



Quality Account

2017/18 | St. Michael's Hospice (North Hampshire)



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Part 1

Chief Executive's Statement

It gives me great pleasure to present this year's Quality Account for St Michael's Hospice. The account reviews progress that we have made during 2017-18 and outlines our key priorities for improvements to services for patients and their families in 2018-19.

The provision of high quality, patient focused care is the highest priority for St Michaels Hospice. As an organisation, we are continually learning and improving and I am committed to encouraging a culture of openness and honesty to support our Duty of Candour. Operating in a supportive environment as a multi-disciplinary team who strive to be the very best they can be is a key attribute as we face an ever-changing landscape of palliative care.

Feedback from our patients shows that 100% would recommend our care to family and friends and 97% of our relatives from our VOICES survey also stated they would recommend our services. This feedback encourages us to identify opportunities for further improvements in the quality of care we give and we look forward to building upon improvements we have made to deliver better services for our patients and their families.

Our latest staff survey shows a high level of staff satisfaction and commitment to the organisation. When benchmarked against other charities and hospices, it shows that we are performing better than most against the assessed criteria. More importantly, we have demonstrated consistent improvement in virtually all areas when compared to our previous surveys undertaken in 2015 and 2017.

This year we celebrated our 25th anniversary at Winchester Cathedral in partnership with our local community, with staff, relatives, Trustees and volunteers joining us in a service of celebration. I would like to thank our team of staff and volunteers who through their hard work and commitment ensure that we deliver outstanding care for the patients and their families of North Hampshire. As an organisation which is so heavily reliant on such a diversity of skills, we celebrate how everyone contributes to delivering the very highest standard of care. I would also like to thank our loyal supporters who help us generate the income required to maintain our services at no cost to patients and their families.

Iain Cameron

Acting Chief Executive

May 2018

Mission Statement

St. Michael's Hospice (North Hampshire) enables people faced with a life limiting illness, their families and carers, to attain the highest possible quality of life by providing a choice of specialist care and support.

Our Vision

St. Michael's Hospice will endeavour to influence and lead all aspects of palliative care provision in North Hampshire. It will do this by working in partnership with all stakeholders, particularly service users, who will be actively involved in the development and delivery of services which, as far as possible, will be user lead.

Priorities for Improvement 2018- 2019

St. Michael's Hospice is committed to providing high quality patient and family focused care and has identified a range of quality improvement priorities for 2018-2019 in the areas of patient safety, clinical effectiveness and patient experience.

Patient Safety

Priority 1: Increasing clinical staff support

How was this Priority identified?

A recent review of the service identified several significant stressors for clinical staff. This included a highly complex and unusually young patient caseload. In the face of increasing pressure, staff needed more time, space and structured support to deal with a mounting psychological burden.

How will Priority 1 be achieved?

Clinical supervision groups have been identified and an external facilitator has been funded for. In addition, some senior members of staff will receive one to one supervision support. Education and training time will be made available for all clinical staff to support them in their role which will be further facilitated via continued competency assessment.

Clinical Effectiveness

Priority 2: Improving clinical staff engagement in Quality Improvement

How was this Priority identified?

The review of the inpatient unit identified a requirement to embed quality improvement into the role of all clinical staff. This will support and empower staff to own any changes in practice that may be required and play a significant role in improving the quality of care for patients.

How will Priority 2 be achieved?

Clinical staff will receive training on quality improvement, including understanding the audit process. Staff will be mentored by senior members of the team to work together in small groups on specific quality improvement initiatives chosen by them. A team day will be planned to showcase all the quality improvement work undertaken.

Patient Experience

Priority 3: Implementation of the 'All about me' white boards
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How was this Priority identified?

Staff identified that person centred care could be promoted and enhanced through better use of the white boards in patient rooms. They identified prompts on each board which would encourage patients to identify what their goals might be and what was important to them on a personal level. Relatives are also encouraged to add to the boards if the patient has lost mental capacity

How will Priority 3 be achieved?

The 'all about me' white board project was launched with all clinical staff and evaluation of the project will be completed by the staff who have championed this initiative. The project continues to be developed and an abstract has been submitted to the annual Hospice UK conference.

Review of Priorities for Improvement 2017 – 2018

Improvement Priorities

The key improvement priorities undertaken during 2017 - 2018 were:

Priority 1: Improving Medicines Management

Learning from all drug errors and near misses was included in mandatory training last year and staff reported that they found the sessions very informative. The number of reported drug errors over the year were consistently less than other hospices of a similar size (Hospice UK benchmark data 2017/18). Reported drug errors fell in comparison to last year and staff are continuously encouraged to report errors to help with learning and avoiding harm.

