



TREETOPS
HOSPICE CARE
where every day counts

2017-2018

Quality Account

***“The care and service was second to none,
my family will be forever indebted to you”***

Carer of a Hospice at Home patient, 2017

Reporting period: 1 April 2017 - 31 March 2018

Contents

Chief Executive’s Statement

Part 1: Looking back at what we achieved in 2017 – 2018.....

Part 2: Mandated Statements

Part 3: Quality Overview

Part 4: Priorities for 2018–2019

NHS Southern Derbyshire Clinical Commissioning Group (CCG)
Statement



Chief Executive's Statement

On behalf of the Board of Trustees and the Senior Management Team, I am delighted to present Treetops Hospice Care's 2017-2018 Quality Account.

Treetops Hospice Care is an independent charity that last year provided palliative care and support to 1,827 people across Southern Derbyshire and Nottinghamshire.

Firstly, it is reassuring to be able to confirm that the priorities for care stated in last year's Quality Account have been successfully achieved with positive outcomes.

When promoting the hospice, we are often asked the question "how many beds do you have?" The response we give is that last year alone our nurses cared for 1,293 patients in their own beds within their own homes. In fact, our five-year clinical strategy has focused mainly on the growth and development of our Hospice at Home service which has reached a record level of service delivery by providing nearly 42,000 hours nursing respite care. However, the Board of Trustees have assessed the need within the community for an independent hospice in-patient unit and have decided to proceed by seeking planning permission to build a twelve-bedded unit to complement our other services within our Risley Campus. If everything goes according to plan, we expect to receive our first patients during spring 2020.



At the beginning of 2018, Treetops Hospice Care came sixth in the Sunday Times Best Not for Profit Organisations to Work For. This was the second year we had entered this employee survey, with an improved score, which reflects the culture of the organisation and how staff value working for us.

Across the whole spectrum of our services, patients' and their significant others' care is based upon need and is independent of age, disability, gender reassignment, marriage and civil partnership, race, religion or belief, sex or sexual orientation. All services provided by

Treetops Hospice Care are free of charge and not means tested due to the collaboration of funding between the NHS and the generosity of our local community.

To conclude, I would like to acknowledge our dedicated and committed clinical team for their contribution to Treetops Hospice Care's success. I would like to thank them all for their continued commitment to providing excellent patient and family care along the End of Life care pathway. I also note the significant contribution made to this report and to the standards of care that we have achieved by our Director of Clinical Services, Philippa Shreeve.

I am responsible for the efficacy of this report and its contents. To the best of my knowledge, the information reported in this Quality Account is accurate and a fair representation of the quality of healthcare services provided by Treetops Hospice Care.



George Cameron, Chief Executive, June 2018

What is a Quality Account?

Producing a Quality Account is a requirement of the Health Care Act (2009) and according to the Department of Health, 'Quality Accounts aim to enhance accountability to the public and engage the leaders of an organisation in their quality improvement agenda'.

The Quality Account should provide information about the quality of the services that the organisation delivers and their main purpose is to encourage providers to take a robust approach to quality.

All providers of NHS healthcare services, including independent organisations such as Treetops Hospice Care, should produce a Quality Account and in doing so each provider, led by their Board, is committing to improve the quality of care it delivers locally and invites the public to hold them to account.

The Quality Account covers two main areas:

- 1) A review of how we performed last year, covering three main areas of quality; patient safety, patient experience and clinical effectiveness
- 2) A set of key priorities for improvement next year and plans for how we aim to achieve that improvement

The public, patients and other interested parties will use the Quality Account to understand:

- What an organisation is doing well
- Where improvements in service quality are required
- What the organisation's priorities for improvement are for the coming year

- How the organisation has involved people who use their services, staff and others with an interest in their organisation in determining these priorities for improvement

Part 1: Looking back at what we achieved in 2017 – 2018



The hospice was last inspected by the Care Quality Commission (CQC) in April 2016. The area of focus was the Hospice at Home service. The final report awarded the rating of “Good” across the five domains of Safe, Effective, Caring, Responsive and Well Led. The exemplary report can be found on Treetops’ website and on the CQC website.

This year the responsibility for registered manager status transferred from Julie Mehigan (Day Care Manager) to Philippa Shreeve (Director of Clinical Services).

The priorities that we set for 2017–2018

1. To review our Day Care Services portfolio

The priority for this year was to undertake a full review of the model of Day Care and to explore how other hospices are structuring their offer within the remit of last year of life. For some time there have been concerns that the current social model does not meet the needs of younger guests and those seeking wellbeing and education.

