



# Quality Account 2017 - 2018

# Welcome to our Quality Account for 2017—18

As evidenced in [‘Our Values’](#), we continue to strive to provide outstanding, high quality, specialist care to North East adults, children and young people with life-limiting conditions.

To ensure we provide a quality service to our patients and their families, we have a range of ‘checking and monitoring’ methods in place. We are regulated by the Care Quality Commission (CQC), Charity Commission and Companies House. In our latest CQC inspection (August and September 2015), we were compliant in all outcomes, with an overall rating of ‘good’ and rated as ‘outstanding’ for our care services.

We are monitored and required to provide evidence of quality service to a variety of external stakeholders including funders, and internally, with our patients, families, staff and volunteers. We encourage all stakeholders to feedback on their experiences. We continue to review and refresh feedback mechanisms to ensure we are getting the most value out of the feedback we receive and have now simplified our surveys in order to receive more relevant feedback from service users. In addition, we will continue to use focus groups more routinely to gather more qualitative information in a more specific way when considering service developments or redesign.

Our Clinical Quality Group reviews all issues relating to patient experience and providing a quality service. They take forward any actions needed and continuously update our Compliance Register accordingly. As it’s our primary aim that the best, safest care is delivered to patients and families, we continue to embed the Outcome Assessment and Complexity Collaborative tool (OACC) throughout our services. Implementation of the further measures is being planned once the Palliative care Outcome Scale (IPOS) and views on care are fully implemented in Day Care and our Adult Inpatient Unit.

Due to the changing needs of our day patients, this year we have further built on the therapeutic activities provided to patients during the day. We now offer more group sessions, one to one appointments and short courses, in addition to traditional day hospice. To reflect this change we have renamed our day centre to the ‘Focus on Living Centre’.

Through the continued support of our local community we are able to improve and grow our services, ensuring that quality, expert care is available, free of charge, to those who need it. Thank you.

**James Ellam, Chief Executive**



## Who we are

St Oswald's Hospice provides specialist palliative care to babies, children, young people and adults with life limiting conditions from across the North East of England.

Established in 1986, we have gained a local, national and international reputation for providing first class outstanding quality care.

As a charity, our vision is to provide excellence in care for those with incurable conditions, ensuring everyone in our region gets expert, dignified and compassionate care when they need it.

See our Vision Statement and Vision 2025 objectives updates overleaf to find out how we are doing this.

## What we do

We offer a range of adult services including an inpatient unit; a Focus on Living Centre which offers day hospice, therapeutic activities and one-to-one sessions; outpatient services; Lymphoedema management and outreach.

We are experts in pain and symptom management and end of life care.

We follow a team approach – including consultants, doctors, nurses, social workers, chaplaincy, physiotherapists, occupational therapists and complementary therapists.

We look after people with a range of incurable conditions, not just cancer. For example, Motor Neurone Disease, Multi System Atrophy and advanced respiratory or cardiac conditions.

We also care for babies, children and young adults with progressive, life shortening and life threatening conditions. We provide specialist short breaks and offer end of life care.

We provide care and support to patients, families and carers, following a holistic approach to our care.



## Our Vision statement

Together, we will make the most of time and improve quality of life for everyone in the North East living with an incurable condition, and their families.

Together, with the vital support of our staff, volunteers, donors and supporters, we will continue to develop and grow our services so that everyone in our region gets expert, dignified and compassionate care when they need it.

## Our Vision 2025 strategy objectives are:

- To continuously improve the quality and efficiency of the services that we provide to our patients and their families.
- To lead the development of palliative care services within the region by working more closely with other organisations.
- To work with staff and volunteers to deliver excellent services through our commitment to individual development.
- To work flexibly, always seeking to maintain financial stability.



**“When I first came to St Oswald’s I thought it would be just like a hospital but it was more like a home. Everyone was so nice and the nurses were really kind they almost felt like a second family.”**

# Our Vision 2025 - priorities

Our priorities below underpin our Vision 2025 objectives.

## By 2025 we will aim to:

- Develop a family support service for carers and bereaved adults and children.
- Develop a funded, community-based network of Lymphoedema services.
- Lead the development of a North East palliative care education centre.
- Create alliances with other local providers to increase access to palliative care.
- Develop expertise in life-limiting conditions.
- Expand the children's hospice and facilitate independent living for young adults.
- Ensure co-ordinated out-of-hours palliative care and advice is available across the region .



## PART 2: Priorities for improvement and required statements

St Oswald's remains committed to the continuous development of the whole service and through an active approach to patient and stakeholder involvement keeps the service users at the heart of decision making and service improvement.

### PRIORITIES FOR IMPROVEMENT—key Priorities for 2017-2018

There were a significant number of objectives for each directorate in 2017-2018, however four objectives were highlighted:

- 1) **To continue to fully implement outcome measures using the OACC suite of measures (Outcome Assessment Complexity Collaborative) in the Day Hospice and Adult Inpatient Unit (AIU). Measures to be focussed on in 17-18 include IPOS and Views on Care. This will also be the focus of CQUIN targets and will be monitored on a quarterly basis via reports to the CCG.**

*Fully achieved - We have achieved our CQUIN targets and continue to embed OACC measures in both Day Hospice and AIU. IPOS is now in place in Day Care 12 week review and change in phase of illness. It is currently being implemented in AIU. Implementation of the further measures is being planned once IPOS and views on care are fully implemented. Views on care has been implemented on the AIU as part of the Senior Care rounding and in Day Hospice on discharge or following 12 week review.*

- 2) **To finalise funding arrangements for our NHS Lymphoedema service from April 2018 onwards.**

*Fully achieved – contracts agreed for 2018/19 with Newcastle Gateshead, North Tyneside and Northumberland CCG. Outreach – A MDT approach has been agreed with Northumberland CCG for 18/19. This will be a joint clinic approach to patients with complex conditions, delivered in collaboration with the Northumbria Trust Tissue Viability Service. In addition, a new contract has been agreed for two years, to provide specialist lymphoedema services to South Tyneside CCG. This will be an outreach service based in South Shields.*

- 3) **To further research and develop better collaborative working relationships with other region-wide hospices and related organisations. The aim will be to enable improved services across the North East and increase access to high-quality palliative care for our communities.**

*Working groups established to pursue:*

- Communications across the collaborative
- Essential data collection, to better represent our case to NHS commissioners and supporters
- Learning and development programme across all 10 Hospices
- Joint work on HR strategy, finance and potential fundraising are also underway

- 4) **To continue research into and further develop possible education solutions such as the creation of a North East palliative care education centre.**

*Work is underway to develop a Great North Service Transformation Programme. In January 2018, Northumbria Trust and Northumberland Council along with St Oswald's, Tynedale and North Northumberland Hospices attended an event along with Newcastle Upon Tyne Hospitals, Marie Curie and many other providers to look at the current state of end of life and palliative care in the sub region. This proposal/pilot has been supported by Health Education England – North and is attempting to drill down and look at what patient centred care could look like across all EOL and Palliative providers.*

## PART 2: Priorities for improvement and required statements

### REVIEWS OF SERVICES:

During 2017-2018 St Oswald's Hospice provided and/ or sub-contracted two NHS services.

- Outpatient Lymphoedema Service
- Outreach Lymphoedema Service

St Oswald's Hospice has reviewed all the data available to them on the quality of care in two of these NHS services.

In addition the Hospice has provided the following services through grants & charitable funding:

- Children's Service
- Young Adults Transition Service
- Focus on Living Centre including day hospice and therapeutic activities
- Outpatient Clinic
- Complementary Therapy
- Physiotherapy
- Occupational Therapy
- Social Work
- Bereavement Support Team
- Chaplaincy

The income generated by the services provided to the NHS in 2017-2018 represents approximately 30% of the cost of running the Hospice. The remaining 70% is raised and provided by the charity each year

## PART 2: Priorities for improvement and required statements

### Participation in clinical audits:

During 2017-2018, St Oswald's took part in no national audits and no national confidential enquiries covered NHS services that St Oswald's provided.

St Oswald's regularly audits various elements of clinical and non-clinical practice both via internal procedures and with the support of internal and external audit partners.

The Clinical Audit Group, focus on developing audit within St Oswald's and continuously improving the quality of care provision. During 2017-2018 St Oswald's undertook the following audits

- > Senior Review Audit > MCA Audit > Corticosteroids
- > Clinical Passports for Children and Young Adults > OACC / Shared Plan of Care
- > Primary Thromboprophylaxis > Family Tree > Survey of Psychiatric Problems in Inpatients > Infection Control—Handwashing Audit > Infection control - environment audit > Moving and Handling practice audit

During the year a joint meeting with a neighbouring hospice was started and a number of potential joint audits are being discussed, such as the use of Oxygen.

### Participation in Clinical Research:

The number of patients receiving NHS services provided or sub-contracted by St Oswald's Hospice in 2017-2018 that were recruited during that period to participate in research approved by a research ethics committee was zero.

### Use of the CQUIN payment framework:

St Oswald's Hospice income in 2017-2018 was conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework.

Targets achieved were as follows:

- Continued Implementation of OACC outcome measures within our Inpatient and Focus on Living Services.
- Implementation of patient evaluations within the Focus on Living Centre.
- Development of learning materials for Lymphoedema Patients and the development of an accelerated key-worker treatment pathway.



## Statements from the Care Quality Commission

St Oswald's Hospice is required to register with the Care Quality Commission (CQC) and is currently registered to carry out regulated activities:

- Treatment of disease, disorder or injury.
- Diagnostic and screening procedures.
- Transport services, triage, medical advice provided remotely.

St Oswald's Hospice has the following conditions on registration:

1. The registered provider must ensure that the regulated activities are managed by an individual who is registered as a manager in respect of the activity, as carried on at or from the location St Oswald's Hospice.
2. This regulated activity may only be carried on at or from the following locations: St Oswald's Hospice, Regent Avenue, Gosforth, Newcastle Upon Tyne, Tyne & Wear, NE3 1EE.

St. Oswald's has the following additional conditions:

1. The registered provider may accommodate no more than 19 service users in the adult unit at St Oswald's Hospice.
2. The registered provider may accommodate no more than 8 service users, aged from birth to 25, in the children and young adults unit at St Oswald's Hospice.