Priority 2: Nursing Staff Competency Assessments

The registered nurse, Associate Practitioner and Healthcare Assistant competencies have now been written and issued to all staff. Work has commenced on staff being competency assessed and protected time has now been made available for staff to complete competencies. The competencies have also been used very effectively with new staff joining the hospice as part of the induction process.

Priority 3: Reducing Avoidable Patient Falls

Several initiatives were introduced during last year to reduce avoidable patient falls. These included mandatory training for all clinical staff on managing patient falls, plus staff attending additional external falls prevention training. Additional falls prevention aids were also purchased. There had been a 25% decrease in the reported number of falls in 2017 compared to the reported number of falls in 2016.

Part 2

Statement of Assurance from the Board.

The following are a series of statements that all providers are required to include in their Quality Account. Many of these statements are not directly applicable to specialist palliative care providers but those that are applicable are identified below

Review of Services

St. Michael's Hospice supported local NHS commissioning priorities during 2017 - 2018 with regard to the provision of specialist palliative care by providing:

- In Patient Unit Services
- Day Services
- Therapeutic Clinic
- Social Day Care Service
- Out Patient Services
- Community Palliative Care Team
- Complementary Therapy
- Physiotherapy
- Occupational Therapy
- Psychological Therapy
- Bereavement Services
- Social Work Services
- Chaplaincy
- Specialist education for nursing / care homes in North Hampshire including those caring for clients with a learning disability

£3.7 million income is generated yearly to fund St. Michael's Hospice as we are an independent charity that provides all services without charge to patients and their families. This comes from voluntary charitable donations, legacies, events, corporate and community fundraising, hospice retail and lottery. The remaining 20% of the funding required is from the NHS via the North Hampshire Clinical Commissioning Group (CCG).

Participation in Clinical Audit

National Audits

During 2017-2018 St. Michael's Hospice was not eligible to participate in any of the national clinical audits nor national confidential enquiries as none of the audits or enquiries related to specialist palliative care based in the community.

Local Audits

As part of continuously improving the quality of care provision we have a comprehensive annual audit programme and service evaluations using where possible, nationally agreed hospice specific benchmarking tools.

Audit Topic	Audit Outcomes
Patient Falls Review Audit	<ul style="list-style-type: none"> • Volunteers attended a training workshop so they can assist staff with high risk patients • Improvements seen in repeat falls & informing relatives • Staffing during the afternoon / evening to be reviewed
Infection Control Audit (External review by specialist nurse)	<ul style="list-style-type: none"> • Minimum compliance achieved across all areas • Infection control compliant furniture ordered • Management of housekeeping staff re-organised to provide more monitoring & support.
Pressure Ulcer Management	<ul style="list-style-type: none"> • Training on pressure ulcer grading to be reviewed for all staff
End of Life Care Audit	<ul style="list-style-type: none"> • Medical & Nursing documentation reviewed • New nursing care plans to be introduced • 100% standard introduced for RESPECT form completion (advanced care planning)
Preferred Place of Care / Place of Death 2017	<ul style="list-style-type: none"> • Mortality & Morbidity (M&M) review meetings introduced • New electronic M&M data management in place
Venous Thromboembolism (VTE) Re-audit	<ul style="list-style-type: none"> • Admission paperwork now includes section on Venous Thromboembolism (VTE) risk assessment • Further 3 monthly audits planned to monitor completion
Controlled Drug Audits (pharmacist external auditor)	<ul style="list-style-type: none"> • Signature list updated and sent to pharmacy
Health & Safety (external auditors)	<ul style="list-style-type: none"> • Intumescent seals replaced in the IT server room • DSE assessments reviewed • Stress questions included in staff survey
Controlled Drug Hospice UK audit tool (Accountable Officer)	<ul style="list-style-type: none"> • Standard Operating Procedures (SOP) reviewed by the Accountable Officer • New SOP on management of controlled drug stock discrepancies
PLACE Audit	<ul style="list-style-type: none"> • Overall improvement noted from previous year audit • Signage improved in car park • Use of assistive technology considered in main reception

Research

No patients were recruited during 2017-2018 to participate in research approved by a research ethics committee.

Implementing Duty of Candour

The Duty of Candour applies to all registered providers of both NHS and independent healthcare bodies, as well as providers of social care.

The Duty of Candour is a key topic in all employees yearly mandatory training and staff use the opportunity to discuss what this means in practice.