A full review was completed over the year and was complemented by a Day Care staff away day to review the findings and explore future options. A service reconfiguration paper was produced and taken to the April 2018 clinical sub-committee. This was approved for presentation to the May 2018 full board and approval was granted for a full restructure of the Day Care services.

2. To continue to work collaboratively with our NHS colleagues to provide outpatient clinics for patients who are no longer responsive to active treatment and require palliative care

The priority for this year was to expand the respiratory clinical model to include patients with advanced COPD and to extend the availability of the Fatigue and Breathlessness (FAB) support group. This has been achieved and the FAB group now runs regularly throughout the year.

The Southern Derbyshire CCG also recommissioned respiratory services during the year adopting a 'place based' model of care and the hospice has been able to support this local model with support from our Clinical Nurse Specialist.

3. To continue to develop our Hospice at Home Service

We set a target to increase our Hospice at Home provision to 40,000 hours and during 2017-2018 the team actually delivered 41,898 hours.

We undertook to provide regular supervision for all the clinical team and this has been successfully introduced. Each team member now receives 3 group sessions and one session of 1:1 supervision across the year. Verbal feedback on this development has been very positive but a formal evaluation is now being undertaken across the staff group.

4. To work in partnership with NHS England to deliver the pilot project on Personal Health Budgets in End of Life Care.

Over the last year the Support and Information (S&I) service within Treetops Hospice Care has played a key role in the Personal Health Budget (PHB) in End of Life (EoL) care pilot project in conjunction with NHS England. Treetops Hospice Care was one of 5 national pilot sites across England.

This included:

- Running a series of workshops for staff across Southern Derbyshire CCG on person centred care, Personalised Support Planning and the use of PHBs at end of life.
- Providing ongoing support to community and hospital based staff on the completion of the personalised support plan.
- Developing close working relationships with Care Co-ordinators to facilitate appropriate case finding and supported early planning

- Work with BME communities to understand their needs around end of life and how we can support this cohort of patients to access PHBs
- Raising awareness of EoL PHBs with voluntary sector organisations and patient/carer groups

The Support and Information Clinical Nurse Specialist has now developed a structured tool for facilitating person centred conversations which is being developed in conjunction with Derby University.

5. To procure 'SystemOne' clinical data system

An application was submitted in February 2017 to the Derbyshire NHS Data and Information Board for support to facilitate the move from our existing clinical system iCare to SystemOne.

This system is widely used by local health care providers and it has been previously identified that this move would reduce 'risk' by improving communication and data sharing. Despite several delays a decision was finally taken in March 2018 to approve the application so deployment of SystemOne across the hospice will now commence in 2018.

6. To seek planning permission to provide an In-Patient service from our campus in Risley, Derbyshire, with the view to offering twelve independent hospice beds by spring 2019.

During 2017-18, the clinical team worked closely with architects and planning consultants to help shape the thinking and design of an In-Patient facility. A series of public consultation sessions were held with local residents to review the outline plans. A planning application has now been submitted to Erewash Borough Council.

Part 2: Mandated Statements

Statements of assurance from the board

Within a submitted Quality Account, all providers must include the following statements, despite some of them not being applicable to hospice services.

Review of services

From 1 April 2017 to 31 March 2018, Treetops Hospice Care was commissioned to provide Day Care and Hospice at Home services to three CCGs in Derbyshire and four CCGs in Nottinghamshire.

Counselling and Emotional Support for those who have been bereaved and support for people who are facing, or supporting someone who has been diagnosed with a life-limiting illness are commissioned by the three Derbyshire CCGs.

Treetops Hospice Care raises 68% of the funding for these services through retail outlets, lottery and fundraising. The remaining 32% comes from the NHS via the above CCGs through block grant and cost and volume contracts.

Treetops Hospice Care offers a Support and Information Service, Complementary Therapy and Art Therapy. We also host outpatient clinics for the Royal Derby Hospital. The clinics are run by a Clinical Nurse specialist and two consultants and support patients with non-malignant respiratory diseases and palliative care needs.

Our Clinical Services are governed by the Clinical Sub-committee of the Board of Trustees, who meet quarterly and receive individual service reports, which enable them to review the management and quality of care provided by the hospice. The reports are then submitted to the whole Board of Trustees at their meetings.

Participation in Clinical Audits

During 2017–2018, Treetops Hospice Care did not participate in any national or local clinical audits.