The CQC has not taken enforcement action against St Oswald's Hospice during 2017-2018.

St Oswald's Hospice has not participated in any special reviews or investigations by the CQC during the reporting period.

A series of inspection visits from CQC took place on 11th August, 4th and 7th of September 2015 and a final report was published in January 2016 with an overall rating of Good with Outstanding for Care.

A full copy of the report can be seen on the CQC website.

[Click here to access the report.](#)

No formal recommendations for improvements were made within the Report however discussions during the site visit have resulted in the development of separate policies on Advocacy and Sexual Exploitation.



Last rated  
26 January 2016

St. Oswald's Hospice Limited

## St Oswalds Hospice

Overall  
rating

Inadequate

Requires  
improvement

Good

Outstanding

### Are services

Safe?

Good

Effective?

Good

Caring?

Outstanding  
☆

Responsive?

Good

Well led?

Good

The Care Quality Commission is the independent regulator of health and social care in England. You can read our inspection report at [www.cqc.org.uk/location/1-106214874](http://www.cqc.org.uk/location/1-106214874)

We would like to hear about your experience of the care you have received, whether good or bad.

Call us on 03000 61 61 61, e-mail [enquiries@cqc.org.uk](mailto:enquiries@cqc.org.uk), or go to [www.cqc.org.uk/share-your-experience-finder](http://www.cqc.org.uk/share-your-experience-finder)

## PART 2: Priorities for improvement and required statements

**Data Quality:** St Oswald's Hospice continually works to improve the quality of information provided. St Oswald's Hospice did not submit records during 2016-2017 to the Secondary Uses Service for the inclusion in the Hospital Episode Statistics which are included in the latest published data, however St Oswald's did contribute to a Hospice UK benchmarking project.

### Information Governance Toolkit Attainment Levels

St Oswald's Hospice Information Governance Assessment Report score overall for 2017-2018 was 79%.

The newly formed Data Quality and Records Management Group will be taking forward the action plan from the toolkit audit over the course of 2017-2018.

The Group meets monthly and is responsible for ensuring that policies and procedures in line with national guidance are implemented at St Oswald's.

The group are also responsible for preparing for GDPR coming into force at the end of May 2018.

### Clinical coding error rate:

St Oswald's Hospice was not subject to the payment by results clinical coding audit during 2017-2018 by the Audit Commission.

### Duty of Candour Implementation:

St Oswald's has a Duty of Candour policy in place and training in the application of the policy now forms part of the rolling education programme. In 2017-2018 no incidents were relevant to the Duty of Candour legislation.

## PART 2: Priorities for improvement and required statements

As in 2017-18, we will continue to work towards our Vision 2025 strategic objectives and related priorities. During 2017-18, however, our highlighted priorities are:

### PRIORITIES FOR IMPROVEMENT—key Priorities for 2018-2019

- 1) To complete our business plan with Newcastle University, Northumbria University, Northumbria Healthcare Trust and Newcastle Upon Tyne Hospitals Trust to create the Great North - Palliative Care Research Institute
- 2) To formalise the legal model for Hospices North East and move towards our soft launch with agreed strategic objectives
- 3) To begin our focussed approach as to what the future holds with regards dementia, learning disabilities and increased capacity for our adult's provision
- 4) To explore the Palliative Care Provider Transformation Programme further



## PART 3: Review of performance and user involvement

During 2017 - 2018, **2,183** adult patients, **51** children and **15** young adults benefited from St Oswald's services including:

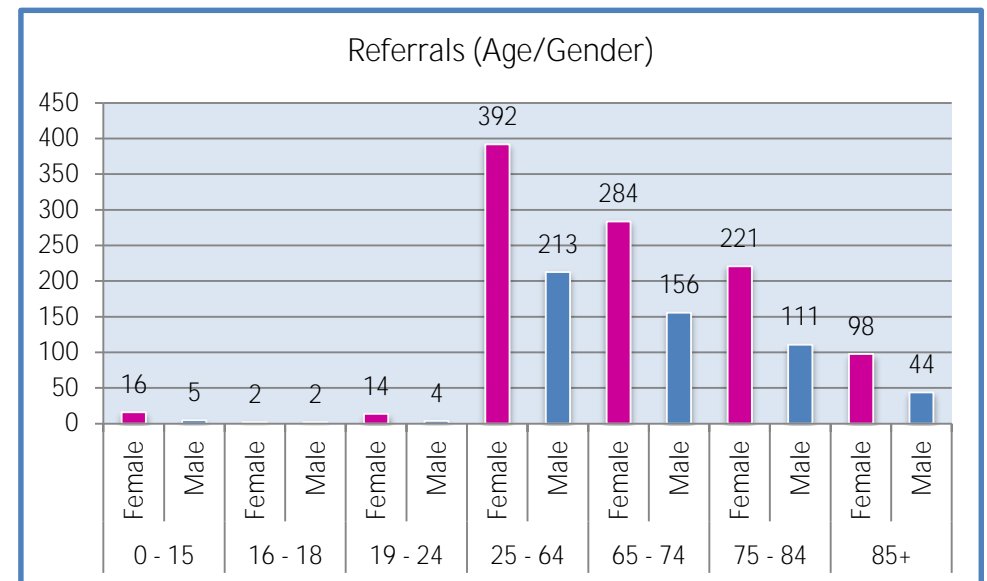
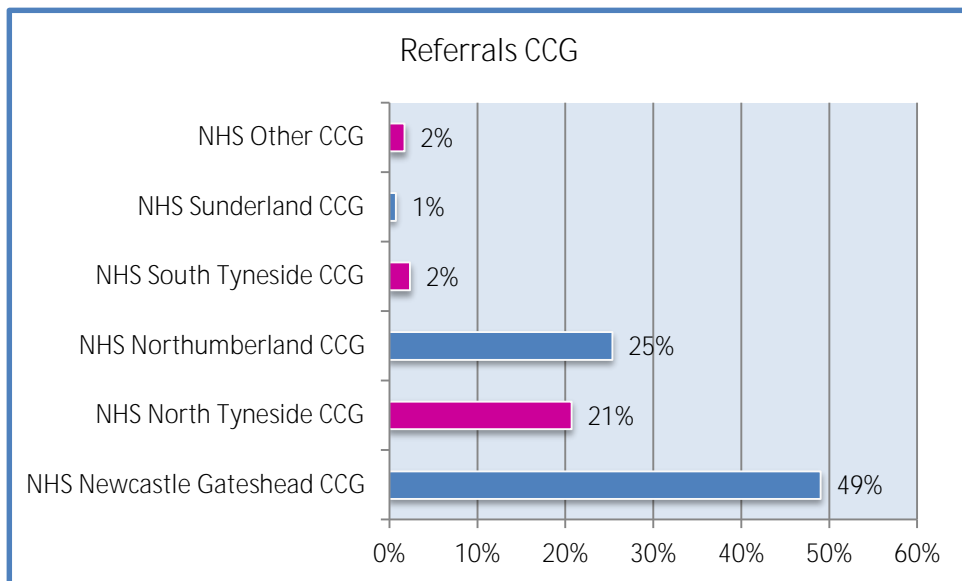
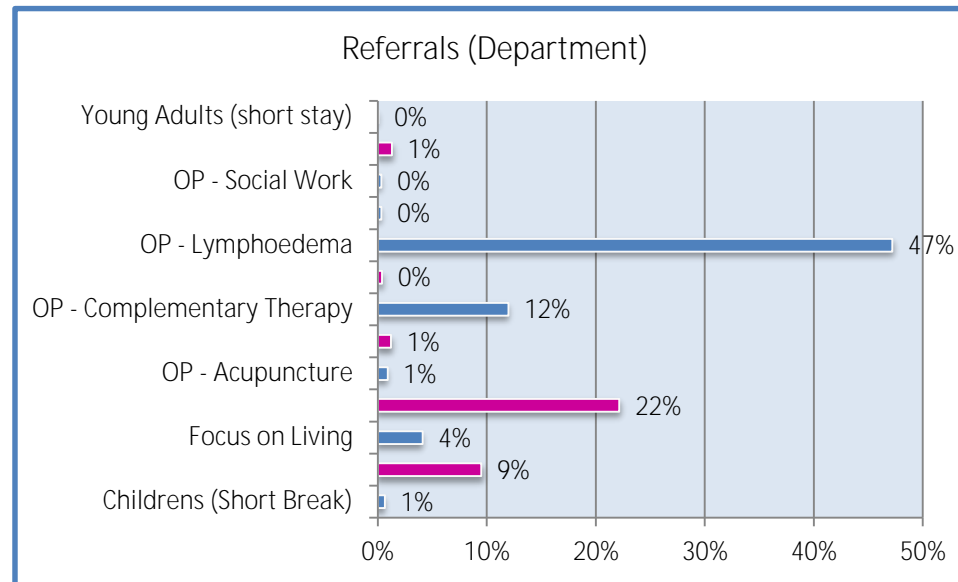
- **345** Inpatient referrals, **211** adult inpatient admissions & **212** completed stays.
- **146** new referrals into day hospice with 129 patients attending over the course of the year for a total of **1,572** days.
- **741** Lymphoedema referrals.
- **7,768** Lymphoedema outpatient attendances.
- **461** Lymphoedema attendances at our Shiremoor clinic.
- **365** Lymphoedema attendances at our Blaydon clinic.
- **207** Lymphoedema attendances at our Morpeth clinic.
- **382** Lymphoedema attendances at our South Tyneside clinic.
- **932** Complementary Therapy sessions provided to Outpatients, Day Hospice patients, inpatients and carers.
- Children's & Young Adults recorded an occupancy of **87%** over the year resulting in **1,900** bed days.

We serve adult patients from Northumberland, North Tyneside, Gateshead and Newcastle. In addition, children and young adults from Sunderland, South Tyneside and North Durham can also access our services.

Patients are referred to us by their GP, consultant or specialist palliative care team. Children and young adults are referred to us by health and social care pathway co-ordinators.



# Referrals to the hospice...an overview



## Inpatient Service

Our 15-bedded inpatient unit caters for patients needing pain and symptom control, emergency respite, and end of life care.