All concerns and complaints are investigated in detail, within the agreed timescales. We ensure an open and honest approach to both investigations and responses and offer meetings, with a view to resolution, to all complainants and those raising concerns.

Quality Improvement and Innovation Agreed with Our Commissioners

We participate in regular quality reviews in our scheduled contract meetings with the North Hampshire CCG as part of a combined quality assurance process. These also include a quality 'walk round' inspection of the In-Patient Unit offered to the CCG.

The hospice's NHS income in 2017 - 2018 is not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework (CQUIN Framework) although quality measures are monitored in the contract with the North Hampshire CCG.

What Others Say About Us

St. Michael's Hospice is registered with the Care Quality Commission (CQC) to provide the following services:

- Treatment of disease, disorder or injury.
- Diagnostic and screening procedures.

St. Michael's Hospice registration status is unconditional.

Care Quality Commission:

The last CQC inspection visit to the hospice was in July 2016 and the hospice achieved 'Good' in every area.

Ratings

Overall rating for this service	Good ●
Is the service safe?	Good ●
Is the service effective?	Good ●
Is the service caring?	Good ●
Is the service responsive?	Good ●
Is the service well-led?	Good ●

Part 3 Review of Quality Performance

Data Quality

St. Michael's Hospice (SMH) submits a National Minimum Dataset (NMDs) to the National Council for Palliative Care to facilitate data comparisons across hospice services.

Minimum Data Set Tables for Palliative Care (Small Units)

Table 1. St. Michael's Hospice In Patient Unit

In Patient Unit	Currently available national median 2015/16	SMH 2016/17	SMH 2017/18
New Patients	152	182	231
% Occupancy	77%	83.7%	80.8%
% Patients Non Cancer	11%	10.3%	17.9%
Average Length of Stay (days) – Cancer	13.3	14	12
Average Length of Stay (days) Non Cancer	10.3	18	10
Day Case Admissions	0%	6.3%	7.5%

Table 2. St. Michael's Hospice Social Day Care Service

Day Care Service	Currently Available National median 2015/16	SMH 2016/17	SMH 2017/18
Total Number of Patients	79	61	51
Day Care Attendances	979	385	327
% Places Used	70.6%	44%	62%

Table 3. St. Michael's Hospice Community Palliative Care Team

Community Palliative Care Team	Currently available national median 2015/16	SMH 2016/17	SMH 2017/18
Total Number of Patients	218	353	350
New Patients	159	345	300
% Patients with a Non Cancer Diagnosis	17.5%	27%	20%
Average Length of Care (days)	38	49	58
% Patients Died at Home (including care homes)	75.3%	80%	91%

Chaplaincy

The Chaplain provides spiritual and pastoral support to patients, their families and friends and to members of staff and volunteers. This non-judgmental ministry of listening, reflection and encouragement is offered sensitively to all, irrespective of religious belief or affiliation.

Prayers for the work of the hospice are held weekly in the chapel, which is available at all times as a quiet space for reflection and prayer. The Chaplain will contact other faith leaders from the community when requested.

The Chaplain seeks to enable all members of staff to have confidence in their own awareness of the spiritual needs of patients and their families. He is also available to conduct funerals as required, and can provide less formal prayers and blessings as needed by patients and their families.

Therapy Services

The St. Michael's hospice therapy team continues to work cohesively to support other clinical staff both on the in-patient unit and in the community.

An average of 32 new patients per month are referred for Occupational therapy or Physiotherapy and they are seen either in the community or as out patients.

Some patients require urgent assessment and the team balance this with the longer-term patients with complex symptoms and changing functional abilities. These patients, with conditions like motor neurone disease, are reviewed by a core multi-disciplinary team at a monthly clinic hosted at the hospice.

The team are keen to assist with both patient and staff education and are involved in mandatory training at the hospice and outreach programmes such as the 'Moving Forward' course for breast cancer patients. This program was nominated by Maria Miller MP for the NHS70 Parliamentary awards.

Complementary Therapy Service

The Complementary Therapy team of staff and volunteer therapists provide treatments for patients on the in-patient unit to help with relaxation, symptom control and general wellbeing – in addition to supporting their families with treatments. Aromatherapy diffusers are available in the patient's room to help with symptoms such as anxiety, insomnia and nausea if the patient chooses to use them.

Complementary Therapy outpatient clinics are run in The Turner Centre where treatments are also offered to carers and the bereaved. A home visiting service is also provided for those unable to travel to the hospice and a weekly clinic takes place at Odiham Cottage hospital.

Treatments offered include Aromatherapy, Reflexology, Massage, Indian Head Massage, Reiki, Yoga, and Deep Relaxation.