The regulations require providers to complete the following two statements:

1. The reports of **zero** national clinical audits were reviewed by the provider in **2017-2018** reporting period and **Treetops Hospice Care** intends to take the following actions to improve the quality of healthcare provided [**none**].
2. The reports of **zero** local clinical audits were reviewed by the provider in **2017-2018** reporting period and **Treetops Hospice Care** intends to take the following actions to improve the quality of healthcare provided [**none**].

Research

During 2017–2018, the hospice was not involved in any research projects.

NHS Quality Improvement and Innovation Goals

Treetops Hospice Care has quality requirements set by the Derbyshire CCGs:

- All quality requirements for 2017-2018 were met (Quality Schedule available)
- To be an active participant in the Workstream 4 (End of Life and Care Home) innovation and improvement initiative and the Derbyshire Sustainability and Transformation Programme (STP) End of Life Care Group.

Part 3: Quality Overview

Activity data across the year reveals the following trends

Day Care and Wellbeing Service

Day Care Data

	2017 - 2018	2016 - 2017	
	Treetops Hospice Care	Treetops Hospice Care	Percentage Change
Total number of patients	177	211	-19%
Total number of new patients	65	99	-34%
% New patients	58%	47%	23%
% New patients with a non-cancer diagnosis	58%	63%	-8%

Wellbeing Day Data

This year saw the first full year of the Monday Wellbeing Day. In 2016-17, the Wellbeing figures were incorporated into the total Day Care figures.

	2017 - 2018
	Treetops Hospice Care
Total number of patients	53
Total number of new patients	37
% New patients	70%
% New patients with a non-cancer diagnosis	70%

The total number of patients supported by the two Day Care services during 2017-2018 has increased by 9%. The number of new patients has increased by 3%. The number of patients that we support with a non-cancer diagnosis, has increased by 103%.

Hospice at Home Service

Hospice at Home Data

	2017 - 2018	2016 – 2017	
	Treetops Hospice Care	Treetops Hospice Care	Percentage change
Total number of patients	1293	1237	4%
Total number of new patients	1156	1081	7%
% New patients	89%	87%	2%
% New patients with a non-cancer diagnosis	26%	25%	1%
% all patients aged 85 and over	31%	31%	0%
% Home deaths	90%	89%	1%

The prognosis criteria for referral to our Hospice at Home service is six months. This year has seen an increase of 1% for the number of patients who died at home to 90%. National End of Life Care Intelligence Network figure show that 23% of deaths occurred in people's own home and 22% of deaths occurred in care homes, that is residential and nursing homes.



Counselling and Emotional Support

Adult, Children and Families Bereavement Service Data

	2017 - 2018	2016 - 2017	
	Treetops Hospice Care	Treetops Hospice Care	Percentage change
Total service users	532	514	3.5%
% New service users under 16 years	113 (31%)	22%	9%
% New service users 16-24 years	18 (5%)	8%	-3%

Our commissioned Bereavement Support is unusual in hospice terms as we accept referrals from anyone in the community regardless of any previous association with Treetops Hospice Care. We also provide Bereavement Support to children and young people under 18 years old and this service has seen steady growth over the year.

An area of counselling and support work that we continue to develop has been with people dealing with life-limiting illness, either as the adult with the illness or the patient's family (of any age).

Life Limiting Illness Counselling Support Data

	2017 - 2018	2016 - 2017	
	Treetops Hospice Care	Treetops Hospice Care	Percentage change
Total service users	76	71	7%
Total number of new service users	55	53	3%
% New service users	72%	74%	-2%

Again, this is not only for people who have accessed end-of-life care but is for anyone in our community facing life-limiting illness.

In 2013, the Bereavement Services Association and Cruse Bereavement Care Services introduced the Bereavement Care Service Standards as a national evaluation tool. This tool has been now endorsed by the National Bereavement Alliance, to which Treetops Hospice Care is affiliated, and sets three levels of achievement within seven separate standards. These are Planning, Awareness and Access, Assessment, Support and Supervision, Education and Training, Resources, and Monitoring and Evaluation.

Having initially worked to achieve the highest level across five of the seven standards we are now confident that we are achieving the highest level across all seven of the standards. Work has been undertaken nationally by the Association of Bereavement Service Co-ordinators to develop a new service audit tool which

incorporates the Bereavement Care Service Standards. This is being launched in July and in future we will be able to evaluate our service using the tool.

