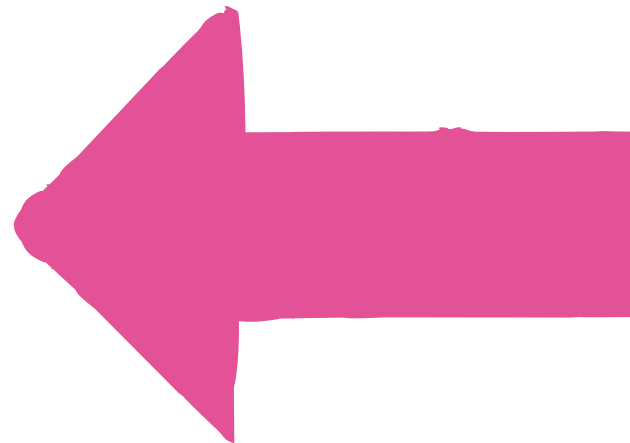


Inspire

- Inspire our communities to support the hospice in any way they can.
- Inspire our funders to continue to support the work of the hospice.
- Inspire our people to be ambassadors for our hospice in everything they do.

Invest

- Invest for growth and development in our hospice.
- Invest in our infrastructure to build organisational resilience.
- Invest in our people to deliver quality services across the organisation.



Priority for Improvement 5

Quality Domain (Staff Development and Care)

Promoting self-development, resilience and self-care across all staff groups. Following comments in the staff survey, actions were proposed to look at improving support and communications across the organisation.

The Moving on Together group (MOTG) was set up in response to comments made in the staff survey in 2015 which identified concerns about communications across the hospice. The group offers an opportunity for managers, staff and volunteers to work together and improve life at the hospice. The group was tasked to review the results of the 2017 staff survey and feedback comments to the Senior Management Team. From this the group decided one of the areas they would focus on was wellbeing and self-care. This followed several strands including personal development opportunities, supervision and mentoring, wellbeing and mindfulness events and service recognition awards.

- Staff Survey results 2017: Overall engagement levels were up by 12%. In addition The MOTG facilitated a series of staff focus groups with a total of 60 people attending to develop ideas for improvement for the year ahead. The overall key messages around communication were 'Plan', 'Talk to us', 'Keep us informed'.

When asked to give three words to describe working at the hospice, staff said:

- Rewarding: people are proud to work for Farleigh
- Challenging: some challenges have been positive and other changes have been made more challenging as a result of poor communication
- Frustrating: a lot of change over the last year, some of which has been communicated better than others, changes to internal communication methods have not suited everyone, goal posts seem to change
- Mindfulness and wellbeing events: Two members of staff successfully completed the Macmillan Mindful Compassion Teacher Training in May 2017 and were then able to offer courses/support to patients, carers, staff and volunteers. There are also weekly and monthly open sessions for staff and volunteers on mindfulness, meditation and prayer.
- Stress Management sessions: During the review period a number of training workshops were organised and run by an external trainer covering Stress, Perfectionism and Boundaries and Self-Management. Each subject had five sessions delivered across three days and it was recommended that people attended all five sessions. These were well attended and feedback was positive about the usefulness of the information and the five strategies covered.
- Service Recognition awards: The awards were launched in 2017 and took place in September as part of the annual staff event. The event included lunch, an opportunity to meet colleagues from across the organisation and afternoon tea to celebrate with those receiving long service awards, which recognised service from five to 30 years at the hospice.
- Staff Christmas social: A mulled wine and mince pies Christmas Social was organised by the Moving on Together Group for staff and volunteers. There was also a seasonal performance and singalong with the Farleigh Community Choir which was very popular.
- Health and Safety Campaign: Introduction of quarterly Work Place Inspections has proved useful in ensuring staff safety within work environment.

- Increase in offer of Healthshield: Healthshield is available to all staff, it provides support for the everyday health needs of employees by providing cashback for dental, optical and physiotherapy costs, alongside offering wellness services such as a Virtual GP Surgery and Employee Assistance Programme (EAP). Staff were briefed on the updated benefits of the scheme.
- Management and Leadership sessions: A programme of monthly training sessions to support the development of management and leadership skills. These sessions were open to everyone and delivered by managers and trustees and included such topics as Recruitment, Presentation skills, Time Management and Performance Management.
- The Moving on Together Group and Heads of Department meetings monitored progress and uptake of events as well as feedback from staff and volunteers.



Moving On Together Group (MOTG)

Mandatory Statements of Assurance from the Board

The following are statements that all providers must include in their Quality Account. Many of these statements are not directly applicable to specialist palliative care providers and therefore explanations of what these statements mean are also given.

Review of services

During 2017 - 2018 Farleigh Hospice provided the following specialist palliative care services:

- In-Patient Unit: 10 beds
- Day Services: Chelmsford (social groups were run in Maldon pending acquiring new day services premises)
- Clinical Outpatients
- Clinical Advice Line and Triage
- Community Services including: Hospice at Home, In reach nurse to MEHT, Farleigh Clinical Nurse Specialists, Physiotherapists, Occupational therapists, Social Workers, Support Workers and MND Coordinator
- Well Being Services including: creative therapies and complementary therapies
- Information and 'drop in' services at the Pop Up Pod in the community and the Information 'Pod' at MEHT run in partnership with MEHT and Macmillan Cancer Support
- Spiritual Care
- Bereavement support for children, young people and adults
- Family/Carer Support
- Education and Training

What this means

Farleigh Hospice is an independent charity which provides all services free of charge. The income generated from the NHS in 2017 - 2018 represented 38% of the overall costs of service delivery with the remaining income to fund our services coming from voluntary charitable donations, legacies, events, corporate and community fundraising, hospice shops and our lottery.

Participation in clinical audits

Although the following are a series of statements that all providers must include in their Quality Account, many of these statements are not directly applicable to specialist palliative care providers.

- During 2017 - 2018 as no National Clinical Audits (NCAs) or Clinical Outcome Review Programmes (CORPs) covered NHS services provided by Farleigh Hospice, it was therefore not eligible to participate in any of these activities and consequently no information was submitted.

What this means

As a provider of specialist palliative care Farleigh Hospice was not eligible to participate in any of the National Clinical Audits (NCAs) or Clinical Outcome Review Programmes (CORPs). This is because none of the 2017 - 2018 audits or reviews related to specialist palliative care. The hospice will also not be eligible to take part in any National Clinical Audit (NCAs) in 2018 - 2019 for the same reasons.

Local audits

To ensure a high quality of service an annual audit programme has been established and a variety of quality and audit activities were undertaken using nationally agreed formats, often specifically developed for hospice care, as well as locally developed audit tools. For all these audits undertaken, where necessary, local action plans for improvements were developed and will generally be re-audited within the next 12 months to check for compliance and where further improvements are required. This has enabled us to monitor the quality of services and make improvements where needed. The reports of 53 local audits were reviewed by the Farleigh Hospice Governance Committees, all of which related to clinical care or relevant support services necessary to provide this care and evidence compliance.

Details of audits completed in 2017 - 2018 to improve the quality of services, can be seen in Appendix A.

Research

The number of patients receiving NHS services provided by Farleigh Hospice in 2017-18 that were recruited during that period to participate in research approved by a Research Ethics Committee was none. There were no appropriate national, ethically approved research studies in palliative care in which we could participate during this period.

Use of CQUIN payment framework

No Commissioning for Quality and Innovation (CQUIN) monies formed part of the NHS contract for 2017 - 2018.

Statements from Care Quality Commission (CQC)

Farleigh Hospice in Chelmsford is required to register with the Care Quality Commission and is registered to provide care and treatment to adults and older people who have a life-limiting illness or condition.

Farleigh Hospice is subject to periodic reviews by the Care Quality Commission and the last on-site inspection was in December 2016 at Farleigh Hospice in Chelmsford and was rated Outstanding for Care with an overall rating of Good for the service.

As the Farleigh in Maldon premises have now closed, when new premises are found, application will be made to re-register this service with CQC.

