



**Garden
House
Hospice
Care**

**Started by the Community
Serving the Community
Sustained by the Community**

2022/2023 Quality Account



*"I feel much more confident now and I am definitely getting stronger.
It really doesn't take a lot to knock your confidence when you're always ill."*

"I was able to walk to the doctors by myself recently – It's not far and it took me 20 minutes but I would never have been able to do that if it wasn't for the help the hospice has given me."

Part 1: A statement on quality from the Chief Executive

On behalf of the Board of Trustees and the Senior Leadership Team, it gives me great pleasure to present the 2022/2023 Quality Account for Garden House Hospice Care (GHHC).

This Quality Account Report evidences the tremendous work and commitment of everyone involved with the Hospice. I am always inspired by my colleagues who continually adapt to constant change and challenge. I am also grateful to our skilled and knowledgeable Board of Trustees for their ongoing guidance and support.

The year as a whole

Our focus remained on ensuring that people who would benefit from our care and support could access our services safely when they needed it, and, as the data in this report demonstrates, we have continued to enhance our services during the year following the expansion of our Compassionate Neighbours model and Community Hubs. We are also delighted to see many more people self-referring.

We have increased our therapy support following bereavement and worked hard to reach our younger community through our excellent schools' project.

Throughout the year, we remained focused on improving our clinical effectiveness, patient safety, and patient experience. We built improvements on audit and survey results whilst benchmarking with other hospices, applying scrutiny of our outcomes through a strengthened clinical governance framework aimed at continually improving all elements of patient care.

The body of this report provides the details of our achievements at Garden House Hospice Care during 2022/2023. Whilst we are rightly proud of the many achievements within this report, we also recognise where we have more work to do - one area being our reach into communities with earlier access to our care.

The year ahead

It is evident that the political, economic and health and social care landscapes continue to change at pace. We believe we are 'stronger together' and will immerse ourselves into the new Integrated Care System (ICS). We will navigate these new landscapes with confidence and cohesion, collaborating and co-designing with colleagues both internally and externally in order to lead and learn, influence, drive for success, and deliver our ambitious plans.

Our strategy and clinical model are clear, and our desire is to be great.

So, as we look ahead to the coming year, we will ensure we are fit for the future and sustainable.

The year ahead will be a year of continuous improvement and innovation as we secure the foundations for growth.

Our approach will be to innovate and transform our services, securing our income, enabling us to extend our service provision over the next few years, specifically aimed at expanding our reach to the moderately/ severely frail /end of life community living with life limiting long term conditions – an underserved group within our community and a priority for our ICS.

Patient stories have shown us that our role in supporting more people in the community, in their own home, keeping them at home surrounded by the people important to them is ever more important. So, as we build our services over the year, we will endeavour to wrap our services around them, their needs, our community.

Finally, whether you're in one of the communities we serve, a donor or a retail customer, a fundraiser, or a care delivery partner, or one of our dedicated team of staff and volunteers, I'd like to thank you for your continued support of Garden House Hospice Care.

We achieve because of you, and we couldn't do it without your valued contribution. Thank you.



Lisa Hunt

Chief Executive Officer, Garden House Hospice Care

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About Garden House Hospice Care

Mission statement

Garden House Hospice Care provides compassionate and holistic specialist palliative care to those in our community with life-limiting conditions, to enable them to live as well and as fully as possible. We share our knowledge and expertise to enable wider access to the best end-of-life care.

Vision

Support all people in our community living with life-limiting conditions and their families and carers, to live as well as possible and according to their own wishes. Caring today, tomorrow and in the future.

- Garden House Hospice Care provides a range of palliative and rehabilitative services within the Hospice Inpatient Unit (IPU), in patients' homes, at the Ernest Gardiner Treatment Centre and in our Community Hubs
- Our Family Support Services support patients, families, and carers with pre- and post-bereavement, face-to-face and virtually
- Our Children and Young People's service has been supporting pre- and post-bereavement, face-to face, remotely and within local schools
- We provide access to a Palliative Care 24/7 Advice Line via our IPU
- We supported the provision of Collaborative Care Home Education end-of-life programmes
- Recruitment and training of Compassionate Neighbours
- We provide dementia support to those living with dementia at the end of life and their carers through our dedicated "Admiral Nurse" dementia Clinical Nurse Specialist (CNS)
- We provide collaborative cover with Herts Community Trust (HCT) for North Herts Palliative Referral Centre (NPCRC)
- Medical supervision, advice and guidance is provided to the HCT Specialist Palliative Care CNS team
- Provision of Frailty Clinical Nurse Specialists (CNS) in North Herts nursing and residential homes
- Inpatient Unit (IPU) providing admissions for symptom control or last days of life care for patients and support for their families
- Hospice at Home service (H@H)
- Continuing Health Care (CHC) Fast Track 10 bed capacity community service

- Domiciliary and outpatient medical reviews, using a blend of face-to-face and virtual support
- Training placements for GP trainees and Palliative Medicine Specialist Trainees
- Provision of a learning and supportive environment for placements from local Universities providing training for Student Nurses and Allied Health Care professionals as well as placements for Cambridge University Medical Students

Regulation and inspection

Garden House Hospice Care is regulated by the Care Quality Commission and was last inspected in May 2022.