What others say about us

1. Care Quality Commission

Treetops Hospice Care is registered with, and regulated by, the Care Quality Commission in accordance with the Health & Social Care Act 2008.

Our most recent inspection report dated 7 April 2016 is available on the CQC website and finds us meeting the standards and rating us “Good” in all five core areas inspected. The report can be found at: www.cqc.org.uk

2. What our patients and carers say about us

Day Care Service



Day Care Guest Evaluations

Our Day Care guests are surveyed quarterly on a rolling programme of questionnaires. A sample of the domains included:

Dignity, Safety and Privacy

Guests Voice No. 4 asks about dignity, safety and privacy and 21 Day Care guests completed the evaluation over a one week period.

Our aim is that our guests' privacy and dignity is maintained, especially during intimate procedures, that they feel treated as individuals, their needs are addressed, and that they find Day Care a safe and secure environment. The audit showed that 100% of our guests feel safe and secure in Day Care.

When asked if Day Care had been able to accommodate a quiet space, 62% responded yes always, but 10% said not often. Remaining guests replied not applicable. This may be due to a lack of space or that they felt the space offered was not a quiet space e.g. a quieter corner of Day Care or the gallery.

Your Care

We had 46 responses to the Guest Voice No. 5 which asks about their care and assessments.

We aim to monitor guest's clinical needs unobtrusively without detracting from the 'home from home' atmosphere we endeavour to provide and for guests to have confidence in our nursing staff.

Overall the results of this survey were very satisfactory with 100% of respondents saying they felt happy with their ongoing care and assessments.

Your activities in Day Care

We had 47 responses to the Guest Voice No. 6 which asks guests which activities they most enjoyed or valued doing in Day Care.

Here are the results of activities enjoyed and valued (the percentages from last year's results in brackets):

Activity	Percentage enjoy/value
Having a break from home	85% (93%)
Making new friends	91% (90%)
Meals	79% (86%)
Socialising	85% (80%)
Advice about health issues	59% (78%)
Giving relatives a break	83% (74%)
Chance to discuss problems	61% (74%)
Shop Trolley	57% (73%)
Quizzes	36% (72%)

Alcoholic drinks	59% (68%)
Hand massage	51% (66%)
The garden	49% (61%)
Singers, bands and entertainers	85% (61%)
Outings	34% (59%)
Crafts	44% (54%)
Learning new skills	34% (49%)
Games (boccia, curling, bingo etc.)	72% (49%)
Advice on daily activities	34% (42%)
Computer/ iPad/ Wii	0% (27%)
Potting plants	30%

Findings from this evaluation will be used to help inform the programme of activities included as part of the reconfiguration of the day care services.

Catering in Day Care

We had 38 responses to the Guest Voice No. 7 which asks guests about the quality of the food and catering service. 89% guests feel the quality of the catering service is good or very good and 84% guests think the quality and variety of food is good or very good.

“The volunteers are amazing as well as the staff”

“It’s near perfect as it possibly could be”

“Like to come here”

“I think everyone is very good at what they do”

Day Care Patient Quotes, Guest Voice, 2017-18

Complementary Therapy Service

As in previous years, all clients of the service who had completed a set of four CT sessions were sent an evaluation questionnaire. 39 forms were issued for in-house CT and 39 (100%) were returned. 10 forms were issued for community CT and 7 (70%) were returned. Clients in receipt of CT in the community are predominantly patients who are receiving care from our Hospice at Home service, and therefore in

the last six months of life, so as a result a smaller number of clients received the full allocation of four sessions. Despite this, the results of the evaluation clearly demonstrate that this service has great impact for those most at need within the home environment and at end of life.

Evaluation results show:

- 96% patients thought that the time between referral and first session was acceptable
- 98% patients said that they were given information about the available and appropriate therapies on their first visit
- 100% patients said that their therapist acted professionally at all times
- 100% patients said the environment in which therapies took place was satisfactory
- 100% patients found the Complementary Therapies beneficial



The evaluation forms returned to the service demonstrate that the Complementary Therapy service remains highly regarded and of great benefit to the holistic well-being of clients who access it. Many people found the benefits to include: alleviation of stress and anxiety, help with relaxation, relief of physical symptoms, help with sleep issues and was overall enjoyable.

'The treatment relaxed me very much – it helped me forget about my physical condition and other worries. It left me calm, totally relaxed and feeling happy and optimistic. A real benefit!'

'Helped tremendously with the side effects I get from my treatment for myeloma.'