Data quality

Farleigh Hospice did not submit records during 2017 - 2018 to the Secondary Users service for inclusion in the Hospital Episode Statistics which are included in the latest published data.

Why is this?

This is because Farleigh Hospice is not eligible to participate in this scheme. In the absence of this we have our own electronic patient record system 'SystemOne' in place for all specialist palliative care activity.

Information Governance Toolkit (IGT)

Farleigh Hospice submitted its Information Governance Toolkit assessment version 14.1 in March 2018. The outcome was satisfactory for this year's IG Toolkit and we again passed the required standard. Overall, the Farleigh Hospice IGT score for 2017-18 was graded at 94% (Satisfactory) an improvement on the previous year which was 87%. Achievement of a satisfactory IGT score enables Farleigh Hospice to have continued access to an 'N3' connection.

What this means

'N3' (fast broadband networking service within the NHS) computer connection is a requirement for connection and use of 'SystemOne' the electronic patient record system used for all Farleigh Hospice patients. This also enables improved access to diagnostic test results carried out by the NHS. Results are more easily accessible for medical staff, leading to quicker decisions regarding treatment of patients.

Clinical coding error rate

Farleigh Hospice was not subject to the Payment by Results clinical coding audit during 2017 - 2018 by the Audit Commission.

Why is this?

There is currently no payment tariff for specialist palliative care services.

Part 3: Review of Quality Performance

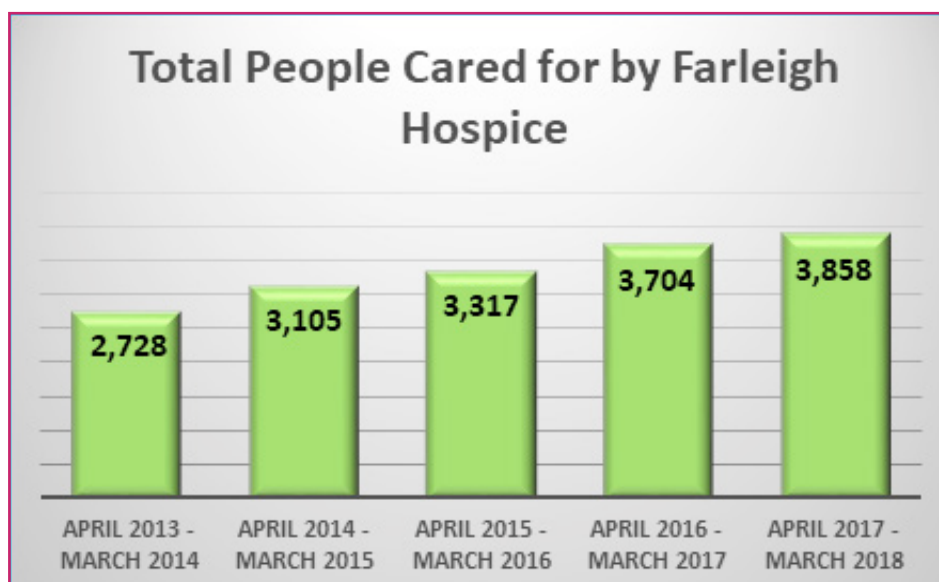
Farleigh Hospice Quality Performance Information 2017 - 2018

Detailed below is data about services provided by Farleigh Hospice relating to the review period April 2017 to March 2018.

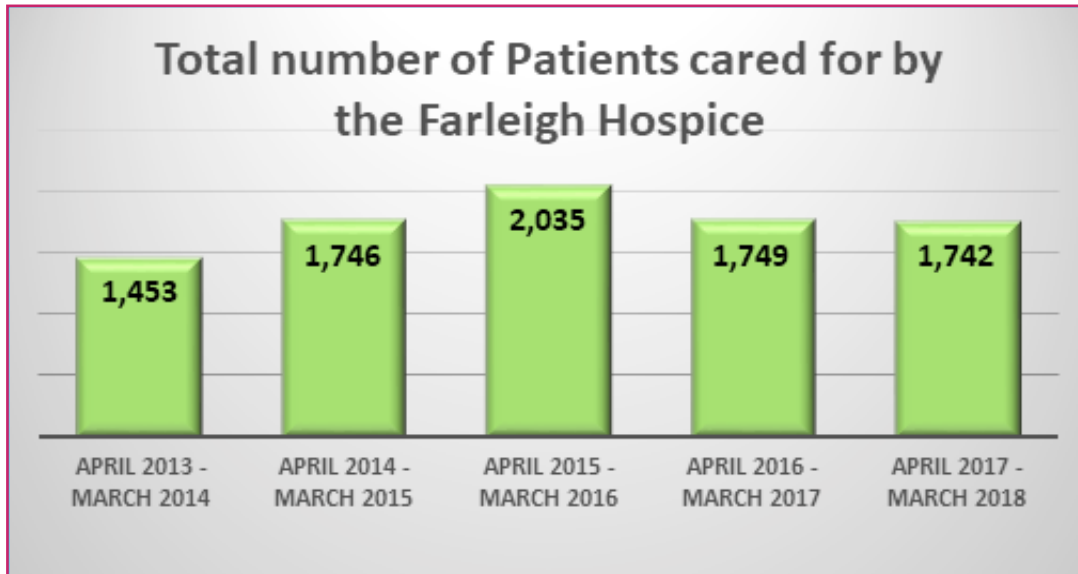
General information

The total number of people i.e. patients, carers and bereaved, cared for by Farleigh Hospice in the last year was 3,858, an increase of 4% on the previous year.

Although currently the Information Service contacts have not been included in the total number of people cared for by the hospice, as shown in the chart below, had they been included this would have added an additional 2,828 people, giving a total of 6,686.



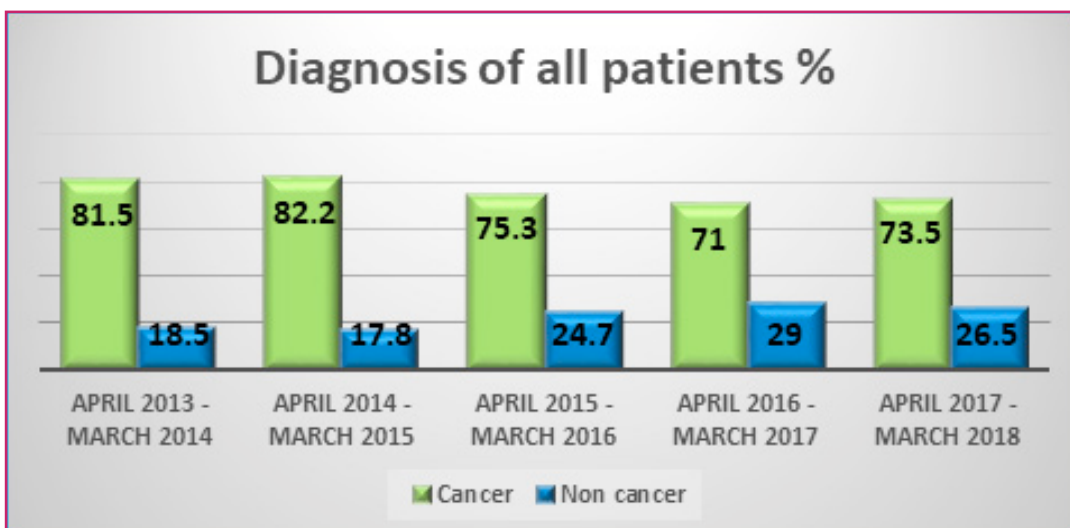
These figures include patients, carers and bereaved who have been cared for by the hospice during the review period.



These figures reflect only patients who have been cared for by the hospice during the review period. The patient numbers have remained static as we had to close the day hospice in Maldon due to safety issues with the building.

Patient Diagnosis

Farleigh Hospice has always provided end of life care for cancer and non-cancer patients and over the last few years there has been an increase in the number of non-cancer patients accessing hospice services. In the review period 26.5% of referrals had a non-cancer diagnosis.