Following a comprehensive evaluation of our services, Garden House Hospice Care received a continued rating of ‘Good’ for all five key lines of enquiry.

Our Strategy



Strategy
2022 → 2025

Vision
Supporting all people in our community living with life-limiting conditions and their families and carers, to live as well as possible and according to their own wishes. Caring today, tomorrow and in the future.

Objectives

- OUR COMMUNITY**
Sit at the heart of our community and local networks.
WE WILL:
Develop an inclusive network of individuals and organisations, and better engage with those that already exist.
Expand the reach of our services by improving awareness of the range of our services.
Grow our volunteer base.
Learn from our communities.
- OUR SERVICES**
Provide high quality services that meet the needs of the whole community.
WE WILL:
Be at the forefront of the delivery of exemplary care for people with a life-limiting illness and their loved ones.
Respond to the varying and changing needs of our community and provide innovative, dynamic care services.
Work collaboratively with health service providers across our region to reach more people and ensure the best palliative and end-of-life care is available to all who need it.
- OUR PEOPLE**
Grow a strong, capable, resilient, highly-skilled and motivated organisation.
WE WILL:
Develop an innovative and aspirational environment to attract and retain staff.
Champion a culture that celebrates learning, productivity, innovation, diversity and equality.
Embed a core ethos of dignity and respect in all that we do.
- OUR FUNDING**
Secure the future of the Hospice through sustainable funding.
WE WILL:
Employ new, diverse, innovative and reliable, sustainable funding.
Spend funding efficiently, maintain prudent reserves while investing in an ambitious growth in services.
Develop and grow outstanding relationships in our community to drive income and support.
Be the retailer of choice for sustainable fashion and goods.

Values

- Place the patient at the heart
- Take inspiration from our community
- Deliver a high-quality service
- Continually learn and improve
- Respect everyone
- One team with a shared vision

Our strategic objectives 2023-2024

Garden House Hospice Care’s strategic objectives for 2023– 2024:

Achieved objectives	How we can demonstrate achievement
<p>Our community: Sit at the heart of our community and local networks.</p>	<ul style="list-style-type: none"> • Representation at local, regional, and national meetings has been maintained • We have developed links with our new ICS • We have continued to work in partnership with Herts Community Trust (HCT) and Integrated Care Board (ICB) to provide the North Herts Palliative Referral Centre (NPCRC) and to support the development of the Single Point of Access (SPA) to enable referrals to be made and triaged in a timely manner • Self-referrals continue, with an increase of referrals to our Rehab and Wellbeing team by 45% in this past year • Our Family Support Services team have completed a total of 2,467 interventions including the delivery of regular supportive calls to those identified • In 2022, our Family support team designed, developed and launched a new Bereavement Therapy Group 6 session model for bereaved carers • During 2022/2023, we continually raised awareness of our Compassionate Neighbours service, receiving 264 referrals, including 30% as self-referrals. Overall, we support a case load of 381 community members • 210 people accessing our Compassionate Neighbours services were signposted onwards and discharged in the last year, with 20% being supported at the end of life • We increased community outreach and support with a total of 8 weekly Community Wellbeing Hubs across our locality in Royston, Hitchin, Stevenage (2) and Letchworth (4) • Across these Hubs, we held 235 sessions, with 207 community members on our case load and a total of 4,334 individual attendances • We trained 84 new Compassionate Neighbours and onboarded 262 new volunteers, making our current volunteer workforce a total of 843 people • We have worked with 38 different schools in our locality across a range of projects designed to raise awareness of hospice services and encourage conversations around death, dying, grief and loss • We have engaged with 184 teachers and support staff, 3,412 children and 182 parents.

Achieved objectives	How we can demonstrate achievement
<p>Our services: Provide high quality services that meet the needs of the whole community.</p>	<ul style="list-style-type: none"> • We have launched our new three-year strategy and developed an Annual Plan in line with this, so we are able to maintain, respond and adapt services to ensure that our patients and their families are at the heart of everything we do • We have successfully implemented the use of the Health Information Exchange (HIE) to support the delivery of our clinical care • We have commenced the work for the introduction of the Patient Safety Incident Reporting framework (PSIRF) in line with national requirements • We have strengthened our safeguarding procedure with a new Safeguarding Group. This group has a designated safeguarding Trustee, meeting regularly to review governance through terms of reference and a detailed workplan • Within our annual audit plan, we have identified appropriate audit standards and areas for quality improvement secondary to audit outcomes • We have strengthened our patient safety reviews, embedded within our weekly patient safety meetings, to review and agree actions from all reported incidents and ensure feedback is given to teams • Sustained compliance of staff and volunteers attending mandatory training with strengthened monitoring of compliance with our Learning and Development team • Reviewed our Quality lead structure and responsibilities and amended this to allow for increase focus on quality and safety for 2023 • Ongoing process for review and updating of policies across the whole organisation with updated policies communicated to staff through our internal intranet news page • Systems have remained in place to manage and monitor the prevention and control of infection (IP&C) in line with Covid-19 GOV.UK guidance, remaining responsive to the needs of patients, adapting services for patients and carers to ensure access to services • Regular reviews and updates to visitor guidance in 2022/2023 have enabled safe visiting for patients on the IPU, to our Rehab and Wellbeing services and to the Garden House Hospice Care site have identified the areas for implementation of the National Cleaning Standards

with our baseline audit completed May 2023 achieving a five star rating and an agreed ongoing audit plan in place