Regular training and updates for the therapists is provided by the Complementary Therapy Services Co-ordinator who also provides training for The Pink Place (a local cancer charity) therapists.

Additional Data

In addition to the quality metrics in the national minimum data set, St. Michael's Hospice analyses additional care indicators, as shown below.

Table 4. Overview of Key Governance and Activity Data

Clinical Governance Data	2016-2017	2017-2018
Total Number of Patients Admitted to the In Patient Unit	205	261
% of Patients Who Went Home	29%	27%
Total Number of Attendances by Patients at Day Care	1342	327
Total Number of Community Palliative Care Team Visits	2,624	1917
Total Number of Clinical Complaints	1	1
Total Number of Serious Patient Safety Incidents (excluding falls)	0	0
Total Number of Patients Known to be Infected with MRSA on Admission to the In-Patient Unit	0	0
Total Number of Patients Infected with MRSA whilst on the In Patient Unit	0	0
Average Length of stay on In Patient Unit in Days	14.7	11.4

Referrals to Day Services fell during the year for the social model but demand for the Therapeutic model exceeded provision capacity. A full review of service provision has been undertaken involving all stakeholders.

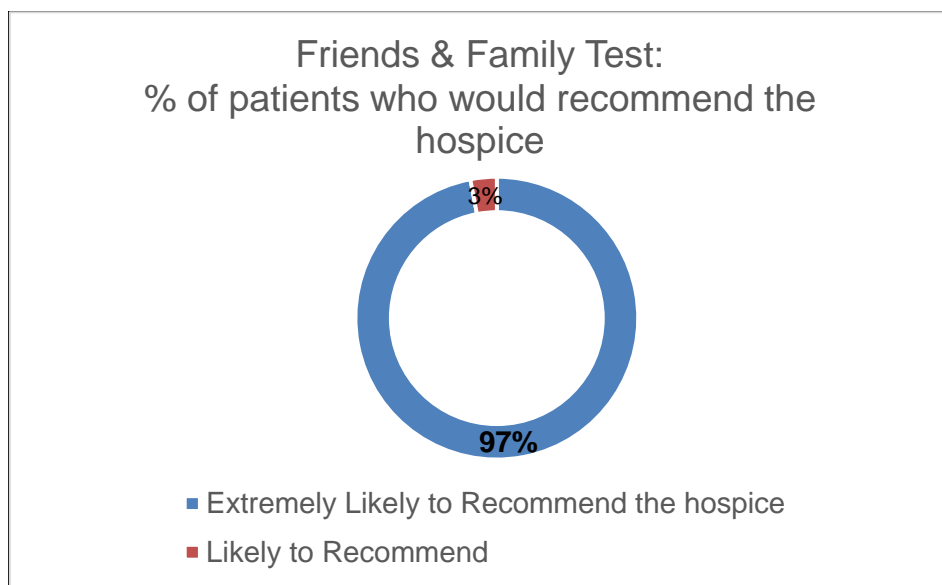
Table 5. Hospice UK Comparison Data on Key Quality Indicators

Data Source		Bed Occupancy (%)	Patient Falls	Grade 3+ pressure ulcers	Medication Incidents
			per 1000 OBDs	per 1000 OBDs	per 1000 OBDs
2017/18	SMH HOSPICE (10 beds)	82.6%	9.7	0.3	3.7
	AVERAGE HOSPICES (7-10 beds)	77.1%	9.4	not reported	12.6
	AVERAGE - ALL ADULT HOSPICES	79.0%	10.4	Not reported	10.4