Our multi-disciplinary team work together and strive to address not just a patient's physical needs, but their emotional and spiritual needs too.

Our aim is to ensure patients with specialist palliative care needs can improve their quality of life; facilitate a safe and timely patient discharge or transfer to a continuing care service, as well as provide a supportive environment at the end of life.

We also understand the impact an illness has on the whole family and offer wide ranging support for carers.

### Last year...

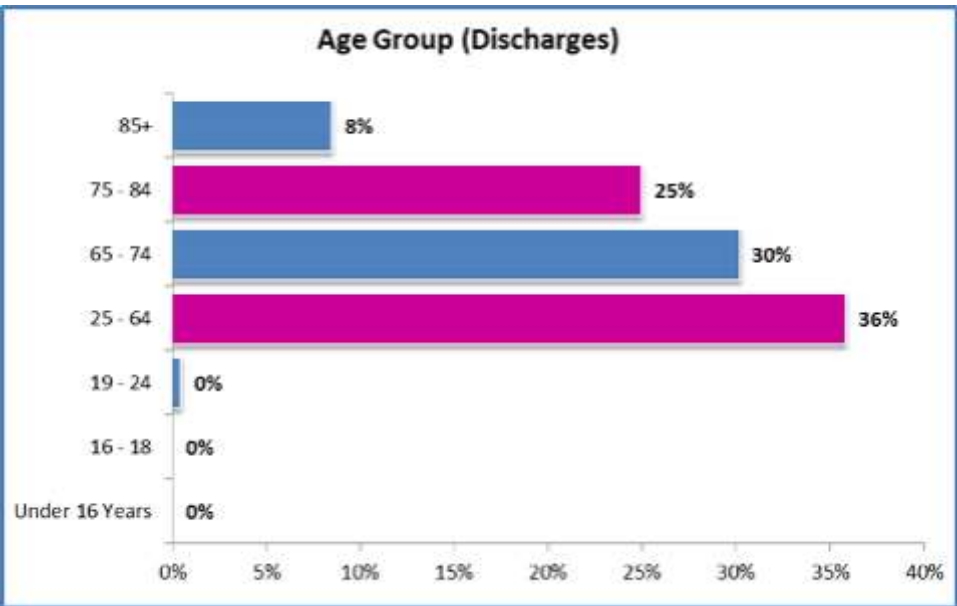
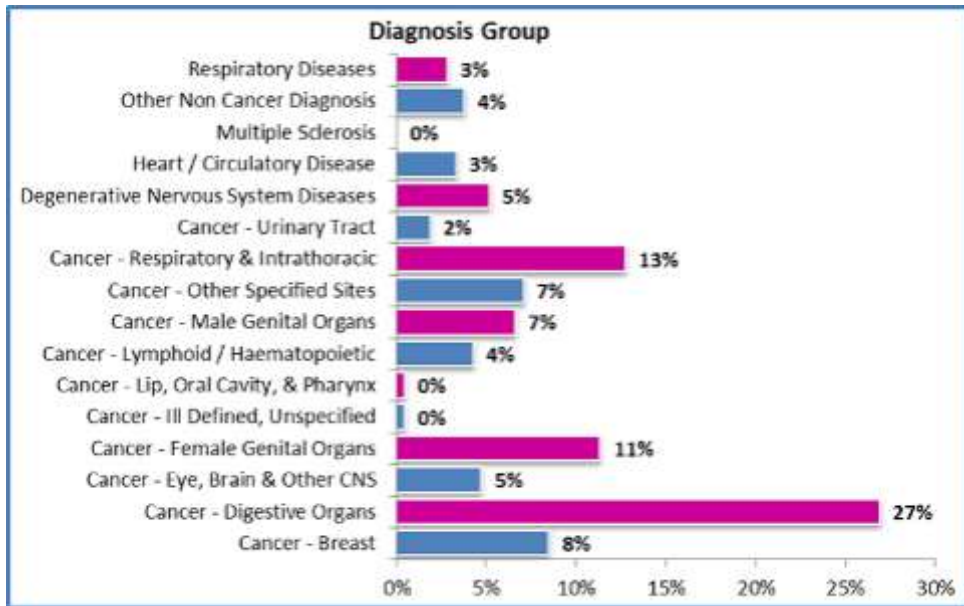
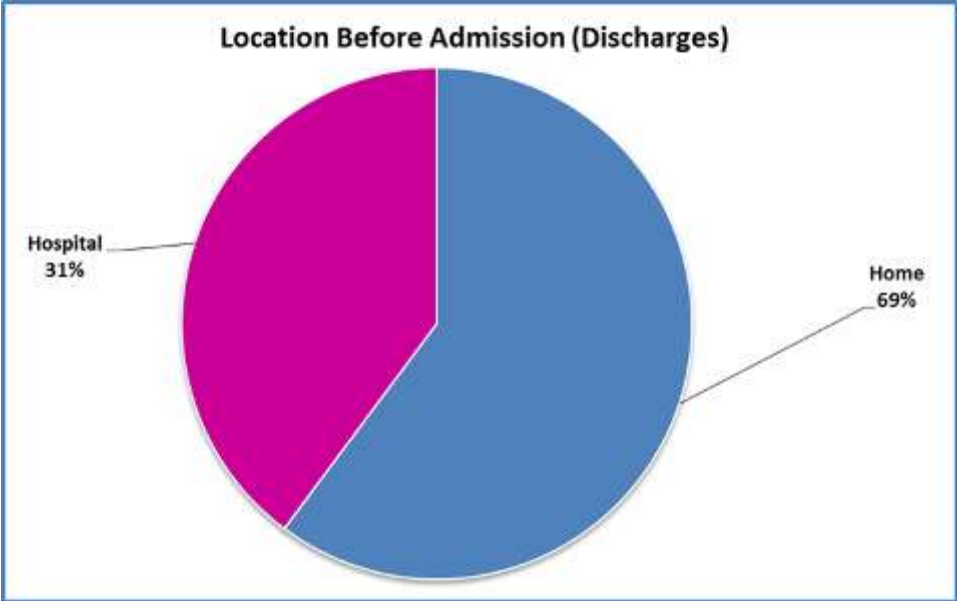
- There were **211** adult inpatient admissions last year, **74** patient discharges and **138** deaths.
- **4711** bed-days were occupied during the year, with an average occupancy of **86%**.
- Patients stayed with us for an average stay of 23 days.
- **All** families and carers have access to our Family Support Unit including bereavement support.



"I found it very difficult to come to terms with what was happening to my husband and I am certain that I would have struggled even more without the support I had, and continue to have, from St Oswald's."

# Inpatient Service...Discharges Overview

	2016-2017		2017-2018		% Change
	Average	Total	Average	Total	
Admissions	17	209	18	211	0.9%
Percentage Occupancy	86%		86%		No Change
Discharges	8.5	102	6	74	-37.8%
Deaths	8.8	106	12	138	23.2%
Finished Admissions	17	208	18	212	1.9%
% Deaths	51%		65%		14%
Average Age	65 Years		68 Years		+ 3 Years
average LOS	23 Days		23 Days		No Change
minimum LOS	2.8 Days		2 Days		- 0.8 Days
maximum LOS	72 Days		71 Days		- 1 Day
Median LOS	N/A		14.5 Days		N/A
Average wait	6 Days		5 Days		- 1 Day
Total referrals	36	435	29	345	-26.1%




## Focus on Living Centre

This year we made some exciting changes to our day service and made the decision to rename our day services to the 'Focus on Living Centre'. The Centre offers traditional Day Hospice three days a week (Wednesday-Friday) and therapeutic activities five days a week (Monday-Friday).

The name reflects that due to the changing needs of our day patients, we are now offering more therapeutic activities, group sessions, one to one appointments and short courses for people living with progressive life limiting illnesses and their families and carers.

Within the Centre, members of our care team informally monitor a patient's condition throughout their time with us and report any changes or difficulties back to their GP, hospital, or community team. During each visit, patients can benefit from the services of our nursing team, Physio and Occupational therapists, Complementary Therapists, Social Workers, our Chaplaincy Team and Therapeutic Activities Facilitator. Our medical team is also available when necessary, although a patient's GP retains overall responsibility for their care.



"As soon as I walk through the doors at St Oswald's I feel a sense of peace and tranquillity. Due to my condition, I can no longer drive, so my typical day at the Hospice begins with a volunteer driver picking me up from home. From the moment the car door opens, my driver has a smile on their face."



## Day Hospice


Day Hospice offers patients respite, symptom management and support during the day. Day Hospice facilities are available from Wednesday to Friday, between 10am and 3pm.

A visit to Day Hospice can be as busy or as relaxed as a patient wishes, with each session tailored around their individual needs. Patients can choose to take part in activities throughout the day which are designed to enhance a patient's feelings of wellbeing and self-esteem (further details about the activities on the 'therapeutic activities' page).

All meals and refreshments are provided free of charge and transport can be provided.

### Last year...

- We received **146** new referrals
- There was an average of **187** Day Hospice places booked each month, which is **75%** of our capacity.
- Average actual attendance was **53% of our capacity.**



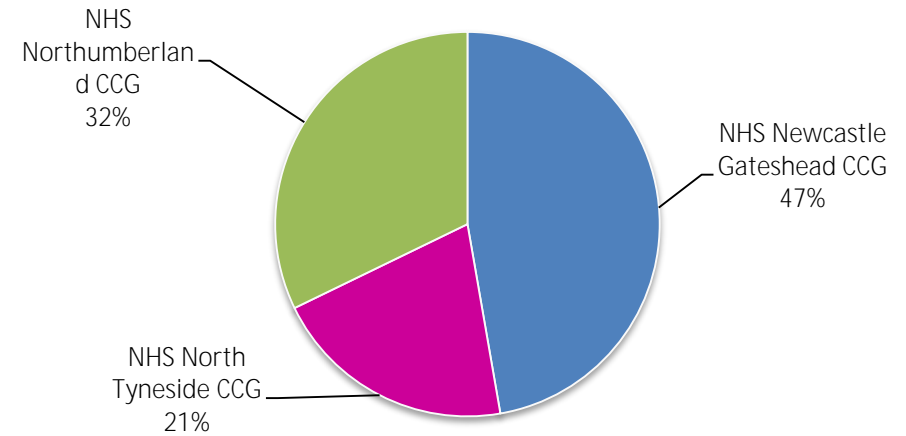
"Every time I walk into St Oswald's, it's like receiving a big hug, just like someone is wrapping their arms around you. Everyone here is wonderful and incredibly kind, I'm just so grateful that I can come to use a service like this. I would say it's the highlight of my week, it's my happy day."