- East and North Herts Trust IP&C audit conducted March 2023 with the five results as follows:
 1. Hand Hygiene observational Audit - 100%
 2. IPCT Isolation Precautions Audit - 100%
 3. Commode Spot Check Audit - 100%
 4. IPCT Safe Handling and Disposal of Sharps - 96%
 5. IPCT Environmental Improvement Audit - 92%

- We identified, reported, and safely managed covid outbreaks within our teams completing and complying with external reporting requirements, containing these. During these times we updated staff, patients of any changes practice or requirements in particular us of PPE
- We regularly update our Living with covid plan and visitor guidance in line with Government policy and local assessed needs of our services.
- Quality Assurance visit completed by the Integrated Care Board receiving good feedback.

- Maintained high quality relationships with care home staff and primary care teams
- Continued to support and implement individualised plan of care through advanced care planning discussions for all new residents in our allocated care homes to ensure their wishes and preferences are met, including hospital admission avoidance if appropriate
- Embedded the use of National Early Warning System 2 (NEWS2) on the Inpatient Unit, supported by an associated ceiling of care document
- Established the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) document for advance care planning decisions in place of the Hertfordshire Do Not Attempt Resuscitation document, as part of the ICB working group introducing the ReSPECT document
- Continued to utilise the NICE endorsed Establishment Genie tool to support review of staffing and plan for the future models of care
- Engaged with 9 external research programmes during 2022/2023

- 5 staff members attended the Hospice UK Annual Conference with GHHC poster presentations
- Family Support Services have improved standard & quality of external supervision to volunteer counsellors through new Supervisor Access Plan
- Face to face family therapy continues prioritising patients, their carers and any children and young people (CYP) directly affected by a patient's condition or death
- Following patient discharge from IPU, support from spiritual care, supportive calls, or formal counselling sessions is continued as required
- We have received 254 referrals to our Family Support Services team
- We have provided spiritual care, supportive calls and formal counselling sessions as required
- GHHC has continued to provide a blended model of access with remote and virtual support to patients and carers when needed
- Complementary Therapy and support for staff was provided alongside the service for patients, families, and carers.
- We have delivered Continuing Health Care support at home / Hospice at Home in line with the agreed service model
- Provided Medical Specialist Palliative Care support to community patients, working collaboratively with HCT SPC CNS team and the East & North Herts NHS Trust
- Continued provision of Frailty Clinical Nurse Specialist (CNS) support to our nursing and residential homes in North Hertfordshire
- During a period of parental leave for our Admiral Nurse dementia CNS, we maintained a reduced capacity service by securing cover from an alternate experienced Admiral Nurse. This has ensured an education element of the role has been maintained alongside enabling direct patient care work to continue
- In 2022/2023, the GHHC dementia CNS received, accepted and registered 24 referrals and provided telephone support and advice to 75 non-registered individuals who have made contact.

Achieved objectives	How we can demonstrate achievement
<p>Our people: Grow a strong, capable, resilient, highly-skilled and motivated organisation.</p>	<ul style="list-style-type: none"> • Active positive recruitment of staff across all clinical services resulting in key senior posts being successfully filled • Increased our recruitment to Student Counsellors on placement to support face to face counselling opportunities • Recruited successfully into positions and expanded the breadth of our Board of Trustees • Continued regular 1:1 support for staff and new yearly appraisal completion programme underway • Continued to actively promote confidential access to the employee assistance programme available to all staff • Staff and volunteers have accessed sessions run by our Complementary Therapy service to enhance their wellbeing • Weekly meditation sessions are now open for volunteers to access • With the introduction of the 2023 Annual Plan, there is to be a significant investment in our People and Culture to make GHHC an Employer of Choice. To support these, HR is currently undergoing a recruitment drive to increase capacity and skillsets. <p>A forward facing, strategic approach to our People and Culture with GHHC being an 'Employer of Choice' has commenced. We will achieve this by developing, rewarding, engaging, and empowering our people.</p>

Achieved objectives	How we can demonstrate achievement
<p>Our funding: Secure the future of the Hospice through sustainable funding.</p>	<ul style="list-style-type: none"> • Our Trading team reviewed our shops, identifying actions for those not reaching their potential. Overall, our shops exceeded their income target by £91k. We continue to look to develop our offering and have committed in growing our portfolio • We have outgrown our trading warehouse and have identified a new space to move into in the next financial year, this will allow us to grow and improve our services even more • Our Fundraising team continued to develop events and initiatives in the community and raised over £2m • We have developed and launched 'Connect' which supports local businesses and organisations with networking, education, and team building