Preferred Place of Death (PPD)

It is important to the hospice to care for people with life-limiting illnesses in the place of their choosing. We therefore ask them to state their preferred place of death at end of life. A total of 90.5% of all patients who received support from the Hospice at Home service achieved their PPD, which is a slight increase from the previous year of 88.3%.

Inpatient care (IPU)

The Inpatient Unit (IPU) has 10 beds to provide short term care for those who need help with symptom control, psychological support, rehabilitation to build confidence, respite care and to provide a place for those who are dying and wish to be in the hospice. Over the year the total admissions to IPU were 301 which is higher than the previous year which was 290.

The average length of stay was 5.6 days, showing a decrease from the previous year which was 7.6 days.

Bed occupancy overall for 2017-18 was 65.7%. The previous year overall was 72.6%. There is rarely a waiting list for admissions.

During the review period a project to refurbish and upgrade facilities commenced, reducing availability of beds by one, at any given time.

Community Services

Clinical Advice Line

The Clinical Advice Line provides access to a Hospice Nurse who is able to give advice on hospice care and support, symptoms, nursing care, and other needs relating to life-limiting illness.

The advice line has extended the days and hours of its availability to 8.00am to 8.00pm, seven days a week. This service is available to people who have a life-limiting illness, their family and carers and any healthcare professionals. In the review period the advice line received 12,930 calls.

Farleigh Hospice Community Nurse Specialists

The Farleigh Hospice Community Specialist Team continued to face high workloads. The nursing team carried out 3,933 visits which was an increase on the previous year of 3,725.

Hospice at Home

The Hospice at Home team consist of Registered Nurses and Healthcare Assistants, who provide care and support to help people who have reached the end of life and whose preference is to spend their last few weeks in their usual place of residence.

The team work within patient's homes, offering practical nursing care and emotional support. They also work very closely with the family, providing emotional support, advice on end of life care, medication guidance and crises support to prevent unwanted and unnecessary hospital admissions.

To ensure the highest standard of care the service works collaboratively with care providers including GPs, Community Nurses, Hospital staff and Social Services.

Overall in 2017 the team provided 5,734 hours of care and have seen an increase in the time spent during each visit, reflecting the complex needs of our patients.

Day Services

The Day Services team is made up of various health and social care professionals, support staff and volunteers who are skilled in enabling. They offer a range of services aimed at supporting people to live their lives as fully as possible alongside their life-limiting illness. A variety of groups are on offer to help patients and their carers understand how to manage their condition and their symptoms, support patients to be as independent as possible using rehabilitation to enable patients to participate in activities that they enjoy. Patients can be seen at the hospice or in some circumstances in their own home. The Day Services saw a total of 105 new patients over the year.

Information Service

The Information Service saw 2828 people at various venues across mid Essex, a decrease on previous years due to the Hospice Outreach Project vehicle (HOP) being out of service throughout 2017. (Priority for Improvement 3). The Information Service covers the Information 'Pod' in the Atrium at MEHT, Chelmsford and the 'Pop up Pod' (PUP) providing advice and support in smaller venues including festivals and events across mid Essex.

Bereavement Services

2017 was a very busy year for the Bereavement Services, reflecting the growth both in referrals and the team. The team is looking into a possible Community Bereavement Centre and surveyed service users to find out their views. The majority of service users supported the project concept.

Sessional counsellors have been used to support staff counsellors, student counsellors and volunteers to help meet the increased demand in both adult and children's services.

Circle: The mid Essex adult bereavement service not only provides support for the bereaved families and carers of hospice patients but also to other bereaved adults in mid Essex who were seen as being appropriate for the service. The service provided one to one support sessions, Bereavement Counselling sessions, groups as well as telephone support. The service received 898 referrals across the year.

In September, the popular Creative Arts & Crafts course returned, giving participants the opportunity to try a variety of activities including watercolour painting, photography, and card making. In November the Help Understanding Bereavement course recommenced with a six week course looking at what grief is, and why it affects everyone differently.

YoYo: The Yo-Yo Project which is a pre and post bereavement service for children and young people provided individual, group and telephone support over the year with a high proportion of sessions being delivered in the community. The project had 248 referrals across the year.



Creative Arts & Crafts Group 2018

In April, a music workshop was held to engage teens and help them express their loss in a different way. It was extremely well received and it is planned to organise more in future.

The bereavement workshops for school staff continued to be well attended and over 250 people have been trained on how to support children and young people who are facing loss or bereavement.

Family Support Team

The hospice recognises that life-limiting illness affects individuals, families and communities. The Family Support team includes Social Workers, Counsellors, a Support worker and Carers Coordinator. The team provide emotional support and counselling as well as practical advice and work alongside other health and social care professionals to assist those in crisis. The team work in partnership to recognise and develop patients own strengths, enable them to access the services they need and the resources they are entitled to.

Quality Monitoring Requirements for NHS Commissioners

In 2017 - 2018 Farleigh Hospice was required to report to Mid Essex Clinical Commissioning group on the quality of its services via the NHS Standard Contract. The hospice provided monthly, quarterly and annual reports evidencing compliance against national and locally defined quality measures.

Quality Assurance Visit

To assure the quality of services it commissions, Mid Essex Clinical Commissioning group uses a variety of tools, one of which is to visit providers, observe practice and speak to patients where appropriate to understand their experience of services provided. A Quality Assurance visit entitled 'Back to Basics' was carried out at Farleigh Hospice in June 2017. The services in the Inpatient Unit were reviewed following the Care Quality Commission's Key Lines of Enquiry:

- Is it safe?
- Is it effective?
- Is it caring?
- Is it responsive?
- Is it well led?

The findings from the visit were very positive and quotes from the report included:

" This was overall a very positive visit. Unit staff are engaged and showed that patients are treated as individuals."

" Patients reported that they were happy with the care they received and were aware of what was happening to them."

Quality Markers we Have Chosen to Measure

Quality is at the heart of everything we do. In addition to the services data provided by Farleigh Hospice relating to the review period we have chosen to measure our performance against the following:

- Duty of candour
- Complaints, concerns & compliments
- Safety information
- Local audits
- Other Quality Initiatives - Engaging with our community
- What others say about our organisation

Duty of Candour

All healthcare professionals have a 'duty of candour,' a professional responsibility to be honest with patients when something that goes wrong with their treatment or care causes, or has the potential to cause, harm or distress. They must also be open and honest with their colleagues, employers and relevant organisations raising concerns where appropriate. The hospice has developed a policy 'Being Open and Duty of Candour' and relevant policies and procedures include references to the duty of candour. Information is included in induction for new staff, in the staff handbook as well as training sessions for current staff. It is also evidenced in our values.



Caring



Innovative



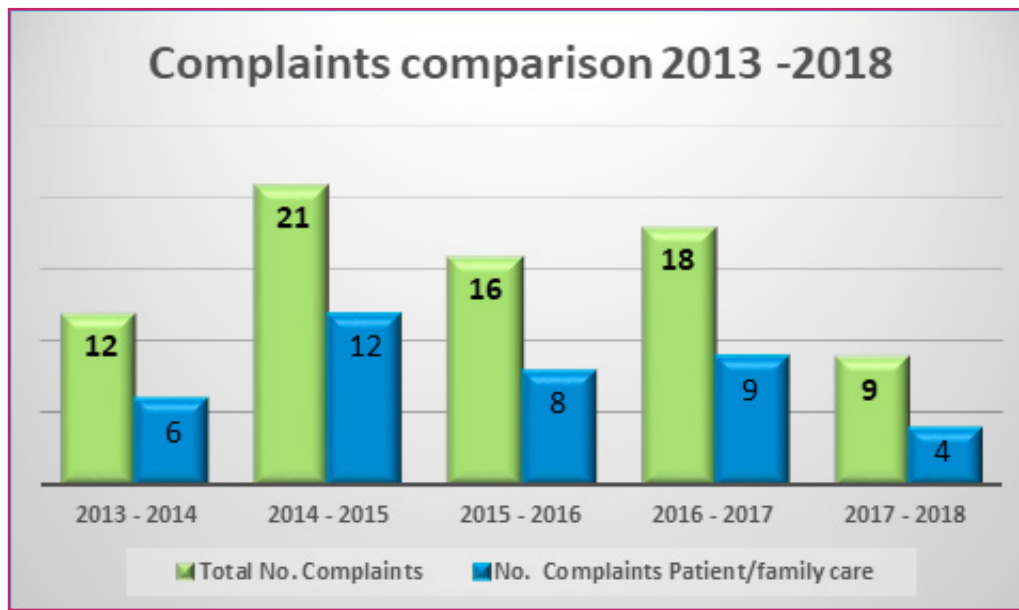
Respectful



Dedicated

Complaints, Concerns and Compliments

The management of complaints is in line with the Farleigh Hospice Policy 1.11 Complaints: Statement and Procedure. Farleigh received nine complaints between April 2017 and March 2018. Of those four related to clinical care. The other complaints received related to fundraising activities. In the review period nine 'concerns' were dealt with in an informal manner, of these six related to clinical care.