## Day Hospice Referrals...an overview

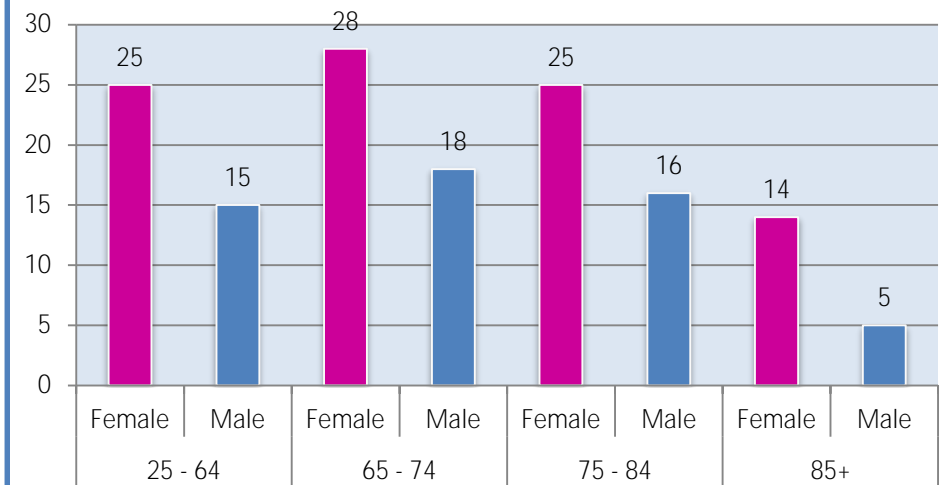
Diagnosis Group	Day Hospice	Day Hospice
Cancer - Breast	15	10%
Cancer - Digestive Organs	22	15%
Cancer - Eye, Brain & Other CNS	11	8%
Cancer - Female Genital Organs	16	11%
Cancer - Ill Defined, Unspecified	1	1%
Cancer - Lip, Oral Cavity, & Pharynx	2	1%
Cancer - Lymphoid / Haematopoietic	7	5%
Cancer - Male Genital Organs	8	5%
Cancer - Other Specified Sites	7	5%
Cancer - Respiratory & Intrathoracic	28	19%
Cancer - Urinary Tract	1	1%
Degenerative Nervous System Diseases	15	10%
Heart / Circulatory Disease	2	1%
Multiple Sclerosis	0	0%
Other Non Cancer Diagnosis	5	3%
Respiratory Diseases	6	4%
Not Stated	0	0%
<b>Grand Total</b>	<b>146</b>	

Source of Referral	Day Hospice	Day Hospice
Consultant	1	1%
GP	6	4%
Hospice	0	0%
Hospital Palliative Care Team	22	15%
Internal Referral	32	22%
MacMillan Nurse	0	0%
Community Palliative Care Team	61	42%
District Nurse	5	3%
Specialist Nurse	7	5%
Physiotherapy	5	3%
Other Clinician	7	5%
<b>Grand Total</b>	<b>146</b>	

### Referrals By CCG



### Referrals (Age Group/Gender)



"I come to the Hospice on a Thursday and I forget about my illness. Some people here have the worst illnesses but have a smile on their face. The patients, staff and volunteers here uplift me."

## Therapeutic activities

Our therapeutic activities and short courses provide an opportunity for people living with an life-limiting condition to come together and learn new skills. Carers can also attend the sessions.

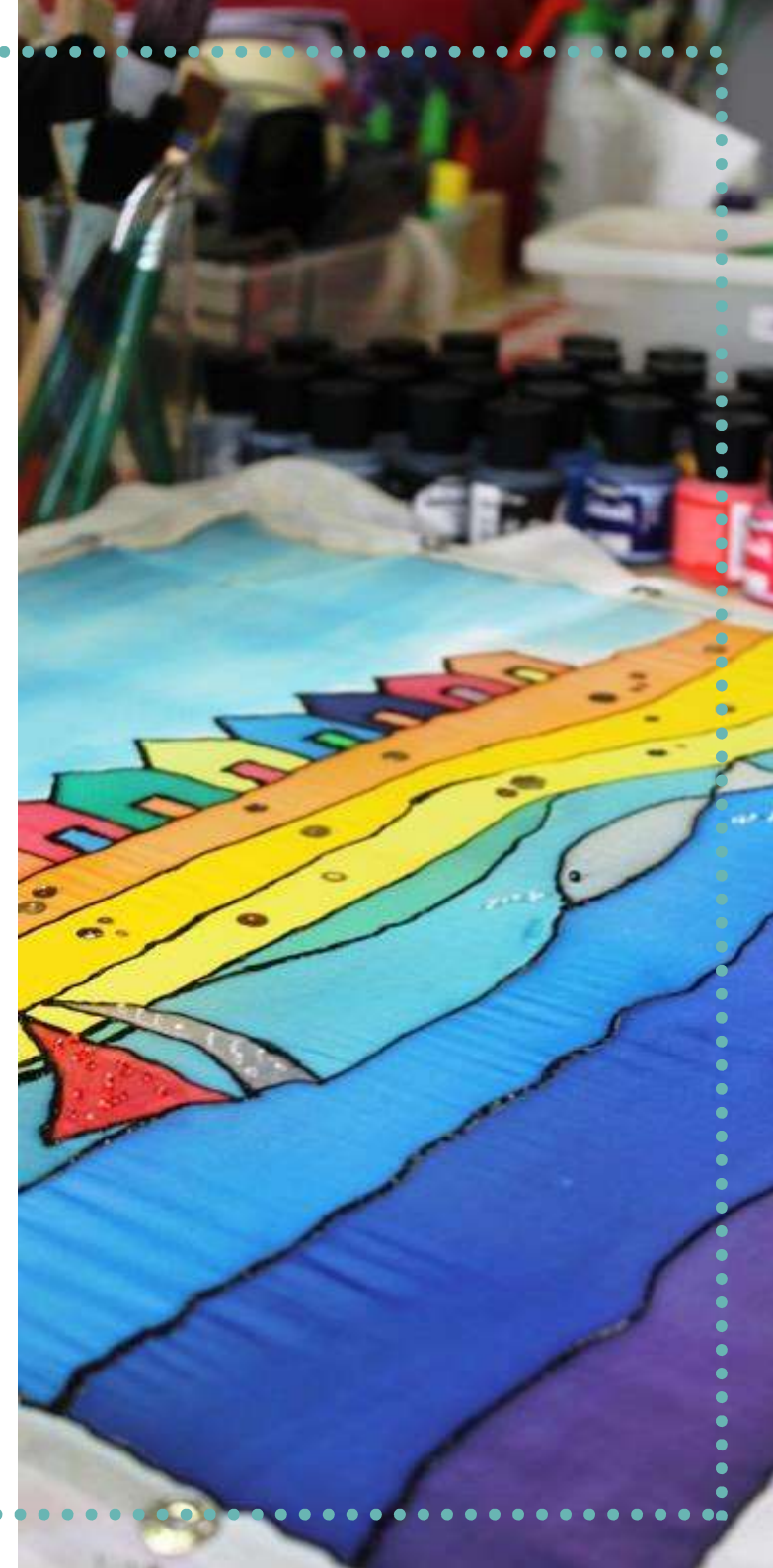
The sessions aim to improve quality of life, and people who have attended sessions tell us the courses have allowed them to share memories, be creative and helped to improve wellbeing. The range of courses available continues to develop and diversify based on the feedback from service users. Sessions include:

- Positive Steps\*
- Relaxation
- Mindfulness
- Arts and crafts
- Drop-in support groups
- Fatigue Management
- Tripudio Exercise class
- Creative writing
- Music therapy
- Acupuncture

\*'Positive Steps' is a six week programme introducing the range of St Oswald's services and to dispel myths around hospice care.

### Last year...

- **60 patients accessed activities.**
- **594 places booked over 15 activities.**



## Outpatient Service

Our Outpatient Services for patients and their carers include:

### Complementary Therapy Service

We offer a range of complementary therapies to patients and carers, on an outpatient basis, including: Massage, Aromatherapy, Indian Head Massage, Reflexology and Reiki.

Treatments are offered alongside conventional medical care and aim to help patients feel better physically, emotionally and psychologically.

### Hypnotherapy

Clinical Hypnosis can help patients feel more in control, reduce their anxiety, raise self esteem and build confidence. Sessions are provided by Lisa Cairns, who is qualified in Clinical Hypnosis and has undertaken pioneering work with Northumbria University to develop the use of hypnosis in palliative care settings.