- The launch of our new website has allowed us to reach more people across digital platforms to offer a better experience for those using our website
- We have supported our Learning and Development strategy and have introduced new apprentice roles, recruiting two apprentices into our Marketing and Communications team
- Ensured compliance with all relevant legislation, including VAT, Gift Aid and Charity Commission
- We introduced a new accounts system (Sage 200) which has improved reporting information and timescales
- The use of resources is limited by the funds available
- The use of funds is monitored by the Finance department
- Management and reporting on income and expenditure is shared bimonthly with the Finance and General Purposes Committee and ultimately the Board of Trustees on a quarterly basis. This ensures available resources are used effectively, efficiently and innovatively
- Professional auditors complete independent checking of the use of funds annually. This provides additional reassurance regarding the expected standards of governance
- Robust annual budgeting and forecasting process in place
- The income received from the NHS in 2022/2023 represents 38% of the overall running costs of Garden House Hospice Care
- The remainder of running costs are funded through voluntary income generation, donations, legacies, lottery activity, investment income, shop trading. Legacies amounted to 16% of total income and shop profit equalled 10% of income.

Part 2: Priorities for improvement and statements of assurance from the Hospice Senior Leadership Team

Looking back: Priorities for improvement 2022/2023

Experience

Priority 1: Broaden our access and support to carers through collaboration and innovation.

What has been achieved?

Focus on both the development of new and reopening of face-to-face support was considered alongside the continuation of remote access to services with the following identified as achieved:

- To support informal, unpaid carers during June and October 2022, two carers education and support courses were held with two further dates planned for 2023. Positive feedback was received
- Recognising the benefits, support with sleep, stress and anxiety, and vitality and energy for carers, links have been provided to access recorded 'enhancing your wellbeing' sessions
- A blended approach of virtual tia chi and face to face meditation has been provided for carers to enhance access for all
- Our Family Support Services team designed, developed and launched a new bereavement therapy group 6 session model for bereaved carers
- As a result of this work, we have plans to increase collaborative working with our Family Support Services team to explore other ways to enhance carer support.

Effectiveness

Priority 1: As part of our digital transformation work and our commitment to release time to care, we will consider the introduction of laptops for our Community Teams to enable remote working.

What has been achieved?

The benefit of the introduction of remote access working was considered, including how this would enhance access to care records.

- It was identified that remote access would result in a reduction of travel time and would enable staff to both have immediate access to patient records and update notes in a timely fashion
- However, post lockdown, lack of access to the supply of hardware and the connectivity of equipment was a challenge in the initial stages of implementation of this priority. In addition, this priority was impacted by the outcome of a financial review of our services and priorities
- Access to remote access working remains a key focus and is encompassed by the digital transformation workplan. This is within our service review and budget for 2023.

Priority 2: We will increase our awareness, promotion, and involvement in research.

What has been achieved?

Although work was carried out to appoint a research nurse to GHHC, following a priorities review taking into account clinical issues and medical staffing, as well as financial factors, a decision was made to delay this appointment.

- However, during 2022/2023, GHHC participated in nine external national and regional research projects
- Five staff and Trustees attended the Hospice UK Annual Conference, including presentation of two GHHC posters
- In addition, a multidisciplinary journal club has started to further promote awareness and involvement in research outcomes across the clinical staff.

Safety

Priority 1: Introduction of an electronic rostering system.

What has been achieved?

This was successfully introduced.

- A review of the electronic rota systems available was undertaken by the clinical leads and HR team. Following this, a system was identified, proposed and invested in for both our IPU and H@H/CHC teams in 2022/2023
- Training was undertaken by clinical team managers and leads of these services prior to rolling out across the two services in Q3 2022
- Although the introduction process and embedding took longer than anticipated, it has provided an opportunity to review the effectiveness of rotas, ensuring robust capacity and skill mix for shift cover and monitoring should be enabled in the future
- This was a significant long term financial investment for GHHC for the future of our services provisions. We hope to broaden the use of this across other teams in the Hospice and Trading company in the future, to enhance the smooth running of rota planning for all our services.

Looking forward: Priorities for improvement 2023 – 2024

Priority 1: Increase the reach of all our services into our local neighbourhoods and grow by developing innovative models of care for the moderate to severely frail who would benefit from Palliative and end of life care.

Background

We have identified, through the development of our Annual Plan and priorities for 2023, the importance of keeping pace with changes in health needs, so that we continue to provide the highest quality care to our patients.

How will this be introduced and implemented?

Through adherence to our Annual Plan, we will review how we grow our services in 2023, providing new services or changing the way in which we provide existing services. This will include taking a proactive role and engaging our local neighbourhood teams to support the management of any identified inequalities in our locality.

How will success be measured?

Development of regular, robust reporting of identified KPIs within our Hospice Governance framework.

Priority 2: Working within our budget allocation, make every penny count and where opportunities exist, increase our NHS contract potential, and reduce the risk of funding care and future service developments.