What Our Patients and their Families Say About St. Michael's Hospice

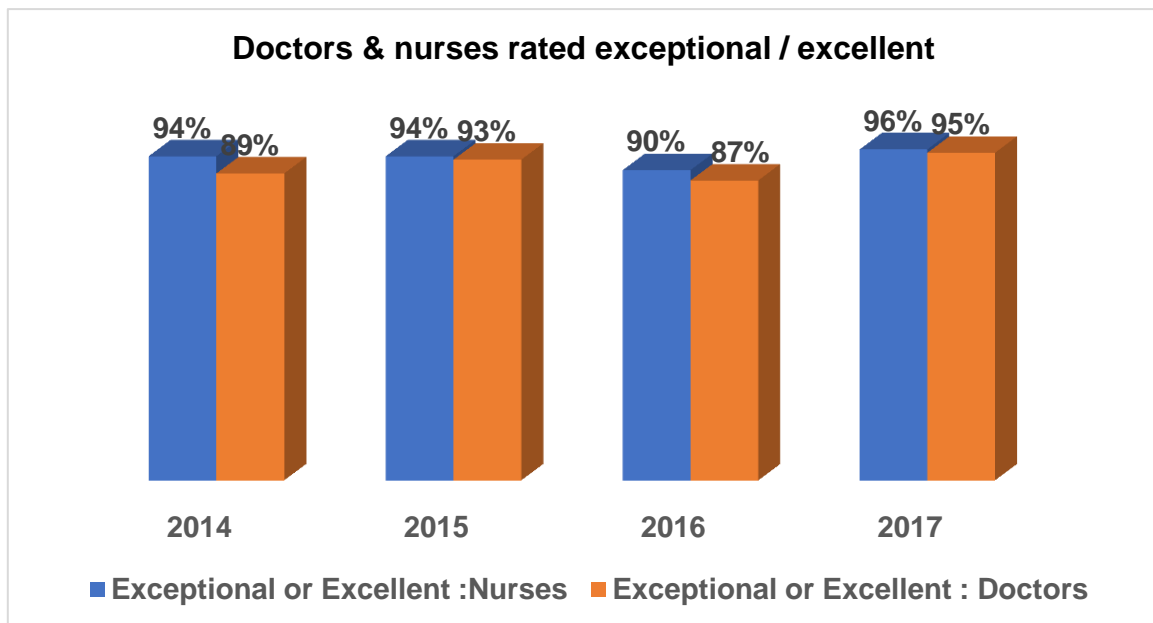
Collecting and analysing feedback from our patients and their families on the care they receive from us is a key priority for us. We collate real time feedback via our 'friends and family test' cards throughout the year and monitor these as soon as the feedback is received.

Chart showing Patient Feedback April 2017-March 2018 (number of responses = 78)



Patients are given opportunities to complete feedback while in the In-Patient Unit. Patients who are based in the community are also sent our 'Your experience matters to us' friend and family test cards. Day service patients and patients and families receiving complementary therapy also have opportunities to complete this survey.

Chart showing perceptions of overall patient care by doctors and nurses in the In Patient Unit 2017



- Relatives perceptions of patient’s relief of symptoms other than pain had improved (8% increase on 2016 survey) and addressing patient financial concerns improved (6% increase).
- Relatives perceived a decrease in patient’s pain management in IPU in 2017. There was a 7% decrease in relatives responding that ‘the patient’s pain was relieved completely all of the time’. We are currently reviewing our recording of patient’s pain management and how we manage pain. Further audit work is planned.
- Relatives perceived themselves receiving enough emotional support, increased in 2017. There was also a 9% increase of relatives reporting they had ‘definitely received enough support at the time of death’.

Workforce Engagement

Staff feeling supported to give high quality care to our patients and their families is very important to us. In addition to our existing support systems for staff we have budgeted for increased group supervision support for clinical staff. One to one clinical supervision will also be available for key staff.

Additional education and training support is planned via ‘away days’ to further support clinical staff to ensure they have the knowledge and skills to care for the increasing complexity of our patients.

The Chief Executive’s forum and the Employees forum (which feeds in directly to the CEO) continues to be supported by staff. The CEO Forum aims to encourage more inter departmental communication and identify opportunities for cross-team working for both clinical and non-clinical teams.

The Board of Trustees Commitment to Quality

The Board is committed to their role in ensuring the provision of the highest quality of care to patients and their families and supporting the organisation to achieve its mission.

The hospice has an established clinical governance framework with key Trustees having an active role in monitoring the quality of services provided. They are involved in the Clinical Governance Committee, offering their valued contribution in service reviews and planned improvements. Additionally, at our quarterly board meetings all Trustees have the opportunity to comment on quality indicators via the regular clinical services report.

The Acting Chief Executive is committed to high visibility and accessibility by all staff and volunteers, via his regular walk rounds of the hospice and his actively encouraged open-door policy. Accessible communication is further endorsed by the monthly CEO forum which is promoted to all staff. The Chairman of the Board meets regularly with the CEO and both have access to wider Trustee support as necessary to ensure that the Board have a current awareness of any issues.

This report illustrates the Hospice commitment to serving the local community by providing specialist services of a high quality, ensuring core values of compassion, care and dignity are at the heart of all we do.

St. Michael's Hospice Quality Account Feedback

If you would like to comment on the content or format of the St. Michael's Hospice Quality Account for 2017- 2018, please submit your comments via the St. Michael's Hospice website or to the St. Michael's Hospice Acting Chief Executive at this address:

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