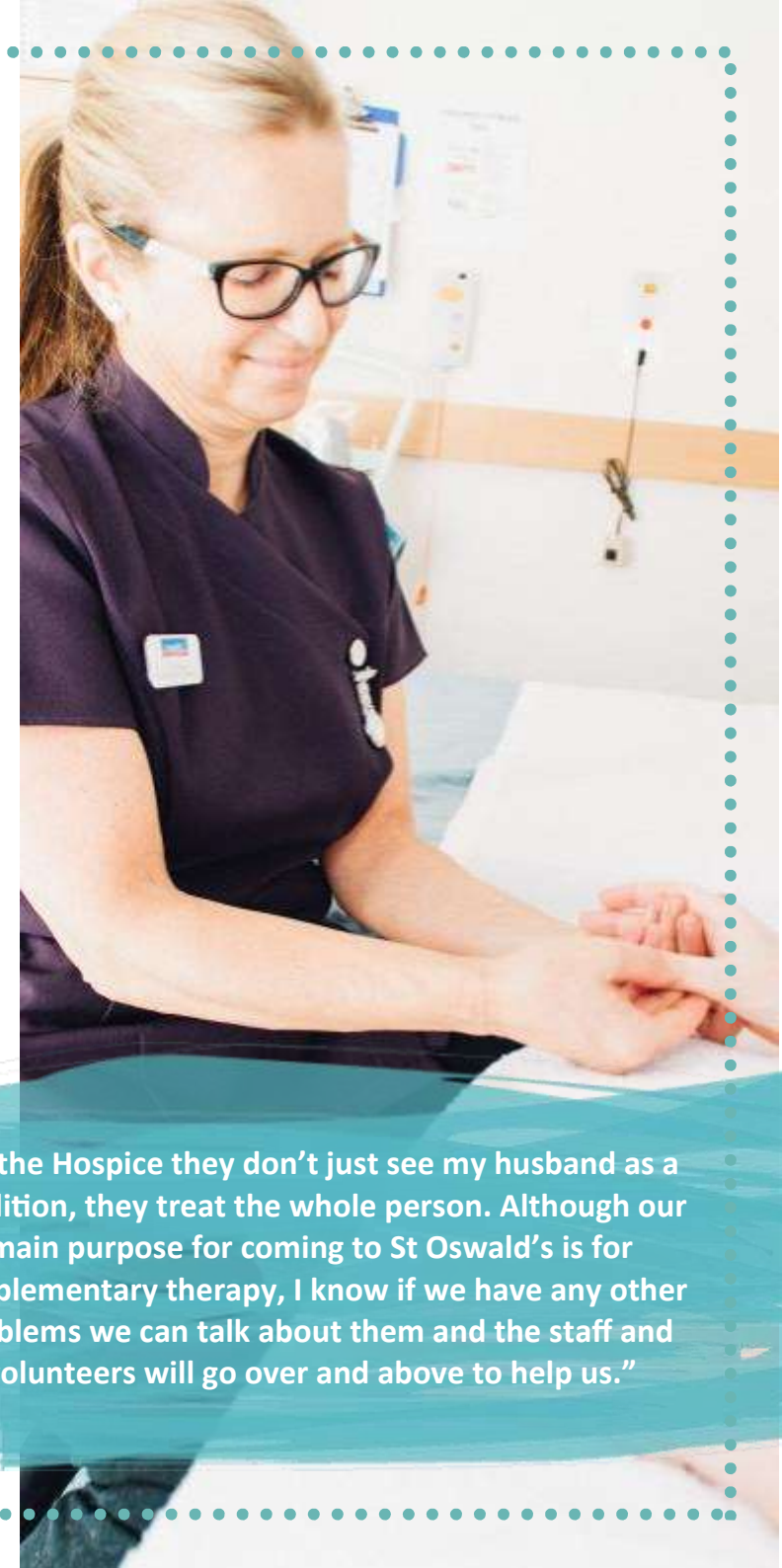
### Acupuncture

Our team of physiotherapists offer acupuncture to St Oswald's patients. Acupuncture can be used to relieve pain, aid relaxation, reduce muscle tension and help manage tension and sweats.

### Cognitive Behavioural Therapy

We offer Cognitive Behavioural Therapy (CBT) to patients who have ongoing feelings of anxiety, low mood, anger or panic as a result of their life limiting condition.

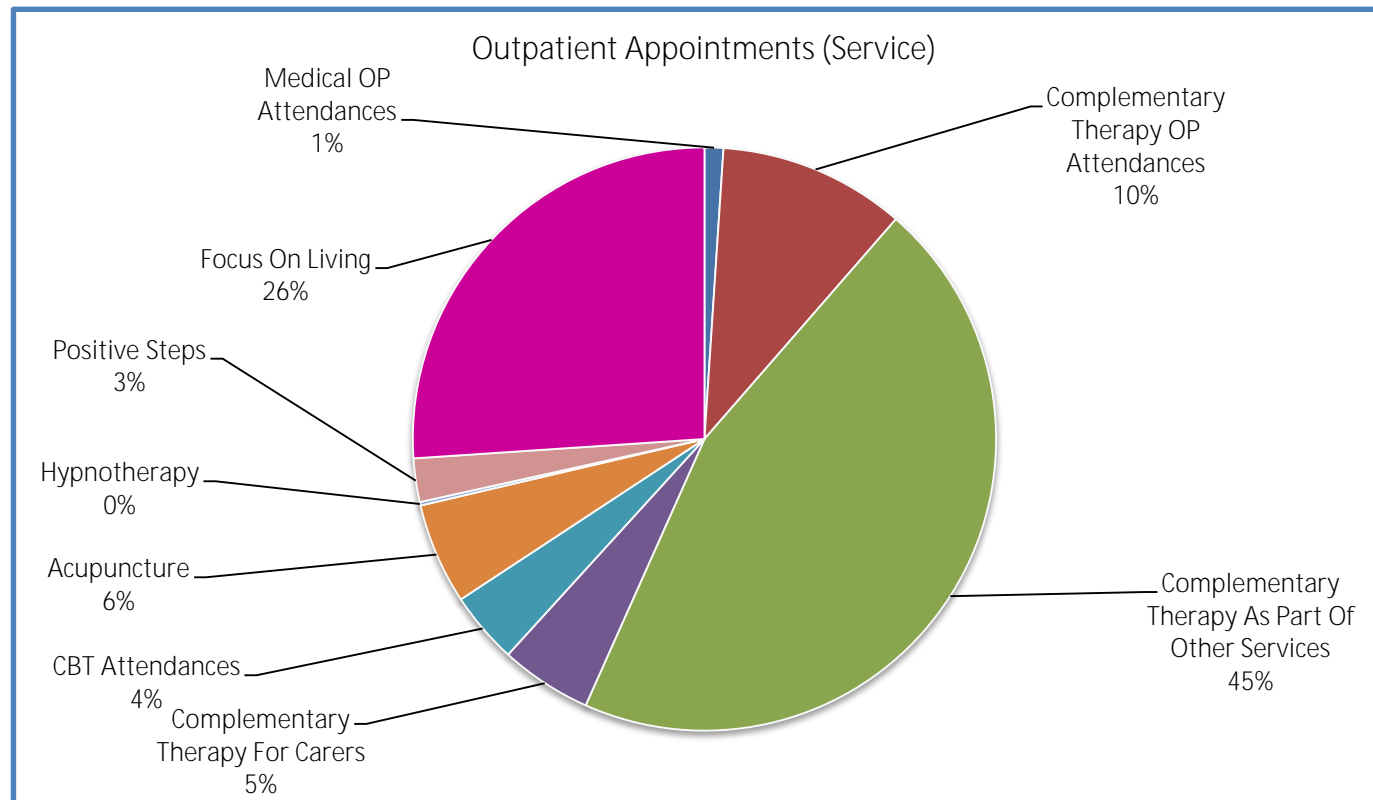
CBT helps our patients to change the way they think about themselves, their situation and the future. It is designed to help patients learn effective ways of dealing with difficulties relating to their condition, and can help when adjusting to and coping with pain and symptoms. Sessions are provided to patients by one of our Consultants.



*“At the Hospice they don't just see my husband as a condition, they treat the whole person. Although our main purpose for coming to St Oswald's is for complementary therapy, I know if we have any other problems we can talk about them and the staff and volunteers will go over and above to help us.”*

## Outpatient activity last year...an overview

CCG	Medical OP Attendances	Complementary Therapy OP Attendances	Complementary Therapy As Part Of Other Services	Complementary Therapy For Carers	CBT Attendances	Acupuncture	Hypnotherapy	Positive Steps	Focus On Living	Total
NHS North Tyneside CCG	7	24	85	16	10	4	0	5	49	200
NHS Northumberland CCG	3	43	279	15	26	7	2	5	121	501
NHS South Tyneside CCG	0	0	3	0	0	0	0	0	0	3
NHS Newcastle Gateshead CCG	5	91	327	46	25	75	0	27	230	826
NHS Sunderland CCG	0	0	0	0	0	0	0	0	0	0
Other CCG	1	1	1	1	0	0	1	0	0	5
<b>Total</b>	<b>16</b>	<b>159</b>	<b>695</b>	<b>78</b>	<b>61</b>	<b>86</b>	<b>3</b>	<b>37</b>	<b>400</b>	<b>1535</b>



## Lymphoedema Service

Recognised as a national centre of excellence in Lymphoedema management, St Oswald's is the largest specialist Lymphoedema service provider in the North East.

As we've provided Lymphoedema care consistently for more than 25 years, we are specialists in our field and we regularly treat the most complex, severe cases.

Our senior Lymphoedema practitioners also play a leading role in clinical education in the North East. We are working in partnership with Northumbria University to develop accredited training modules in assessment and management of Lymphoedema.

We treat patients with cancer-related Lymphoedema, those with oedema as a symptom of their progressive disease and patients with non-cancer related Lymphoedema.

A large number of patients have complicated Lymphoedema, requiring intensive treatment, symptomatic of the specialist service we provide.

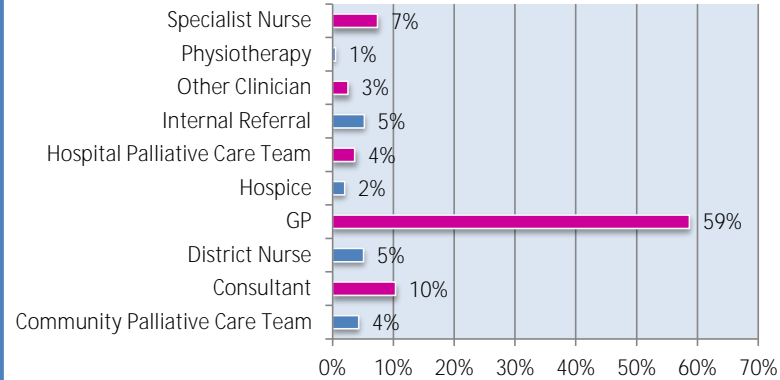
We have Keyworkers trained in-house to care for more routine cases, through to specialist nurses for the most complex care. We also have specialist medical input available.

All patients are cared for on a pathway approach, covering assessment, treatment and planned review and discharge. Our pathways mirror the International Lymphoedema Framework Best Practice Consensus Document (2006).