Background

The organisation continues to face financial challenges post pandemic. It has been identified that we need to continue to deliver and grow our services within this environment, and to consider effective ways to enable us to both continue to deliver, but also to develop our services with our current financial and service provision.

How will this be introduced and implemented?

We will look for potential efficiency savings through procurement and clinical productivity, delivering our services within the agreed 2023/2024 budget.

We will deliver any new activity with minimal extra cost.

We will develop our partnership working with other organisations, to ensure we are collaboratively designing and delivering care with partners, to ensure care is available for all, at the right time in their patient journey.

How will success be measured?

A quality impact assessment process will form part of any decision making, to ensure any changes will not have a detrimental impact on quality of care.

Robust reporting and monitoring of agreed KPIs on a regular basis will be implemented through an agreed accountability and oversight framework.

Priority 3: Invest in our staff and strengthen our resilience, to enable our organisation to become more agile and responsive to future opportunities.

Background

We recognise our workforce of staff and volunteers and endeavour to support our people in becoming the best at what they do. We plan to invest in our staff so that we are prepared for the future needs of the community when these are known.

We completed a pulse survey in Q4 of 2022 to inform and shape our Annual Plan.

How will this be introduced and implemented?

We will undertake, alongside our stakeholders, a review of needs within our community, so that in 2023 we are able to build the foundations for the future.

We will design and implement an Organisational Excellence Strategy, to be rolled out in 2023/2024.

Health and Wellness is a key initiative to ensuring our people are happy and healthy. We will introduce a project group populated by key stakeholders to take this initiative forward. We will support development of mental health first aiders.

How will success be measured?

We will complete regular reviews of staff surveys and pulse checks.

Monitoring of the delivery and progress of agreed KPIs within our Annual Plan.

Priority 4: Ensure that Garden House Hospice Care is recognised as an efficient and thriving organisation worthy of future investment and known as 'Great' at what it does.

Background

We are known to be a "Good" provider of palliative and end of life services, but we aim to be great.

How will this be introduced and implemented?

We will introduce and adhere to our "From Good to Great" aspiration outlined in our Annual Plan. We will develop a transformation programme to enable this.

We will develop our partnership and co working relationships with our external partners and providers.

How will success be measured?

A transformation board will be implemented with clear and robust reporting templates and timelines for quality improvement.

Mandatory statements of assurance from the Senior Leadership Team

The following are statements that all providers must include in their Quality Accounts. Many of these statements are not directly applicable to specialist palliative care providers. An explanation of these statements and why they do not apply to Garden House Hospice Care has been included, where appropriate.

Review of services

During 2022/2023, Garden House Hospice Care received some NHS funding for its services. The income received from the NHS in 2022/2023 represents 38% of the overall running costs of Garden House Hospice Care.

The remainder of running costs are funded through voluntary income generation, donations, legacies, lottery activity, investment income, shop trading. Legacies amounted to 16% of total income and shop profit equalled 10% of income.

Garden House Hospice Care has reviewed all the data available to them on the quality of the care in all of these NHS services.

Participation in clinical audit

As a provider of specialist palliative care, Garden House Hospice Care was not eligible to participate in any national clinical audits or national confidential enquiries. This is because none of the 2022/2023 audits or confidential enquiries related to specialist palliative care.

Local clinical audits

Garden House Hospice Care has an annual programme of clinical audits, including infection prevention and control, pressure ulcers, controlled drug accountability, safeguarding and compliance to identified policies.

A summary of audit results and action plans are reported to the Board of Trustees via the Clinical Governance Committee, a sub-committee of the Board of Trustees.

Research

The number of patients receiving NHS services provided or sub-contracted by Garden House Hospice Care in 2022/2023 who were recruited by the Hospice during the period to participate in research approved by a research ethics committee was NIL.

While Garden House Hospice Care has not recruited any patients to participate in research in 2022/2023, it has been involved in 9 external research projects such as involvement in national audits of patient management, surveys about palliative patient care and questionnaires on healthcare professionals' response to the pandemic.

Use of the CQUIN payment framework

A proportion of an organisation's income can be conditional on achieving quality improvement and innovation goals, through the Commissioning for Quality and Innovation (CQUIN) payment framework.

In 2022/2023, Garden House Hospice Care has not been subject to payments under the CQUIN payment framework from NHS Hertfordshire or NHS Bedfordshire.

Garden House Hospice Care will not be subject to CQUIN payments in 2023/2024.

Statement from the Care Quality Commission

Garden House Hospice Care is required to register with the Care Quality Commission and its current registration status is unconditional. Garden House Hospice Care has no conditions on registration.

The Care Quality Commission has not taken enforcement action against Garden House Hospice Care in 2022/2023.

Garden House Hospice Care has not participated in any special reviews or investigations by the Care Quality Commission during the reporting period.

Data quality

Garden House Hospice Care did not submit records during 2022/2023 to the Secondary Uses Service for inclusion in the Hospital Episode Statistics which are included in the latest published data. This is because the Hospice is not eligible to participate in this scheme.