'The massage really helps ease the aches and pains in my legs and neck from having chemotherapy and carrying baby.'

'Sleep problems are another symptom and the therapy helped a great deal.'

'During the session I was able to switch off completely, my head became completely vacant! The benefits post-therapy released tension physically but also gave a sense of well-being that wraps around you for the rest of the day. Truly amazing experience.'

Quotes from evaluations, 2017-18

Art Therapy Service



For this year's evaluations, the Art Therapy service has synchronised its evaluation forms with those of the Counselling and Emotional Support (CES) service. Given the Art Therapy service is very limited and so has too few feedback forms from which to draw any meaningful conclusions, it seemed more useful to merge the figures and look at both Therapeutic Services together (see below). There is one question on the Art Therapy evaluation form which asked about the specific value of Art Therapy as opposed to other talking therapies and the following comments were received:

'Through the use of images, I find it more helpful to discuss my concerns.'

'Cause I didn't feel awkward for an hour just looking at her, I had something to do.'

'I found it easy to image make and talk rather than just sitting and talking.'

'It was because the art I did helped me see and remember the things that this particular family member liked.'

Quotes from evaluations, 2017-18

Hospice at Home

Family or Carer Evaluation

Each year we send out a service evaluation to the carers of (1 in 4) patients who died under our care during the year.

148 evaluations were sent out between January and December 2017 to carers of patients who died under our care and 79 (53%) were returned.



Referrals are received from many sources but predominantly they come from health professionals with 47% from district nurses, 34% from Macmillan/Community palliative care nurses and hospitals referrals this year have plateaued at 9%.

Of those who returned the questionnaire:

- 90% thought that the referral to the service was timely
- 94% said that the amount of day time care provided was enough
- 90% said that the amount of night time care provided was enough
- 97% were totally at ease or comfortable about the way we cared for their loved ones

“We felt the carers were experienced and treated mum with dignity and respect.”

“The nurse sent was an ‘angel without wings’, we could not have wished for a better service”

“Full of admiration for this service, no improvements come to mind”

“The care and service was second to none, my family will be forever indebted to you”

“Exceptional care and support” “you took care of us all”

Hospice at Home - Carer evaluations, March 2018

Counselling and Emotional Support Service

All clients who finish receiving support during the year are asked to complete an evaluation of their experience.

Adults

183 evaluation forms were sent out and 88 forms were returned (48%):

- 98% said that the support they received had been helpful in their experience of bereavement.
- 98% said they were satisfied with how quickly the service was provided.
- 98% said they would recommend the service to other people.

Parents/Carers

75 evaluation forms were sent and 18 were returned (24%):

- 100% were happy or very happy with the speed of response to the referral.

- 83% reported a decrease in their level of concern about their child after the support had finished.
- 83% were happy or very happy with the extent to which the support had addressed their child's bereavement needs.
- 78% were happy or very happy with the number of sessions/length of support their child received.
- 100% would recommend the service to other people.



Children/Young People

75 evaluation forms were sent out of which 19 were returned (25%):

- 100% reported an improvement in their feelings after the support.
- 95% said the sessions had been helpful or very helpful.
- 90% said they would recommend the service to other people.

Life-limiting Illness

24 evaluation forms were sent out. 12 of these were in relation to work with adults and 5 (42%) were returned. The other 12 were in relation to work with children/young people and 6 (50%) of these were returned, 3 by children/young people and 3 by the parent/carer.

In view of the relatively low numbers the figures have been amalgamated:

- 100% said the support they had received was helpful.
- 100% were happy or very happy with the speed of response of the service.
- 91% said the number of sessions provided was just right.
- 100% said they would recommend the service to others.



'I worked through many different issues. I feel more connected to life and have lots of tools to help me in the future.'

'I have learnt so much about myself, made changes and know that it's 'ok' to feel sad, happy, angry sometimes.'

'Treetops gave this service very professionally. I cannot fault the lovely building or care given in any way whatsoever.'

(Bereaved adults)

'I've been able to open up about my feelings.'

'I'm a lot more confident with what I do.'

'It helped me understand what I was dealing with.'

(Bereaved children/young people)

'A great service, I cannot thank you enough for being there and supporting us. It has improved our family time a lot.'

'When X came back from her sessions she was a different child.'

'The sessions really helped X to deal with her frustrations and the sadness.'
(Bereaved parents/carers)

'I gained confidence, I learnt how to speak about/deal with anything bothering me.'

'It was helpful to just talk to someone who was not involved in our situation.'