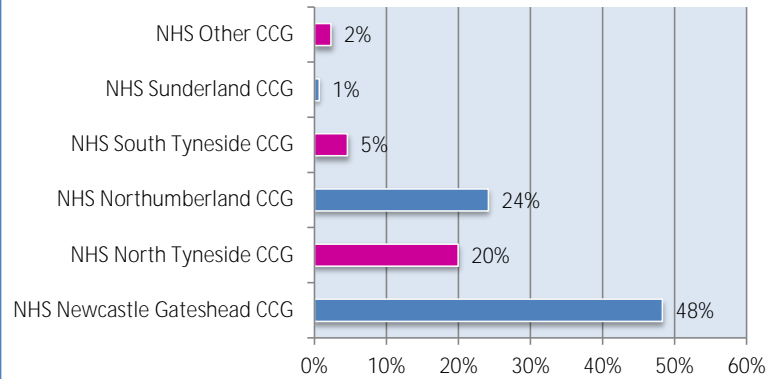
Over recent years we have developed a hub and spoke model of care, where patients with mild and uncomplicated Lymphoedema from Gateshead, Morpeth, North Tyneside are treated in their locality, whilst patients requiring specialist care receive treatment on site at the Hospice. Following on from a one year pilot in South Tyneside in 17-18, a new contract has been agreed for two years with South Tyneside CCG, to provide a specialist Lymphoedema service. This will be an outreach clinic based in South Shields.



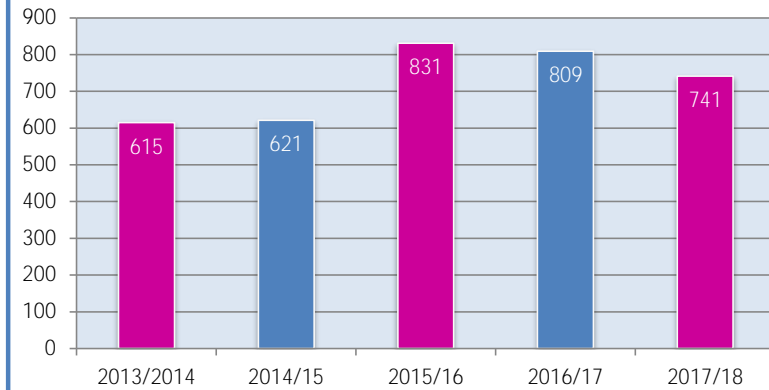
Lymphoedema Referrals (Source)



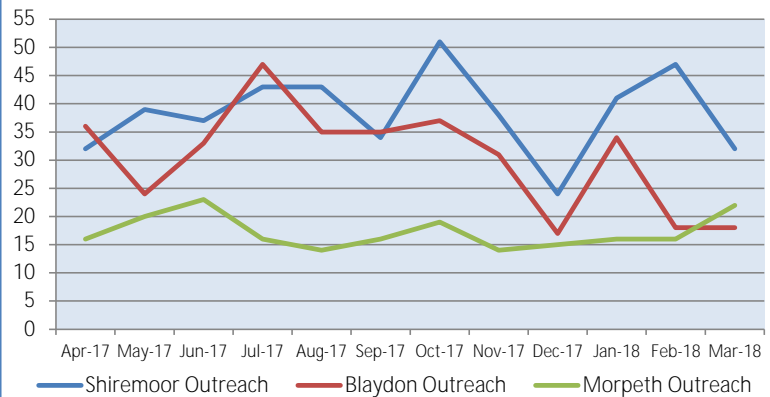
Referrals (CCG)



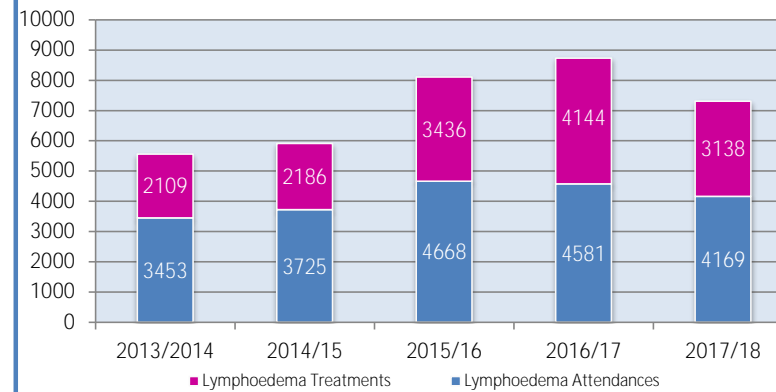
Lymphoedema Referrals



Lymphoedema Outreach Attendances



Lymphoedema Attendances (Including DLT/MLD)



## 24 hour Palliative Care Telephone Advice Service

Working in conjunction with Marie Curie Cancer Care, we run Hospadvice, an out of hours telephone advice service available for health and social care professionals caring for adult patients from Northumberland, North of Tyne and Gateshead with palliative care needs.

Calls are answered by one of the doctors or qualified nurses on our inpatient unit. Hospadvice offers access to advice on medical, clinical and signposting options.

Last year, **366** phone calls were received by St Oswald's from health care professionals to our adult services palliative care advice line.

We also offer a paediatric palliative advice line, for health care professionals in the region caring for children and young people with advanced, deteriorating or progressing conditions or are in need end of life care.

This is supported by some of our senior Palliative Care medical team in collaboration with a Consultant Paediatrician at the Great North Children's Hospital .





## Children and Young Adults Service

We provide specialist short breaks and palliative care to babies, children and young adults, aged from 0 to 25, with progressive, life-shortening conditions. We also provide end-of-life care. Specialist, medically-supported care is provided, 24 hours a day, seven days a week.

Our team of skilled staff provide residential short breaks to children and young adults from across the region.

Up to six children and young adults can stay at any one time in our relaxed, home-from-home environment.

Children and young adults from Northumberland, Newcastle, Gateshead, North Tyneside, South Tyneside, Sunderland or Durham City, Chester-le-Street and Derwentside can benefit from short breaks at St Oswald's.

There is an assessment and referral pathway that has been agreed with health and social care colleagues and ourselves within each area.

We work closely with colleagues at the Great North Children's Hospital.

### Caring for children

Children staying with us can enjoy a range of activities such as: sensory play, music therapy, arts and crafts, baking, bowling and the cinema. Teenagers benefit from their own living area – complete with games consoles, wide screen TV and PC's.



“Because of my condition, I am in an electric wheelchair all day, and I need help with things like administering medication. My Mam helps me a lot so when I'm at St Oswald's it means she can have a rest from looking after and supporting me. It benefits me coming to the hospice as it gives me independence away from my family.”

## Young adults

As well as residential short breaks, we now also offer day care for young adults, two days a week. In addition, our Young Adults Social Group remains very popular, which offers a range of empowering activities and a chance to socialise. Young adults staying at St Oswald's tell us how much they value independence and the chance to spend time with peers.

## Family support in our Children and Young Adults Service

At St Oswald's we are committed to providing services for the whole family. Our care team offer confidential 1-1 support to parents and we also strive to bring families together.

To support families to benefit from peer support we facilitate a 'parents group' who meet regularly at the Hospice. The sessions give parents of a young person we care for an opportunity to talk in a safe and supportive environment with people who share similar experiences

For families wishing to stay with us, we offer four en-suite bedrooms, a bathroom and a lounge area with kitchenette. Parents can also benefit from our free complementary therapy service.

As we know that brothers and sisters of children with chronic conditions can feel forgotten, we offer dedicated support for siblings too. Each year we run two 'Sibz Days' for brothers and sisters of children who stay with us for short breaks. Led by our care team, Sibz Days involve sharing feelings and experiences and expressing them in different ways – including art, crafts and music.

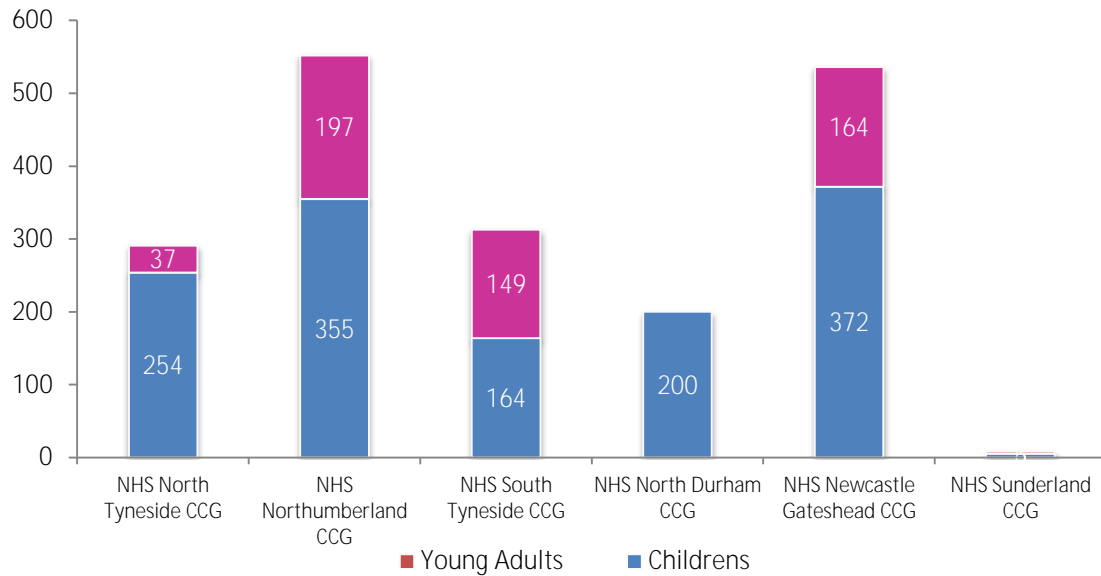
Children get the chance to have fun, make new friends and even play with medical equipment that their brother or sister may use, in a safe environment.

If a child dies at St Oswald's, their own home or in hospital, we are also here to provide ongoing, bereavement support to families.