Data Security and Protection Toolkit attainment levels

Garden House Hospice Care has the status 'Standards Met' for the Data Security and Protection Toolkit completed March 2023.

Clinical coding error rate

Garden House Hospice Care was not subject to the Payment by Results clinical coding audit during 2022/2023 by the Audit Commission.

Learning from deaths

Providers are expected to report their progress in using learning from deaths to inform their quality improvement plans as part of the Quality Improvement toolkit. Garden House Hospice Care is not subject to the Quality Improvement toolkit.

Part 3: Review of quality performance

Hospice UK Benchmarking Project

Garden House Hospice Care participates in the national hospice (Hospice UK) quality benchmark reporting. In 2022/2023, this provided a comparison with other hospices of similar size for falls, medicine incidences and pressure ulcers, against common descriptors. In the table below, GHHC is Garden House Hospice Care and AVG is the average for hospices of a similar size.

	Q1		Q2		Q3		Q4	
	GHHC	AVG	GHHC	AVG	GHHC	AVG	GHHC	AVG
Occupancy %	78.6%	73.8%	70.4%	74.4%	71.7%	75.4%	78.9%	78.0%
Falls Incidents per 1000 occupied bed days	11.2	7.8	7.7	9.2	18.9	8.9	3.6	7.9
No Harm %	60.0	42.9	50.0	58.9	50.0	57.6	0.0	53.7
Medication Incidents per 1000 occupied bed days	26.8	14.6	15.4	12.1	18.9	16.0	9.0	12.7
No Harm %	100.0	84.1	100.0	82.4	100.0	84.3	100.0	84.9
Pressure Ulcer Incidents per 1000 occupied bed days	152.1	30.6	73.4	28.6	34.1	22.2	30.6	24.9
On Admission %	67.6	68.0	60.5	68.5	50.0	64.8	76.5	66.4
New During Stay %	32.4	32.0	39.5	31.5	50.0	35.2	23.5	33.6

Hospice UK Definitions

Falls: Includes all slips, trips and falls e.g., if a patient is found on the floor, lowered themselves on to the floor, slipped from a chair, rolled out of bed.

No Harm: Any patient safety incident that had potential to cause harm but was prevented, resulting in no harm to people receiving care OR that ran to completion, but no harm occurred.

Pressure Ulcer: Localised damage to the skin and/or underlying tissue, usually over a bony prominence (or related to a medical or other device), resulting from sustained pressure (including pressure associated with shear).

Garden House Hospice Care explanation

During 2022/2023, we have strengthened our approach to the reporting and investigation of patient safety incidents. We have reviewed and updated the incident reporting and investigation electronic templates to improve the quality of investigations and ensure that opportunities for learning are not missed.

We have completed weekly patient safety meetings and incident response actions have been implemented for all clinical incidents reported as required. This meeting is completed with a Multidisciplinary Team (MDT) approach across all of the clinical teams including the Quality and Compliance team and pharmacist.

We have looked to identify any themes within our incident reports and to standardise our expectations in regard to written accounts from staff as required.

In 2022/2023, Garden House Hospice Care patients identified with pressure damage on admission were assessed and these were reported in line with our incident reporting process. The need to make a safeguarding referral was considered. Consideration included discussions with patient and family as appropriate, review of patient history notes and contacting patients' previous care provider for additional information and awareness.

In 2022/ 2023, we noted a reduction in pressure damage developed during care at GHHC. However, we remain vigilant to this reporting and investigation of each individual reported case.

We have strengthened our team knowledge of our Duty of Candour policy and procedures through training and awareness to ensure this is always followed and we have audited compliance. Consideration of Duty of Candour requirements are discussed at patient safety meetings.

We noted a higher number of reported medicine management incidents during Q1. These were reviewed and discussed at our weekly incident review meeting and at our Clinical Governance Committee meetings. We identified the errors were for several reasons and these were addressed. Examples of such changes included training for nursing and medical staff in a variety of settings, including at induction and regularly throughout the year; staff supported to be undisturbed during prescribing and administration of medications; updating of documentation around medications to increase clarity and reduce errors. This led to a drop in errors being identified and reported during the remainder of the year.

Incidents are reported by all staff through our electronic reporting system enabling clear tracking and timelines.

Anti-microbiological stewardship is taken seriously by GHHC. The use of anti-microbials when treating patients is always considered carefully prior to commencement. Whenever possible, prescribing is secondary to sample culture and sensitivity results and cases discussed with an East & North Herts NHS Trust microbiology consultant. Detailed anti-microbial guidance, written collaboratively by an ENHT Consultant Microbiologist and a Hospice Consultant based on minor amendments of the ENHT guidance, is used to guide prescribing.

Garden House Hospice Care activity data

The figures below provide one measure of Garden House Hospice Care's activity during the period 2022/2023.