'I now realize that dreams and thoughts are not reality.'
(Life-limiting illness clients)

Quotes from evaluations, 2017-18

What our staff says about the organisation

This year, for the second time, we took part in the Sunday Times 100 Best Not-for-Profit Organisations to Work for in the United Kingdom. This is the 18th year the survey has been held and it has become a high-profile event in the business calendar with accreditation to the Top 100 being a highly prestigious award.

Accreditation is a dual process with one part being an employee engagement survey and the other a company profile that reflects the organisation's approach to a variety of internal and external issues such as the environment and employee benefits.

76% of employees participated in the survey

- 81% of participating employees are positive about opportunities for personal growth.
- 83% of participating employees are positive about the leadership of Treetops Hospice Care.
- 80% of participating employees are positive about the relationship they have with their manager.
- 68% of participating employees are positive about pay and benefits.
- 85% of participating employees are positive about the relationship with their team.
- 83% of participating employees are positive about that Treetops Hospice Care gives back to the community.
- 72% of participating employees are positive about their work/home balance and personal wellbeing whilst working for Treetops Hospice Care.
- 95% of participating employees are positive about Treetops Hospice Care and are proud to work here.

This is a very encouraging result as Treetops Hospice Care scored positive in all aspects of Employee Engagement across every department.

The engagement of participating employees at Treetops Hospice Care was rated as extraordinary and makes us a Three Star company in the Sunday Times 100 Best Not for Profit Organisations listing. Our overall score improved on last year and we came a very creditable 6th in the Top 100.

This is, again, a very creditable achievement. We intend to continue to maintain and build upon our achievements and focus further on improved communication and opportunities for personal development.

Complaints and compliments

Complaints

During 2017–2018, we received three clinical service complaints. All incidents were investigated, documented and action taken if required. Feedback on the outcome and action was provided to the complainant.

Compliments

In addition to the positive evaluations of our services, we also received over 385 individual cards and letters of thanks to our full range of services during the year and 78% of our In-Memoriam donations came from the families and carers of those who were cared for by our services.

‘Your health care assistants and nurses are worth their ‘weight in gold’ and helped to make the last few months more bearable for us as a family’

‘Dad very much wished to remain at home and with your excellent team he was able to fulfil his dream.’

‘Your nurse was amazing and handled everything with such care and dignity and made an unbearable time that little bit easier.’

‘The support and care of your nurses in the last weeks of her life meant so much, giving us the rest we needed and ensuring she was well cared for and comfortable in her own home, just as she wanted.’

‘The work you do is tremendous and vital to all who need it’

Quotes from individual thank you cards and letters received during 2017-2018

Patient Safety Indicators

Patient safety is paramount to our services and all incidents are reported and logged. We ensure that every incident is assessed, relevant risk assessments reviewed, and any wider implications are considered, resulting in policy and training updates as identified.

We have a Health and Safety Committee, made up of staff and trustees, who meet quarterly and receive departmental reports. They review and drive forward the Health and Safety Action Plan and scrutinise all accidents and incidents in order to identify trends.

During the period April 17–March 18, there were 9 fall incidents recorded: 7 reported by our Hospice at Home service and 2 by the Day Care service. No fall resulted in injury but one Hospice at Home patient needed paramedic assistance as the nurse was unable to assist back to bed. The patient was taken to hospital to be checked over as a precaution.

Part 4: Priorities for 2018–2019

1. Support, Information and Day Services

Maintaining and improving Day Care numbers continues to be a challenge. The review undertaken over the previous year highlights the complexity of the picture. Currently Day Care offers people with a life limiting illness, and in the last 12 months of life, a social based model of support and care. But this rather traditional model does not meet the needs of everyone with a life limiting condition, in particular people under the age of 60 or from different social, ethnic or cultural backgrounds. In contrast the introduction of the Well-being model has demonstrated that people respond extremely well to a more educational based approach alongside the benefits of interaction and support.

The original concept of the Support and Information Service was for a ‘drop in’ model whereby people would access support at Treetops Hospice Care and that volunteers would be used to provide this service with support of the Clinical Nurse Specialist. Since 2014, very few people have visited the hospice for ‘drop in’ support with the majority of support and information being offered via email or over the telephone.

During 2018/19,

To merge these two departments into one with emphasis on making every contact count and ensuring that people obtain the support and information they require either from Treetops Hospice Care or are signposted and assisted to obtain it from another source.