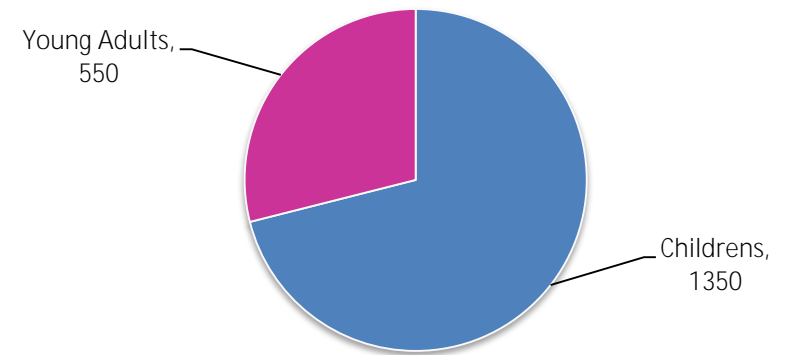


**"The Hospice offers me time to have a break and recharge my batteries whilst knowing that my daughter is safe and comfortable. She loves being at the Hospice but for me it's more than that, it's about the support we receive. When we walk through the door, the first thing we get is a hug and a coffee."**

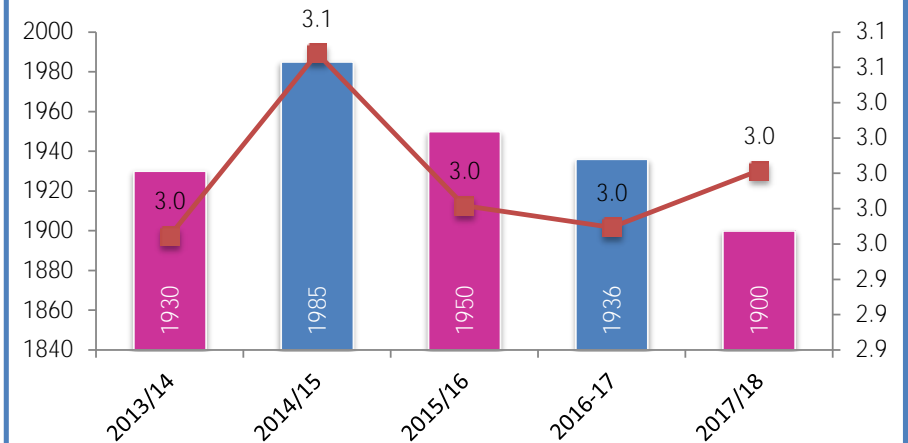
Total Nights (CCG)



Children/Young Adults Bed Nights



Children & Young Adults Occupied Nights/Avg LOS



### Last year...

- **51** children and their families benefited from our Children's Service.
- A further **15** young adults were cared for at St Oswald's.
- **16%** of children staying were aged between 0-3 years old, **27%** 4-6 Years Old, **24%** 7-9 Years Old, **16%** 10-12 Years Old, **6%** 13-15 Years Old and **12%** 16-18 years Old.
- **633** admissions, **1,900** bed days were occupied with a **87%** occupancy rate.
- The average length of stay is **3** nights per visit for Children & **4** nights for Young Adults.

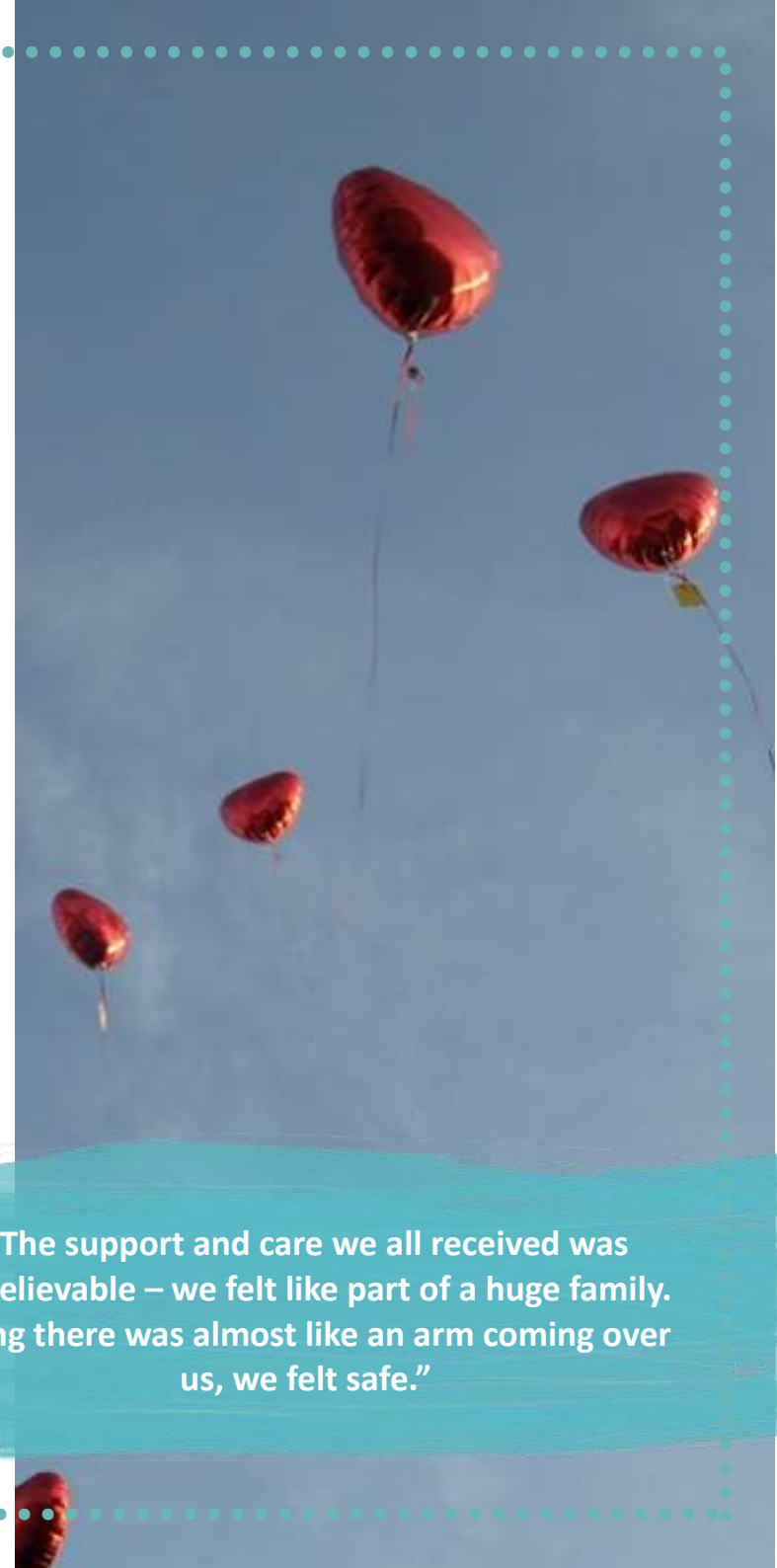
"Thank you so very much for looking after myself and my family when we weren't quite up to looking after ourselves, you helped us through a difficult time. We think you are truly amazing!"

## Carer and Bereavement Support

- Our services to carers include complementary therapy, carers drop-in sessions, group sessions and one-to-one support.
- We also offer a range of support services to bereaved individuals and families on a one-to-one basis and in groups.
- Our one-to-one service is available onsite, over the telephone or can be held in the comfort of a patient or carer's home.
- Group sessions are usually held at St Oswald's, where you have the chance to share feelings and experiences in a warm and welcoming setting – with others who understand.
- We also hold 'Ozzy Days' for bereaved children aged from 5 to 15 whose parent, sibling or other loved one has received care from St Oswald's.
- The team at St Oswald's are also working collaboratively with CHUF to provide bereavement support services for families accessing the Children's Heart Unit at the Freeman Hospital.
- The Bereavement Team also provide training to health professionals and teachers to enable them to support individuals more effectively where this is more appropriate.

### Activity 2017-2018

- **44** Referrals.
- **70** individual client registered with service throughout year.
- **269** Face to face contacts
- **34** Telephone contacts.
- **3** children's group sessions held in August 2017 with an **89%** attendance rate.



**“The support and care we all received was unbelievable – we felt like part of a huge family. Being there was almost like an arm coming over us, we felt safe.”**

## Patient Feedback...an overview

In 2017-18 we made the decision to stop sending out clinical postal surveys in favour of a simple feedback form including the NHS friends and family test, which is available around the Hospice and can be completed online. This decision was made to receive more relevant feedback from service users.

In addition, we will continue to use focus groups more routinely to gather more qualitative information in a more specific way when considering service developments or redesign.

Feedback forms give service users the option to: comment on any good experience/what could be improved; have their say on whether they would recommend us to family and friends (in line with the NHS friends and family test); and rate the care provided at St Oswald's.

There are 'feedback boxes' in the Hospice so that people can submit their feedback using these forms anonymously.



## Patient Feedback...an overview

### You said, we did

Here's some suggested improvements and feedback that we have received this year.

Feedback	Action/Comment We did...
You said... It would be good if we had better hinges on doors in our Adult Unit, as it can be quite noisy when a patient is trying to sleep.	We did... We check doors in the Hospice on a regular basis and will make sure they are on our maintenance check sheets
You said... That nothing compares to the care here and additional beds would alleviate the pressure on families who are going through a difficult time	We did... One of the workstream groups as part of our 10 year strategy, Vision 2025, aims to open the remaining beds that aren't currently open on our Adult Inpatient Unit.
You said... You were apprehensive prior to coming to our Lymphoedema Clinic but you were greeted so kindly, offered a drink and made to feel welcome	We did... We passed your feedback to our Lymphoedema Team who are very grateful for the feedback!
You said... It would be good to have a distraction in the waiting area to help pass the time while waiting for transport.	We did... A rolling TV presentation is now available in the waiting room of our Outpatients Clinic for people to watch when they are in the waiting room.
You said... Our Whitley Bay book shop is dangerous for book worms and that our volunteers are always so cheerful and welcoming too!	We did... We passed on your lovely comments to our Retail Team. Thank you!

## Patient Feedback...an overview

The patients gave very positive comments, for example:

“St Oswald’s nurses and the volunteers are fantastic. I go there for treatment, for my legs. Every day for two weeks at a time, the nurses are so kind and considerate, they make the treatment bearable, they brighten your day, always have a good word to say and make you laugh along the way. They are more like friends really.”

“Compassion and skill go together and the willingness simply to “be there” alongside the individual should never be underestimated. You did that for my sister and those who loved her, demonstrating the person centred/ family centred care. Thank you.”