	2022/2023
Total number of patients, carers and community members cared for across all GHHC services	2,271
Inpatient Unit	
Number of admissions	167
Average length of stay (days)	9.6 days
% of patients discharged to home / care home / hospital	31%
Number of advice line calls	432
Hospice at Home	
Number of referrals	115
Number of visits to patients	1,096
Continuing Health Care Service	
Number of referrals	87
Number of visits to patients	5,614
Rehab & Wellbeing	
Number of referrals	222
Number of activities	4,342
Frailty team	
Number of referrals	567
Number of patients reviewed & support calls	3,558
Dementia Clinical Nurse Specialist	
Number of referrals	24
Number of interventions	264

	2022/2023
Outpatients	
Number of unique patients attending	34
Number of medical appointments	83
Family Support Services	
Number of referrals	254
Pre- & post-bereavement individual counselling sessions	942
Number of interventions	2,467
Children and young persons supported	76
Compassionate Neighbours	
Number of referrals	264
Active caseload	381

We continue to work closely with providers to ensure that all patients who require the services of Garden House Hospice Care are referred to the appropriate Hospice service as early as possible in their disease trajectory.

Patient Accidents, Incidents and Near Misses

All patient incidents are investigated and, when appropriate, lessons are learnt.

Within Garden House Hospice Care, incidents are reviewed:

- Weekly by Clinical Team Leaders of services where incidents have been reported and the Director of Patient Services, Medical Director and the Head of Quality & Compliance
- Bi-monthly by the Clinical Governance Committee
- Quarterly by the Health and Safety Committee.

Garden House Hospice Care reports incidents quarterly to the East and North Herts Clinical Commissioning Group, BLMK Clinical Commissioning Group and the Care Quality Commission when required.

Serious Incidents Requiring Investigation

In 2022/2023, there were no Serious Incidents Requiring Investigation (SIRI) which Garden House Hospice Care are required to report to the Care Quality Commission and East and North Herts Clinical Commissioning Group.

Duty of Candour

Candour is defined in the Francis Report (2013) as:

“The volunteering of all relevant information to persons who have or may have been harmed by the provision of services, whether or not the information has been requested and whether or not a complaint or a report about that provision has been made.”

Garden House Hospice Care is committed to the Duty of Candour and expects every healthcare professional to be open and honest with all patients and service users and their family and carers. During 2022/2023, there have been no Duty of Candour breaches at Garden House Hospice Care.

Safeguarding, Mental Capacity and Deprivation of Liberty Safeguards (DoLS)

All Clinical and non-clinical patient-facing staff and volunteers receive annual mandatory training on safeguarding, mental capacity and deprivation of liberty safeguards.

SAFEGUARDING LEAD:	Director of Patient Services
SAFEGUARDING TRUSTEE:	Named responsible Trustee
ADULT SAFEGUARDING CHAMPION:	Social Worker

Safeguarding adults at risk of abuse or neglect is everybody's business. Garden House Hospice Care's policy is in line with the Hertfordshire Safeguarding Adults Board's multi-agency policy and procedure for working with adults at risk of abuse or neglect. GHHC's Safeguarding of Adults at Risk policy was last updated in March 2023.

The Care Act 2014 and supporting statutory guidance describes safeguarding as protecting an adult's right to live safely, free from abuse and neglect.

When abuse or neglect occurs, or is suspected, it needs to be responded to swiftly, effectively and proportionately to enable the adult in need of safeguarding to remain in control of their life as much as possible.

The Safeguarding Adults flowchart is displayed around the Hospice as a quick guide for Hospice team members. Safeguarding posters are displayed and leaflets are available for patients, family, friends and carers.

Fifteen Adult Safeguarding concerns were raised with Herts County Council in 2022/2023.

CHILD SAFEGUARDING CHAMPION: **Social Worker**

Garden House Hospice Care is committed to protecting and promoting the welfare of children who may come into contact with our services at all times.

The Safeguarding Children policy is to be read in conjunction with the Hertfordshire Safeguarding Children Partnership (HSCP) Manual. Garden House Hospice Care's Safeguarding Children policy was last updated in March 2023.

The Safeguarding Children flowchart is displayed around the Hospice as a quick guide for Hospice team members. Safeguarding posters are displayed and leaflets are available for patients, family, friends and carers.

One Child Safeguarding concern was raised with Herts County Council in 2022/2023.

MENTAL CAPACITY LEAD: Director of Patient Services

MENTAL CAPACITY CHAMPION: Education and Practice Development Lead

Garden House Hospice Care is committed to protecting and promoting the welfare of adults at risk who come into contact with our services at all times. The Mental Capacity Act and Deprivation of Liberty Safeguards Policy underpins Garden House Hospice Care's statutory requirements in terms of The Mental Capacity Act (2005) and should be read in conjunction with the Mental Capacity Act Code of Practice.

The Mental Capacity Act 2005 (MCA) applies to the care, treatment and support of people in England and Wales aged 16 years and over who are unable to make some or all decisions for themselves. Staff working with people who lack capacity must have regard to the Mental Capacity Act. The Act is accompanied by a statutory Code of Practice which explains how the MCA will work on a day-to-day basis and provides guidance to all those working with, or caring for, people who lack capacity. As the Code has statutory force, all staff who are employed in health and social care are legally required to 'have regard' to the MCA Code of Practice.