Plan a programme of change to restructure Day Care into a new model based on sessions, workshops, and groups for individuals to participate in to address their needs whilst helping them maintain independence and control of their lives.

2. LISTEN person centred care

Over the last two years the Support and Information service within Treetops Hospice Care has played a key role in the Personal Health Budget in the End of Life care pilot project in conjunction with NHS England.

The person-centred model of care has been an area of focus and from this our Clinical Nurse Specialist has developed the 'LISTEN' model, to engage staff and volunteers in facilitating structured conversations. We will be embedding this approach into the assessment and support planning process.

During 2018/19,

To develop and promote the 'LISTEN' model with Derby University to undertake a detailed research analysis on its impact in providing structure and confidence to undertake end of life conversations.

3. Hospice at Home Service

It is anticipated that the team will deliver 42,000 hours of care over the coming year. Demand for Hospice at Home continues to grow across South Derbyshire and this increase in demand needs to be closely monitored this year.

Supervision of the clinical team was successfully introduced over the last year and this year will provide opportunity for consolidation and also introduction of a yearly shadow sit to review practice. These developments will assist us in monitoring the quality of care being delivered to our patients and maintaining the current high standards we expect for our service users.

In order to provide high quality care to our patients, the opportunity for the HCA staff to undertake the administration of some anticipatory medications is also to be explored. This would allow staff to provide medication as and when required to patients with symptom control problems and reduce the need to call upon the NHS out of hours service. This would ensure a more timely response and better care for patients. In order to achieve this a significant programme of education would need to be undertaken along with associated policy development.

During 2018-2019,

Introduce a regular shadow sit for each member of the Hospice at Home Clinical workforce.

Explore with Marie Curie the opportunities for enhancing the HCA role to include aspects of medication administration and support.

4. Compassionate Communities

Treetops Hospice Care is now 10 months into an 18 month project to pilot a model of Compassionate Communities for Derbyshire County Council in two distinct localities.

This project has three defined areas focused on volunteering and befriending, education and awareness raising with emphasis on opportunity to talking about death and dying, and engagement with employers and commitment to the 'Dying to Work' Charter.

During 2018/19,

To extend Compassionate Communities into Derby City area and to work with BME communities to understand their needs around end of life and how we can support this cohort of patients

To raise awareness of Compassionate Communities across the whole of Southern Derbyshire

To engage voluntary sector organisations in delivering befriending support via education and recruitment of volunteers

To engage with employers and promote the Dying to Work Charter

5. 'SystemOne' deployment and migration

As community health care providers move to the use of IT based systems this has created a risk for Treetops Hospice Care, as the quality of paper-based notes has been seen to decline. For some time Treetops Hospice Care has been working to move its clinical system to SystemOne to mirror that of other service providers.

We have now achieved the necessary approvals to make this change and all the clinical services will be moving to SystemOne over the coming months. This will create a period of double running as they transition from iCare.

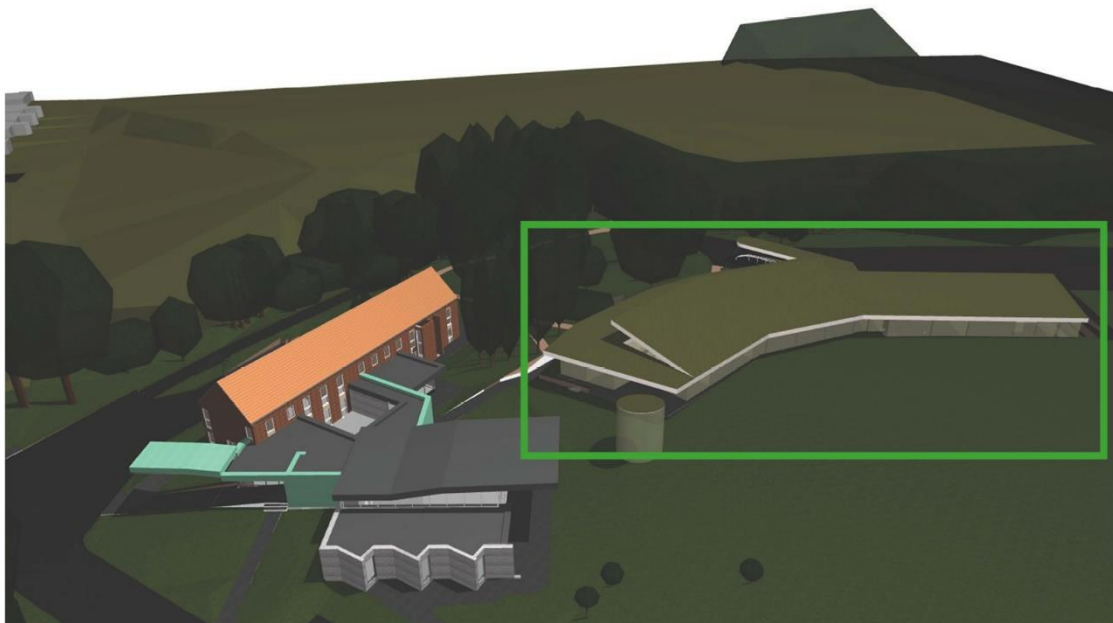
This is a very positive move for the organisation and will enable the teams to communicate more effectively with the wider health care system.