Following completion of an investigation, all complaints are categorised as green, amber or red based on the seriousness and likelihood of the issue to recur. The outcome of the complaint is agreed: Not Upheld, Partially Upheld, Upheld and the theme of the complaint e.g. clinical care, communication, attitudes, fundraising issues, are also recorded to monitor trends.

Complaints 2017 – 2018	
Total number of complaints related to patient/family care	4
Total number of these which were upheld	1
Total number of these which were partially upheld	1
Main theme from complaints	Communication
Total Number of complaints related to non-patient/family care	5
Total number of these which were upheld	3
Total number of these which were partially upheld	2
Main theme from complaints	Communication/ Attitude

All complaints were fully investigated and appropriate actions taken including communicating the outcome with the complainant. All complaints and concerns were discussed by the Senior Management Team to ensure they were correctly dealt with and to facilitate organisational learning. This information was fed back to the relevant teams and resulted in, where necessary, processes being reviewed and updated, policies amended, additional training provided to staff and awareness raised of the need for effective communication between staff and across teams.

Compliments

There is no formal process at the hospice to collate and monitor compliments about the services we provide. We have recently asked staff to give copies of cards, letters, emails and comments received by our clinical teams to a central point for collation. It is believed that this is not all the compliments received but does give a good indication of how people feel about our services. We also now monitor social media to review comments received on the Farleigh Hospice Facebook page and Twitter account.

Cards, letters, emails, and Comments

A snap shot of compliments received about some of the clinical services from January to March 2018, resulted in 59 in total, 58 cards/letters and one verbal comment. Of those 32 related to the community services and 27 to the Inpatient unit.

All the comments were very positive:

“Thank you so much for the 1st class care which helped ease our worry and grief.”

“From the bottom of my heart, thank each of you for caring. It really means a lot to me. You are all Farleigh Angels.”

“I am increasingly aware of how (in our time of need), we were so cared for by you, you truly saved us.”



Safety information

Risk assessment

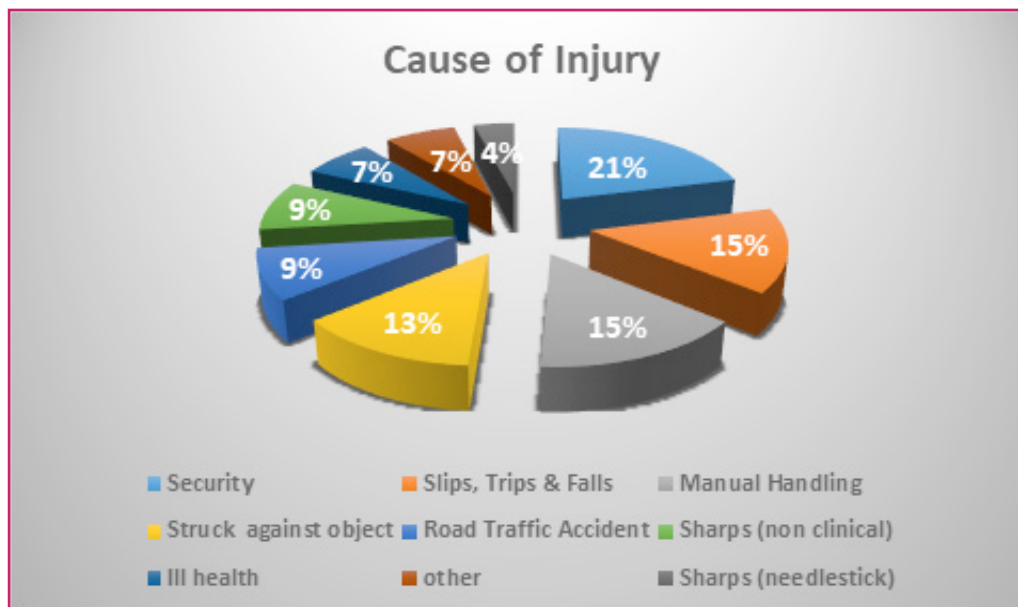
General risk assessments are in place to address health & safety hazards in all areas of the organisation. Additionally, Control of Substances Hazardous to Health (COSHH) risk assessments are carried out for all hazardous substances. All risk assessments are reviewed at least annually or sooner if circumstances change.

Work Place Assessments

Quarterly workplace assessments have been introduced involving staff reviewing their work area and practices to ensure safe compliant work practices. Any issues raised are investigated and where relevant remedial action taken.

Accidents/Incidents

For the period 1st April 2017 to 31st March 2018 there were 54 health & safety related incidents reported involving staff, volunteers, visitors and members of the public. In 23 of the reported incidents no injury was sustained, in 31 incidents injuries sustained were mainly classed as minor or medium, two required reporting to the Health & Safety Executive.



The most frequently reported incidents were security incidents at the North Court Road site in Chelmsford. Formal reporting of such incidents was introduced in this review period and has highlighted issues of windows and fire doors being left open. The most common cause of injury or potential injury was slips, trips and falls. These incidents resulted in minor injuries and occurred mainly in the retail shops. In the previous year the most common cause of injury had been sharps injuries (non-clinical) these mainly occurred in the retail shops.

Patient incidents

For the period 1st April 2017 to 31st March 2018 there were 51 clinical incidents, 39 of which were patient falls. One incident was reported to the Care Quality Commission regarding a safeguarding concern.

Patient falls

Of the 39 patient falls, six resulted in minor injury. All were fully investigated which included a review of the Falls Risk assessments and an update of the Falls Management Plan where appropriate.

Medication related incidents

Medication Adverse Events are audited on a quarterly basis.

In 2017 - 2018 45 medication related incidents occurred, of which 11 were near misses. There was no harm to any patient as a result of any of these incidents. The hospice exercised its 'Duty of Candour' by notifying patients and where relevant their families when these events occurred.

All incidents were investigated and where necessary, corrective action was taken.

The majority were due to human error and a need for increased vigilance by clinical staff. All audit results were shared with the clinical team and additional training carried out to raise awareness of the issues.

Safety Alerts

The hospice reviewed and actioned relevant alerts received from the Central Alerting System including drug safety alerts from the Medicines and Healthcare products Regulatory Agency and Medical Devices Alerts. A total of 55 alerts were reviewed of which three were relevant to the hospice and appropriate action taken where required.

Infections and Pressure Ulcers

Infections and pressure ulcers cause pain and distress to patients and families and have cost implications to organisations. Infections and pressure ulcers are monitored on an on-going basis by the Director of Care and Quality. Whether they are acquired or not at Farleigh Hospice they will still be reported to Farleigh Hospice's Clinical Governance Committee. Where relevant a report will be submitted to the Mid Essex Clinical Commissioning Group and the Care Quality Commission. Infections are also reported to and reviewed by the Farleigh Hospice Infection Control Team on a quarterly basis.