“The staff are second to none, they look after your loved ones with care and compassion. They can make you smile when you feel down, if you need someone to talk to they are there for you.”

### Feedback Bank

Since the launch of the feedback bank there have been **440** posts onto the Feedback Bank, which includes any feedback received through social media, suggestions boxes and comments books. A summary of the type of feedback is shown below, and as can be seen the vast majority is a thank you or positive comments (**51%**).

Where negative comments are made, the information is forwarded immediately to the department manager and a response requested, which is updated on the feedback survey should the individual choose to go back and look.

Type Of feedback	2013	2014	2015	2016	2017	2018	Grand total
Constructive criticism		9	11	7	5	8	40
Negative feedback	3	25	20	9	4	6	67
Neutral	2		3	3	3	8	19
Positive feedback	18	54	37	11	17	54	191
Suggestion		17	15	6	4	17	59
Thank you	5	15	13	6	12	13	64
<b>Grand Total</b>	<b>28</b>	<b>120</b>	<b>99</b>	<b>42</b>	<b>45</b>	<b>106</b>	<b>440</b>

## Patient Feedback...an overview

### Focus groups

In July 2017 we held a focus group with approximately 12 patients who currently access or have been discharged from our Lymphoedema Service.

The reason for holding the focus group was twofold: we wanted to find out about patient experiences of self-care; and secondly, the way in which commissioners fund Lymphoedema services in the future may change and we'd like to gather as much feedback and information in preparation for this. The purpose of the focus group was to help us to tailor services to better meet the needs of people living with lymphoedema.

At the focus groups, which were led by independent facilitators, we asked patients about:

- their experiences of care before attending St Oswald's
- how they found out about the service at St Oswald's and their thoughts on it
- experiences of care since being discharged
- what information we can provide to help patients to better self-care, and what format they'd prefer to receive this

A survey was also posted and we received 35 responses to this.

Feedback from the focus group has helped us to shape a piece of work about how we can better support patients to manage their own condition.

### The patients gave positive comments, for example:

"The style of communication is like being with an old friend."

"St Oswald's said I haven't got 'fat ankles' and put their arms around me. Without them, I wouldn't have the life I've got now."

"Within two weeks of receiving bandaging treatment my legs were amazing."



# Staff and Volunteer Feedback

The views of staff and volunteers are actively sought via line managers, the feedback bank and surveys. Staff surveys are taken on a rolling programme with a different focus. In 2017 the focus was 'Integrity' and 'The Voice'.

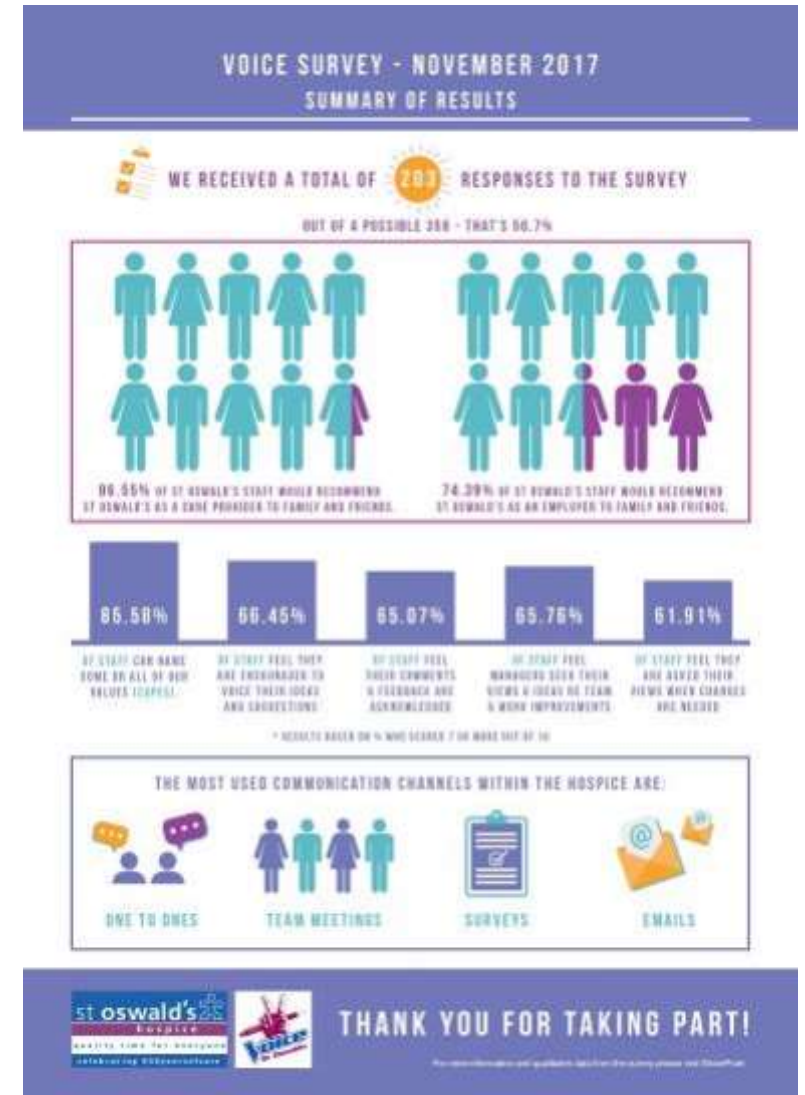
In 2017 we shared results from the Workforce Equality Survey. Staff reported experiences of bullying or abuse either from patients, relatives or the public in the last 12 months and 9.4% reported the same but from other members of staff.

Our Hospice Management Team and People and Comms Group have fully looked into the results from the survey and any actions that need to be carried out. Because the survey was anonymous we cannot identify or act on specific incidents, however we plan to:

- Reinforce the fact that St Oswald's has a no tolerance approach to bullying and harassment through a variety of ongoing communications with staff and volunteers.
- Equality and Inclusion will form part of our new People Strategy 2018-2021.
- Discuss results with line managers and ensure Line Managers know what actions to take if necessary.
- Encourage staff to speak up and talk to someone if they experience bullying or harassment.
- Ensure staff are aware of the support available.
- Ensure staff are aware of training available and our equality policy.
- We have also introduced a new role within the organisation. Leigh Marrs (Head of Learning and Organisational Development) will be St Oswald's Bullying and Harassment Advisor.

Staff have recently undertaken the Workforce Equality Survey again and we will be analysing results.

The results of all staff and volunteer surveys are reviewed by the People and Communications Group who take a lead on developing any necessary actions plans as a result of the feedback obtained.



## We educate

We are a leading provider of specialist palliative care education in the North East. We have been providing first class quality care for almost thirty years and are renowned locally, regionally and nationally for our expertise. Our role as an educator includes:

## Medical Specialty Training

We offer postgraduate training for Specialty Registrars. Dr Andrew Hughes, Consultant in Specialist Palliative Medicine oversees our doctors training programme.

## Northern GP training programme

We lead the palliative care sessions Northern Deanery GP training programme. These take place twice a month at Coach Lane campus at Northumbria University and are led by our consultants and specialty doctors. GP colleagues from Teesside also visit St Oswald's for a week each Autumn to gain an overview and update in specialist palliative care.

## Student placements

Fourth year medical students undertake a six week placement twice a year, supervised by one of our consultants.

Third year LTC students (Long term Conditions) attend teaching sessions at the Hospice for two and a half days a week, every month from January to June each year. Placements are also provided for paramedic and nursing students across services.



## Corroborative statement from Newcastle Gateshead, Northumberland and North Tyneside Clinical Commissioning Groups (CCGs) for St Oswald's Hospice Quality Accounts 2017/18

As commissioners, Newcastle Gateshead, Northumberland and North Tyneside Clinical Commissioning Groups (CCGs) are committed to commissioning high quality services from St Oswald's Hospice and take seriously their responsibility to ensure that patients' needs are met by the provision of safe, high quality services and that the views and expectations of patients and the public are listened to and acted upon. The CCGs welcome the opportunity to submit a statement on the Annual Quality Account for St Oswald's Hospice.

The CCGs can confirm to the best of their ability, the information provided within the Annual Quality Account is an accurate and fair reflection of St Oswald's Hospice performance for 2017/18. The CCGs would like to provide the following statement:

The CCGs continue to meet with St Oswald's Hospice on a quarterly basis via the quality and contract review meeting to monitor, review and seek assurance on the quality of services provided. St Oswald's Hospice provide a comprehensive and detailed quarterly quality report which includes detail about the quality of services provided and the improvement initiatives underway. The report also includes examples of lessons learned and actions taken where for example incidents are reported or complaints received.


The 2017/18 Quality Account clearly articulates the future direction and aspirations of St Oswald's Hospice in an easy read format. It is well written, with a strong focus on the importance of collaboration with and engagement of others in delivering high quality end of life care.

The CCGs would like to congratulate St Oswald's Hospice on the continued progress they have made in implementing outcome measures using the Outcome Assessment and Complexity Collaborative tool (OACC) in the Day Hospice and Adult Inpatient Unit. It is noted that further outcome measures will be implemented when the Palliative Care Outcome Scale (IPOS) and Views on Care have been fully embedded in day care and Adult Inpatient Unit.

It is pleasing to note that funding arrangements for the NHS Lymphoedema service have been finalised and agreed for 2018/19; including a multi-disciplinary team approach which has been agreed with Northumberland CCG to provide an outreach clinic for patients with complex conditions in partnership with Northumbria Health Care NHS Foundation Trust. St Oswald's Hospice has been awarded a new two year contract by South Tyneside CCG to provide a specialist Lymphoedema service following a successful pilot. It is pleasing to hear that the feedback from the focus group and the postal survey responses have helped to tailor services to better meet the needs of people living with Lymphoedema.



**Dr Neil Morris**  
Medical Director



**Chris Piercy**  
Executive Director of Nursing, Patient Safety & Quality

For and on behalf of NHS Newcastle Gateshead Clinical Commissioning Group  
NHS Northumberland Clinical Commissioning Group  
NHS North Tyneside Clinical Commissioning Group



[www.stoswaldsuk.org](http://www.stoswaldsuk.org)

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