During 2018/19,

To undertake full deployment and migration of data to SystemOne for all clinical services.

6. To progress to construction of an in-patient facility on our Risley campus.

This year hopefully sees approval of the plans to build a 12 bedded In-Patient Unit. This is a significant undertaking for Treetops and a lot of work to finalise room design and to ensure that the specification is being met as work begins with the contractors. Communication with the organisation and wider community will need to be undertaken in order to articulate the rationale for developing this facility.



Quality Account 2017/2018

Treetops Hospice Care

STATEMENT

GENERAL COMMENTS

NHS Southern Derbyshire Clinical Commissioning Group (the CCG) is the co-ordinating commissioner for the NHS contract held with Treetops Hospice Care on behalf of Derbyshire.

COMMENTARY

I am pleased to confirm that the Quality Account submitted by Treetops Hospice Care has been reviewed and I am pleased to confirm that I agree with all the contract related data and quality improvement work that is stated in the Quality Account.

This Quality Account produced by Treetops Hospice Care gives a detailed overview of the year 2017-18, fully reflecting the tremendous amount of work that has been undertaken within the organisation. This year has seen the development of the Senior Management team under the new Clinical Director of services which has proved very effective.

The Quality Account outlines the huge success that Treetops Hospice Care have had across all areas of their services provided and each service should be commended for their hard work and dedication to the patients in their care. Patients and their families in receipt of services from Treetops Hospice Care have positive experiences in the most difficult of times for them. One service of particular note is the growing Hospice at Home service which has supported 90% of patients to die at home where this was their preferred place of care. Treetops Hospice Care also plan to support patients further by offering more choice in where they are cared for by providing a bed based hospice unit, subject to planning permission.

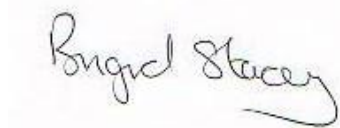
Treetops continue to demonstrate effective partnership working. The Support and Information service has played a key role in the Personal Health Budget in End of Life Care project in conjunction with NHS England, Southern Derbyshire Clinical Commissioning Group and the wider NHS services. This has provided a real choice for patients to use NHS funding in a more flexible and personalised way to support their care. This has developed into a partnership with Derby University to further develop a tool for use to guide conversations in a more personalised way. There is also continued partnership working with Derby Royal Hospital to develop and deliver the respiratory service to include patients with COPD, thus providing high quality care and delivering excellent patient experience by introducing end of life care services at an earlier stage to allow more effective planning with patients and their families. The development of the Wellbeing Day has facilitated Treetops Hospice Care to provide support using a different service model to a wider group of people. The evaluation in year was presented to the CCG, demonstrating that this model is

having a positive impact on the people who have accessed it. This will be further evaluated during 2018-19.

The achievement of 6th place in the Sunday Times 100 Best Not-for-Profit Organisations to Work For that recognises public-sector bodies, charities and housing associations of all sizes speaks volumes about the organisation and it is a pleasure to see the organisation being nationally recognised for their support to their teams in this way.

Treetops Hospice Care continue to take an active part working with the Derbyshire CCGs and partner organisations across Derbyshire to ensure the voice of the hospice is heard in designing and leading End of Life services for the future. During 2018-2019 it is clear that Treetops Hospice Care have more contributions to make to the wider health and social care community in terms of further developing services to improve patient experience and to support patients and families through their end of life journeys.

Treetops Hospice Care is to be congratulated on the completion of their sixth quality account which is exceptionally well written and presented.

A handwritten signature in black ink that reads "Brigid Stacey". The signature is written in a cursive style with a long, sweeping underline.

Brigid Stacey
Chief Nursing Officer
Derbyshire CCGs