Policies and procedures have been reviewed and updated to reflect the guidance on Anti-Microbial Stewardship and this forms a regular agenda item for the Clinical Governance Committee. Effective infection control practices have helped ensure that infections have been contained.

Infections

There was one infection during the review period. This infection was not acquired at the hospice. There were no instances of clostridium difficile or MRSA infections acquired during this reporting period.

Pressure Ulcers

In total 28 pressure ulcers were recorded, none were acquired at the hospice.

Pressure ulcers by grade

Pressure ulcers are graded to provide a consistent approach to detecting the different severities of ulcers from a Grade 1 (redness/intact skin) through to a Grade 4 (extensive tissue damage).

The Pressure ulcers recorded during this period at Farleigh Hospice were:

Grade	Number
Grade 1	0
Grade 2	28
Grade 3	0
Grade 4	0

Venous Thromboembolism (VTE)

Patients in a hospice are at high risk of developing a venous thromboembolism (VTE) for a variety of reasons; malignancy, immobility and medical co-morbidities. Hospice care is not solely for terminal care; over 50% of patients are discharged to their normal place of care. In addition, hospices are increasingly involved in the care of the patient earlier in the course of their illness, where there might be reversible causes for deterioration. An audit in 2016 had highlighted that overall recording of assessment of VTE risk was poor, resulting in a new VTE risk assessment tool being introduced on the inpatient unit and completed on admission. A re-audit carried out in 2017 showed improvement in practice which has enabled clinicians to assess the risk of VTE and contra-indications to prophylactic medication and facilitate appropriate initiation of treatment if indicated.

Hospice UK Benchmarking tool

Farleigh Hospice continued to take part in the Hospice UK's National Hospice Inpatient Safety Benchmarking tool in 2017 - 2018. The tool originally recorded information on patient falls, pressure ulcers and medication incidents.

Information is submitted monthly to Hospice UK who collate the information and benchmark the organisation against similar size hospices. Farleigh Hospice compares favourably with other hospices of a similar size. The information is also used to evidence patient safety and compliance for the Care Quality Commission, 'Is it safe?' The provider learns from any safety incidents that have occurred and changes practice in response (2013). It is also used to evidence compliance for the NHS contract for the Mid Essex Clinical Commissioning Group. The hospice continued to record information on this tool and it is anticipated that there will be a web based version available in the future.

NB: For the period of 2017 - 2018 Hospice UK ceased collecting data on pressure ulcers to review evidence and classifications. Pressure Ulcer data collection will resume in 2018 - 2019 with revised classifications.

Safeguarding Vulnerable Individuals

Farleigh Hospice recently updated their policies for Safeguarding Vulnerable Adults and Children, Mental Capacity Act (MCA) and Deprivation of Liberties Safeguards (DoLS) to reflect current legislation and for evidence of compliance with the NHS Contract. The hospice's Safeguarding /DoLS /Prevent lead provides advice when required. In the review period safeguarding concerns were raised for three patients cared for by Farleigh Hospice staff. Four DoLS applications were raised for patients in the inpatient unit during the review period.

Information Security Incidents

The Hospice holds and manages a great deal of personal and confidential information relating to service users, supporters, the public and employees. As a consequence the appropriate actions must be undertaken to protect the sensitive nature of information held on both electronic and manual systems. There were 27 information security incidents recorded. All incidents were investigated and action plans developed and implemented.

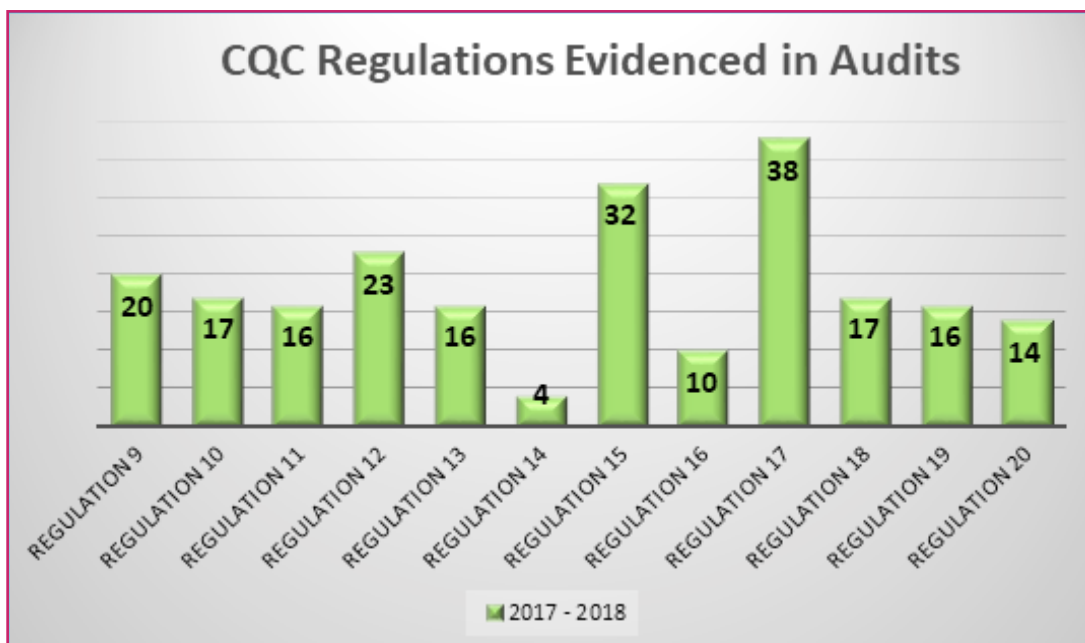
Caldicott Guardian Issues/Incidents

The Caldicott Guardian is a senior person within an organisation responsible for protecting the confidentiality of patient information and enabling appropriate information-sharing. They provide an oversight to ensure that the highest practicable standards for handling patient identifiable information are employed and are responsible for ensuring that their organisation adheres to the Caldicott principles. The role of Caldicott Guardian at Farleigh Hospice was carried out by the Chief Executive. In the review period no significant issues were logged in the Caldicott Guardian Issues log.

Local Audits

To ensure a high quality of service a variety of audits were undertaken using nationally agreed formats, often specifically developed for hospice care as well as locally developed audit tools. This has enabled us to monitor the quality of services and make improvement where needed.

In 2017 - 2018 the reports of 53 local audits were reviewed by the Farleigh Hospice Governance Committees, all of which related to clinical care or relevant support services necessary to provide this care and evidence compliance.



CQC Regulations			
Regulation 9	Person Centred care	Regulation 15	Premises and Equipment
Regulation 10	Dignity and Respect	Regulation 16	Complaints
Regulation 11	Consent	Regulation 17	Good Governance
Regulation 12	Safe Care and Treatment	Regulation 18	Staffing
Regulation 13	Safeguarding	Regulation 19	Fit and Proper Person
Regulation 14	Nutritional and Hydration Needs	Regulation 20	Duty of Candour

Action plans were developed as a result of these audits to improve the quality of services provided. Details of audits completed in 2017 - 2018 can be seen in Appendix A.



Patient using the Gym equipment at North Court Road.

Other Quality Initiatives

Future Farleigh: Engaging with our community

Farleigh in Maldon update

The hospice has been trying to find a new Farleigh in Maldon site and have reviewed several premises but have not yet been successful in finding the right one which can meet our needs. Better temporary premises in Maldon are being considered so that the new day service timetable will be available to patients and carers in the Maldon and Heybridge area. As before, all other community support continues to be available in the area and people are still accessing our inpatient beds when they need to.

Essex Business Excellence Awards 2017

In November 2017 Farleigh Hospice was very proud to win the Contribution to the Community Award at the Essex Business Excellence Awards 2017



Essex Business Excellence Awards 2017

“I was as so very proud of our wonderful Farleigh when we were announced as winners of the Essex Business Excellence Awards 2017 for our Contribution to the Community, this is a great tribute to each and every one of you who work so hard to deliver a great service to our community, well done!”

Alison Stevens, Chief Executive

Celebrity Launches New Facility for Young People

On Thursday 27th April, former Paralympic world record holder Danny Crates opened the latest development in providing the best possible care for people with life-limiting illnesses in mid Essex.

The facility known as “Room 9”, is within the Inpatient Unit and has been designed to provide an inclusive space suitable for young people and families to spend time together in a homely environment.

The transition to an adult hospice can be a difficult time for many young people, as they consult with several new health and therapy teams, as well as adult social care services. However, the transition is necessary to manage and administer the specialist care required as these young people move to adulthood.

The suite is a fully accessible studio apartment with a kitchenette, bathroom, modern entertainment centre, and private outdoor area, as well as a sofa bed for visiting family and friends to allow young people to live as independently as possible during their stay.

Patients are able to relax with friends and family as they prepare meals, catch up on their favourite TV shows and play games, whilst specialist palliative care is on hand 24/7 to assist where needed.



Danny Crates, Paralympic world record holder opens Room 9, the young adult suite

MENCAP students continue to transform Farleigh Community Garden

After many months of hard work from a fantastic team of City of Chelmsford Mencap volunteers, the new vegetable garden at North Court road was officially opened. With a grant from Tesco Bags of Help to create a wheelchair friendly path and with support from volunteer builders WBS, who provided pathways between the veg/flower beds, the group were able to breathe new life into an unused corner of the Farleigh Hospice grounds.

“Thanks must go to the Mencap students for their hard work, the art group and art group volunteers, the contractors, the fundraisers who provided the money and everyone who has been involved with the development and completion of the garden.”



Mencap volunteers and New Vegetable Garden opening in 2017

Farleigh Community Choir

Whether you're gifted with the dulcet tones of a seasoned tenor or you're simply looking for a place to stretch your vocal chords, the Farleigh Community Choir is the group for you! The choir, open to families, carers, the wider community and patients past and present, meet at Farleigh Hospice weekly.

The Farleigh Community Choir were honoured to be involved in the recording of Stand Together, by Choirs with Purpose. This album features a cover of Paul McCartney's hit We All Stand Together with vocals from choirs across the nation and Pop Idol winner Michelle McManus!

The choir leader said “The highlight of the choir is meeting together every week to sing. It's wonderful to see everyone relax into singing together and to hear the fabulous sound of everyone's voices together.”



Farleigh Community Choir 2017



Hugo our Elephant

The hospice was delighted to meet 'Hugo our Elephant' who never forgets. He arrived in December 2017 and has become a great member of the Farleigh team sharing memories of loved ones.

The artist who created Hugo had originally decided to make a small elephant by which to remember her sister who died in the care of Farleigh Hospice, however before she knew it, he had grown to be the size of a small life sized elephant.



Hugo

Dying Matters Week

Monday 8th May 2017 marked the start of Dying Matters Week, a nationwide annual event aimed at helping people talk more openly about death and dying. This year, the hospice encouraged supporters to think about what it means to "die well". This resulted in plenty of thought-provoking responses as people took to social media with their own ideas and opinions.



Sunflower trail

Hospice Care Week

Hospice Care Week was celebrated, on the 9th to 15th October 2017. This is an annual event which aims to raise awareness of hospice care within the UK.

This year, the focus of the event was 'We Are Hospice Care,' shining a light on all of the people who play their part in hospice care. At Farleigh, this included not only our staff and volunteers, but also carers, supporters and retail customers.

To celebrate this event a trail of environmentally-friendly sunflowers was created linking the hospice to Broomfield Hospital. We work closely with the Mid Essex Hospital Trust, and would not be able to run our services without the support of the NHS.

The Farleigh retail shops across mid Essex also celebrated the event with yellow-themed window displays as part of a nationwide competition run by Hospice UK. There was also a 'Dress in Yellow' day which staff embraced!

On social media the hospice launched a "did you know?" campaign, highlighting facts about the hospice that people may not be aware of, such as we provide care from the day of diagnosis as well as support for carers and families.



Farleigh staff in yellow

Staff Event: Competition and Recognition awards

The annual Farleigh Hospice Staff Event took place in September, this years' theme was 'working together - making a difference'.

All teams were invited to join a competition as part of the event, which was judged by staff and Trustees, and offered a day off for each member of the winning team!

The event also included lunch, an opportunity to meet colleagues from across the organisation and afternoon tea to celebrate with those receiving long service awards as well as judging the team competition.

Each department was asked to prepare a poster, display or presentation to showcase to the rest of Farleigh how they are "working together - making a difference". There were 2 winners:



Judges Award: Retail

The Retail team presentation gave people the chance to try their hand at sorting donations, it was thought provoking, informative and certainly made us laugh when we attempted bag sorting!



People's Award: Bereavement

The Bereavement Team's video blog presentation cleverly took us through a tour of the team members and their roles but also demonstrated the many other external partners that the team work with.

Staff from across the hospice received staff recognition award certificates and pin badges celebrating five to 30 years of service with the hospice.

What people say about our organisation

It is essential to know what people say about our organisation especially as we widen access to our services and facilities and work to further connect with our local community. Throughout the year the various engagement tools were used to obtain feedback to provide quality information for the NHS contract. Reviews of current and new services were undertaken to monitor ongoing quality improvements and provide evidence of living our values.

These included:

- Patient experience surveys
- Client Satisfaction: Bereavement and Counselling
- Staff Survey
- Trustee Provider Visits
- Compliments: Families and Carers

What our patients say

Every year Farleigh Hospice conducts surveys which focus on the quality of care being delivered in the Inpatient Unit and Day Services. Overall the responses about all these services were positive and affirming.

Comments from patients in the Inpatient Unit

In 2017 the hospice took part in a Patient Experience of Care project with Hospice UK, piloting a new survey and process for its delivery. Going forward it was agreed that although the information collected is useful, this survey format and process would not be used again to gain information on patient experience but patient experience and feedback will still be collected. Overall a positive response to the questions demonstrating a high level of satisfaction with the services in the Inpatient Unit.

When asked if there was anything else they would like to tell us about their experience, including how to improve it, the following replies were received:

“During my admission I have been so impressed with the way each team worked together. Nothing is too much trouble.”

“My experience has been very good. I was very poorly when I came in but after a couple of days I felt much better and now I feel really well. So thank you for your care.”

“The family would like to thank everyone for the care and support Dad has received while he has been in here. It has meant the world to me.”

“Farleigh have been very good to me, very caring staff at all times. Thank you.”

“A bed was very promptly found when my health was seriously deteriorating, due to extreme sickness. I was scared, but have felt nothing but safe since being in here.”

“Drs and nurses are very good at explaining everything and stopping you from worrying.”

“Care from every discipline has exceeded my expectations.”

Comments from Day Services

A survey this year was delivered using postcards placed alongside a post box in the Day Services and Lantern Suite. The post cards had six questions and a space for comments.

- Overall a positive response to the questions demonstrating a high level of satisfaction within Day Services
- 100% of the people who took part felt supported by Farleigh
- 93% indicated they were most or extremely likely to recommend Farleigh to a friend

Comments from Circle Adult Bereavement service

The figures show that overall satisfaction with the service remains high with clients reporting they felt their experience of counselling was helpful or very helpful. In total 85% of clients found their counselling to be a positive experience and could not see how it could be improved.

Comments about their counselling included:

“Exceptionally good and extremely helpful”

“Excellent, patient, approachable counsellor. Regular slot, never felt hurried, hugely beneficial”

Most clients said they would return to see the same counsellor. Two clients expressed levels of dissatisfaction with their counselling. Their expectation seems to be that it would be more interactive and solution focused.

Comments from Family Support Counselling

The family support counselling team offers counselling as a therapeutic intervention to both patients of the hospice and members of their family (adults only).

- 75% felt that the counselling sessions were helpful. With comments about the value of having a space to explore emotions, feeling very well supported, being helped to be able to show grief and learning about the value of counselling.
- 83% said there was nothing they would want to change about the counselling. One person commented “they would have liked sessions to continue”.

When asked if they had any further comments people used the opportunity to say thank you and express gratitude for the support received.

“I came to Farleigh for counselling and will be forever grateful for the care and help I received. Thank you so much for how you helped me and how you continue to help others.”

What Families and Carers say

Families and carers often give feedback verbally, through cards and email:

“Words cannot express how grateful I am. I'll be forever grateful.”

“Thank you for everything you did and also the support you gave myself and the boys.”

“Thanks again for everything.”

“Thank you most sincerely, you encouraged her to live life to the full.”

“Thank you for all the help you gave us.”

“Wish to express the deep gratitude and consider us blessed that you were appointed to our case.”

“Massive thank you, I don't know what we would have done without you.”

“The gratitude I feel for the help and support given to my family, incredible.”

“Thank you for all you have done.”

“The support and thoughtfulness you showed was absolutely amazing.”

“Thank you for all the care, help and support.”

“Thank you to all the wonderful staff.”

Farleigh Hospice also provides a dedicated service for carers. It aims to offer a range of services for carers of hospice patients across mid Essex in a variety of ways and prevent them from feeling alone and isolated.

This year has seen the start of a regular Carers support group, the running of the HOPE (Help Overcome Problems Effectively) and where relevant carers registered in their own right on SystemOne record system to help address their individual needs.

What our Staff say

Staff survey results.

Engagement levels were up by 12% on the previous year, with 126 staff completing the survey.

General satisfaction can be gauged by these questions and responses:

“I feel informed about what is happening at Farleigh” 82% agreed

“I am proud to work for Farleigh” 83% agreed

“I rarely get stressed at work” 42% agreed

“I am happy with the flexible working practices” 70% agreed

In relation to staff experiencing bullying and harassment, 78% said they had not, 9% were neutral and 72% felt diversity was valued in the hospice, 20% were neutral. In relation to personal development, 67% felt they received the training and development they needed, 20% were neutral. These results were similar or an improvement on the previous year.

Some areas were highlighted which it was felt required further action which focused on stress, communication and morale which were similar themes to the previous year but some improvement had been noted in these areas.

The results were considered by the Senior Management Team and were felt to be reflective of a year where a number of significant changes had been introduced at the hospice. An action plan was developed and shared with all the staff which included levels of commitment from the Senior Management Team, Heads of Departments and individuals.

What our Volunteers say

Farleigh Hospice currently has over 750 volunteers giving their time and skills across a wide range of activities to support the Hospice's goals and we are always looking to recruit more.

To help recruit more volunteers recruitment cards 'Volunteer with Us' were developed and several volunteers working in different roles were asked to share why they volunteer at Farleigh.



Welcome Team volunteer

A volunteer in the Welcome Team said:

"My role is quite varied really. There is a lot of meeting and greeting of everybody that comes into the hospice. Farleigh is such a fantastic organisation and it's great to be able to do something. I've had relatives that had cancer and it's just so nice to give back."

A volunteer in the Courtyard Café said:

"I volunteer in the Courtyard Café Kitchen. I've been volunteering for 20 years. It's great fun. Everyone in the team is so friendly and helpful."

A volunteer in the Bereavement Team said:

"It is a truly satisfying role that requires the ability to listen with care and sensitivity, as well as offer support. Helping the bereaved to understand and manage the process of grief is key to helping them find their way back to better, happier lives. The supervision and continued support I receive from the staff is brilliant. It's a really useful and rewarding use of my spare time."

Without the help of volunteers the hospice simply could not care for or support as many people in the mid Essex Community. They form an important part of the Farleigh family, carrying out a variety of roles including helping out in the kitchen, supporting patients in the inpatient unit, sprucing up the garden, counting the coins left in donation tins or working in retail shops. The Hospice is grateful for everything that they do and the time that they give. Throughout Volunteers Week in June 2017 some of our volunteers' stories were posted on Facebook. Without them, the Hospice simply couldn't provide the care that people across mid Essex rely on.

What our Trustees Say

Each Trustee Provider Visit (TPV) has a particular topical focus to check the hospice is meeting the objectives of the Farleigh Hospice Strategic plan and using either the Key Lines of Enquiry, set out by the Care Quality Commission or Farleigh Hospice Values for the observational exercise.

A TPV visit took place in August 2017, with the overall theme of safety including personal safety, safety of the environment and where relevant, safety of clients or patients. This visit was focused on clinical services meeting staff, volunteers, service users and carers.

The strong message from all teams was that everyone felt very well supported. It was mentioned on more than one occasion what a nice place it is to work and that people are very helpful and considerate to each other; both within and between teams. Staff are positive about the management culture and 'open door' approach which enables them to express their views or raise concerns. They are able to be innovative in the workplace.

Our Trustees said "Overall the opinions voiced by the staff and volunteers during this review were very favourable to the organisation. We would like to thank all those that took part for their time and willingness to talk honestly to us".

What the Care Quality Commission say

The most recent onsite inspection was carried out by the Care Quality Commission in December 2016 at Farleigh Hospice in Chelmsford. This was a routine unannounced inspection to check that the 'Key lines of enquiry' were being met. The hospice was rated 'outstanding' for care with an overall assessment as 'Good'.

As the Farleigh in Maldon premises have now closed, when new premises are found application will be made to re-register this service with CQC.

An explanation of those involved in this Quality Account

The task of writing the report was designated to the Director of Care and Quality, Quality Improvement Lead and Chief Executive. Discussions then took place within the Senior Management Team regarding the future priorities for improvement for 2018 – 2019 following suggestions from Heads of Departments and the Multi Departmental Quality Assurance group. Five priorities were selected and after consultation with staff, patients, carers, volunteers and the public, it was agreed to include all five in the report but to combine two together as they had similar themes.

The list of priorities was agreed to be: Communication and engagement campaign, including developing a team of ambassadors to improve people's understanding of hospice care. Enhancing Community Services by increasing and improving care in the community. New model to deliver hospice education to care homes and the community. Continued refurbishment of the Inpatient unit to improve facilities for our patients and their families.

A final draft of the Quality Account was then completed and circulated to the Clinical and Corporate Governance Committees and Board of Trustees for discussion and comment. It was then distributed externally to the Mid Essex Clinical Commission Group; Healthwatch Essex and the Health Overview and Scrutiny Committee (Essex) for comment prior to publication on the NHS Choices website.

Statement from Mid Essex Clinical Commissioning Group 2018



Mid Essex Clinical Commissioning Group (MECCG) welcomes this Quality Account as a pledge for open and honest dialogue with the public regarding the quality of care provided by Farleigh Hospice. Your report is a well-presented and public-facing document and assurance from MECCG, as your primary NHS commissioner, is required to guarantee that the information in this Quality Account is accurate, impartially interpreted, and representative of the range of services delivered.

MECCG is commenting on a final draft version of this Quality Account and to the best of the CCG's knowledge, the information contained in the Account is an accurate description of the quality of provision of services.

Your achievement of the quality priorities that you set for 2017 - 18 have been noted and reflect improvements across your priority areas; improved links with non-cancer specialist services, end of life education project, the re-provision of the hospice outreach vehicle, the development of a new hospice strategy, and staff development and care.

Improvements going forward into 2018 - 2019 include:

- Communication and engagement campaign to improve understanding of hospital care
- Improving access to hospice care in the community
- Adoption of a new model of delivery to enable hospice education to care homes and in the community
- Continued refurbishment of the inpatient unit to improve facilities for patients and family.

MECCG supports these as appropriate areas for improving quality.

Following your CQC visit, you have received an overall rating of "GOOD", the subsequent report from their review, when asking if the service is safe, highlights issues within medicines management in particular as requiring improvement, the CCG Medicines Management team will be able to support you with ensuring that processes you are reviewing are robust.

MECCG looks forward to continuing its work with Farleigh Hospice in the coming year and encourages you to continue to implement the multiple and wide-ranging efforts and initiatives to improve the quality of your services.

Rachel Hearn

Director of Nursing and Quality

Mid Essex Clinical Commissioning Group

Statement from Healthwatch Essex



Response to Farleigh Hospice Account 2017-18 from Healthwatch Essex

Healthwatch Essex is an independent organisation that works to provide a voice for the people of Essex in helping to shape and improve local health and social care. We believe that health and social care organisations should use people's lived experience to improve services. Understanding what it is like for the patient, the service user and the carer to access services should be at the heart of transforming the NHS and social care as it meets the challenges ahead of it.

We recognise that Quality Accounts are an important way for local NHS services to report on their performance by measuring patient safety, the effectiveness of treatments that patients receive and patient experience of care. They present a useful opportunity for Healthwatch to provide a critical, but constructive, perspective on the quality of services, and we will comment where we believe we have evidence, grounded in people's voice and lived experience, that is relevant to the quality of services delivered by Farleigh Hospice. In this case, we have received quality of feedback about services provided by the hospice and so offer only the following comments on the Farleigh Hospice Quality Account.

- HWE recognises the excellent commitment to patient care, carers and the families. This is continuously of high quality and is seen in the high value of feedback HWE receives.
- HWE recognises that the hospice has set out its priorities, which include clinical effectiveness through an extensive patient and public engagement campaign. HWE is always encouraged by the commitment to patient voice and people's lived experience, which includes volunteers and staff.
- HWE is assured that the hospice continues to play a key role and leadership role in the work around end of life care. The hospice continues to play a central role in bridging the gap between commissioners and the lived experience and should be recognised and commended for such a role.
- HWE is encouraged also by the continued refurbishment and investment of its premises and the continual aim of making the location more accessible and open. HWE was delighted to see the new garden and the changes in the lounge area for staff and carers/patients. HWE is very impressed by this work.
- HWE is encouraged by the additional role the hospice has played in the development of the STP footprint, its commitment to partnership working including the VCS Alliance and the continued support and development of the Live Well brand.
- HWE is impressed by the 'Every voice matters' campaign and its role in the new strategic plan for the hospice. HWE is assured that there is a clear vision and mission for the hospice.
- HWE are keen to support the hospice in its ongoing role around hospital discharge and would like to see how this could be improved?

Listening to the voice and lived experience of patients, service users, carers, and the wider community, is a vital component of providing good quality care and by working hard to evidence that lived experience we hope we can continue to support the encouraging work of Farleigh Hospice.

Dr David Sollis Chief Executive Officer, Healthwatch Essex

24th May 2018

Statement from Health Overview & Scrutiny Committee (Essex)

Statement from Health Overview & Scrutiny Committee, Essex

The Essex Health Overview Policy and Scrutiny Committee has not engaged with the hospice in recent years.

However, the whole draft report is excellent, however there is just one point that should be made.

Mention is made in the Chief Executive's Introduction of the CQC's Inspection Report of 20 April 2017 giving a rating of outstanding care. However, the rating for Safety was "Requires Improvement". Bearing in mind that the CQC document is a public document, it would have been beneficial to have included an update under Priority 5 in this regard, highlighting that the comments made, had been taken on board and addressed.

Graham Hughes
Scrutiny Officer
Democratic Services
Corporate and Customer Services
Essex County Council

Response from Farleigh Hospice

Dear Graham,

Thank you for your comments on the draft Farleigh Hospice Quality Account 2017 - 2018. I note the comment made regarding the most recent CQC report and updating on the rating for Safety. Although the report was dated April 2017 the visit in fact took place in December 2016 and a more detailed response had been included in the previous year's Quality Account 2016 - 2017. This outlined that action plans had been drawn up immediately following the visit to address the issues which resulted in the rating for Safety of 'Requires improvement' with new procedures introduced. This version had previously been circulated to the Health Overview Policy and Scrutiny Committee for comment and if Jill would like to see another copy we are happy to forward this to her or it can be picked up on our website.

Kind regards

Alison Stevens
Chief Executive
Farleigh Hospice

Appendix A

Audits completed April 2017 - March 2018

Date	Audit	Department
Apr-17	Medication Adverse Events Jan - March 2017	Clinical
Apr-17	Infections and Pressure Ulcers 2016 - 2017	Clinical
Apr-17	Complaints 2016 - 2017	Quality
May-17	Accident/Incident reporting 2016 - 2017	H&S
May-17	Controlled Drugs (CDs) register Audit	Clinical
May-17	Client Satisfaction - Circle Bereavement Services	Clinical
May-17	Compliments 2016 - 2017	Quality
Jun-17	Accessing Support or Counselling at Farleigh Hospice	Clinical
Jul-17	Planned Preventative Maintenance North Court Road Jan - June 2017	Maintenance
Jul-17	Planned Preventative Maintenance Retail & Lottery Jan - June 2017	Maintenance
Jul-17	Reactive Maintenance North Court Road Jan - June 2017	Maintenance
Jul-17	Reactive Maintenance Retail & Lottery Jan - June 2017	Maintenance
Jul-17	Cleaning in High Risk Areas, IPU	Hotel Services
Jul-17	Falls in IPU April 2016 - March 2017	Clinical
Jul-17	Health & Social Care Act 2008 Infection Control Compliance	Clinical
Jul-17	Medication Adverse Events April - June 2017	Clinical
Jul-17	Mattress Audit June 2017	Clinical
Aug-17	Commode Audit August 2017	Clinical
Sep-17	Response times, Circle Adult Bereavement support - re-audit Sept 17	Clinical
Oct-17	Controlled Drugs (CDs) register Re Audit Sept 17	Clinical
Oct-17	Audit of Audit Reports	Quality
Oct-17	Venous Thrombo Embolism assessment in IPU	Medical
Oct-17	Internal Audit	Quality
Nov-17	Board Review Executive Summary 2017	Board
Nov-17	Cleaning in High Risk Areas, IPU	Hotel Services
Nov-17	Patient ID Bands	Clinical

Date	Audit	Department
Nov-17	Medication Adverse Events July - Sept 2017	Clinical
Nov-17	Patient experience survey 2017	Clinical
Nov-17	Welcome Events feedback 2017	HR
Nov-17	Staff Survey 2017	HR
Dec-17	Controlled Drugs Register - re-audit Dec 17	Clinical
Dec-17	Infection Control Audit IPU	Clinical
Jan-18	Cleaning Lantern Suite	Hotel Services
Feb-18	Planned Preventative Maintenance North Court Road July - Dec 2017	Maintenance
Feb-18	Planned Preventative Maintenance Retail July - Dec 2017	Maintenance
Feb-18	Reactive Maintenance North Court Road July - Dec 2017	Maintenance
Feb-18	Reactive Maintenance Retail July - Dec 2017	Maintenance
Feb-18	Clinical Waste Management 2017	Maintenance
Feb-18	Clinical Waste Management 2017	Maintenance
Feb-18	SystemOne Records Audit	Clinical
Mar-18	Medication Adverse Events Oct - Dec 2017	Clinical
Mar-18	Family Support Counselling Client Satisfaction	Clinical
Mar-18	Cleaning IPU	Hotel Services
Mar-18	Internal Financial Checklist CC8	Finance
Mar-18	Controlled Drugs - Accountable Officer audit	Clinical
Mar-18	Infection Control Lantern Suite	Clinical
Mar-18	Mattress Audit Dec 2017	Clinical
Mar-18	Commodes Audit Feb 2018	Clinical
Mar-18	Spiritual Care Survey	Clinical
Mar-18	IT Users survey 2018	IT
Mar-18	IG toolkit (v14) submission	IT
Mar-18	Gender Pay Gap Report	Board
Mar-18	Lantern Suite Service user survey	Clinical

If you would like further details of the above reports please contact:
 Quality Improvement Lead - susan.bridger@farleighhospice.org



Thank you. It is because you care that we can

North Court Road, Chelmsford CM1 7FH

www.farleighhospice.org

01245 457300 info@farleighhospice.org

Registered charity no 284670