GHHC's Mental Capacity Act and Deprivation of Liberty Safeguards Policy was last updated June 2022. and is next due for review in June 2025

- The Mental Capacity (Amendment) Bill received Royal Assent on 16 May 2019 and sets out the measures the government will take to replace the Deprivation of Liberty Safeguards (DoLS) scheme in the Mental Capacity Act 2005. This is a process that authorises deprivations of liberty for the care and treatment of those who lack capacity.

The new Liberty Protection Safeguards (LPS) was due to be implemented by April 2022 but has been delayed indefinitely. The department of Health and social care announced in April 2023 that Government has taken the decision to delay the implementation of the Liberty Protection Safeguards beyond the life of this Parliament.

One Deprivation of Liberty Safeguards applications was made in 2022/2023.

National Audit

FAMCARE

FAMCARE is a service evaluation of bereaved relatives’ satisfaction with palliative care services, carried out by the Association of Palliative Medicine of Great Britain and Ireland (APM).

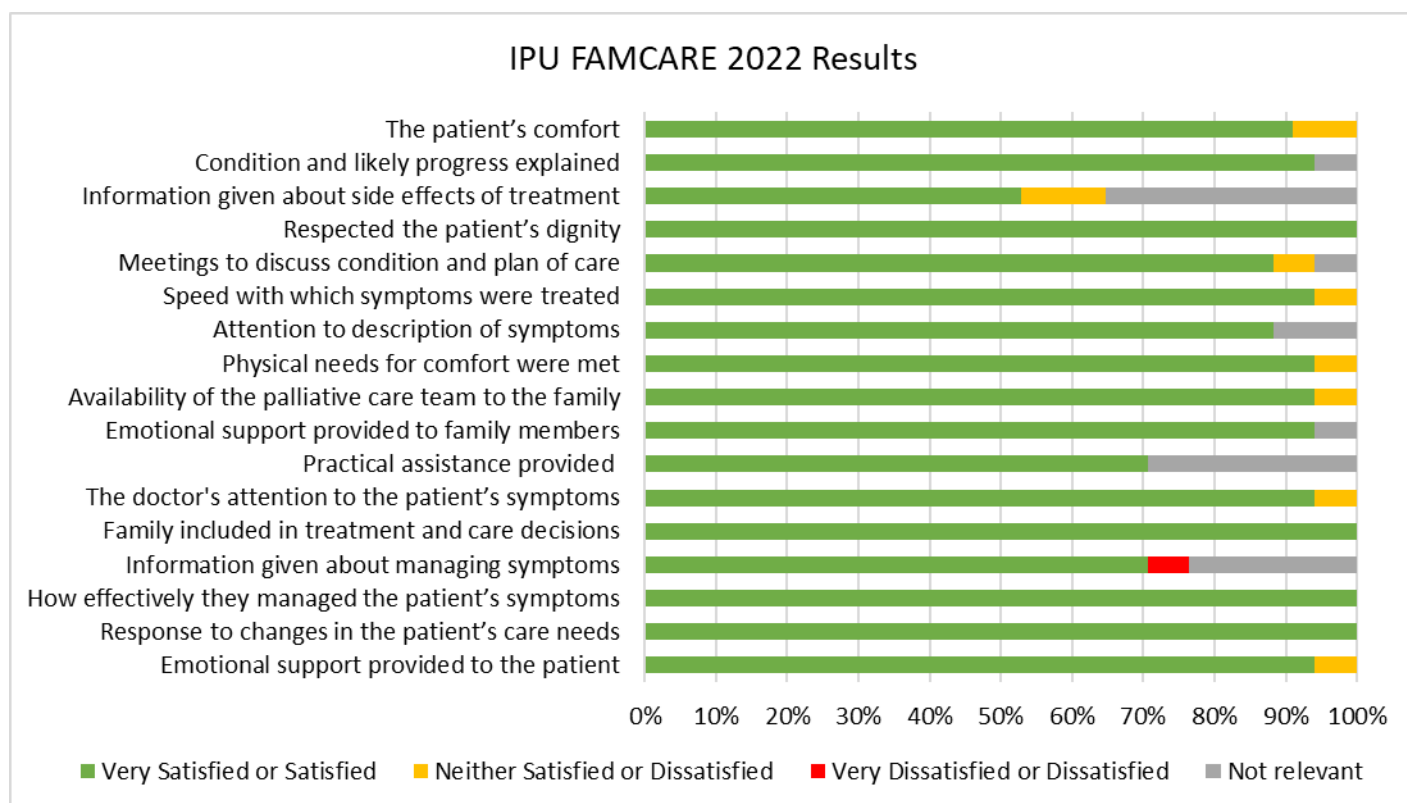
Garden House Hospice Care took part in the national FAMCARE audit for the first time in 2018 for both the Inpatient Unit (IPU) and Hospice at Home (HH)/ Continuing Health Care (CHC) services. GHHC took part again in 2022. Nationally, specialist palliative care team participation in 2022 was as follows:

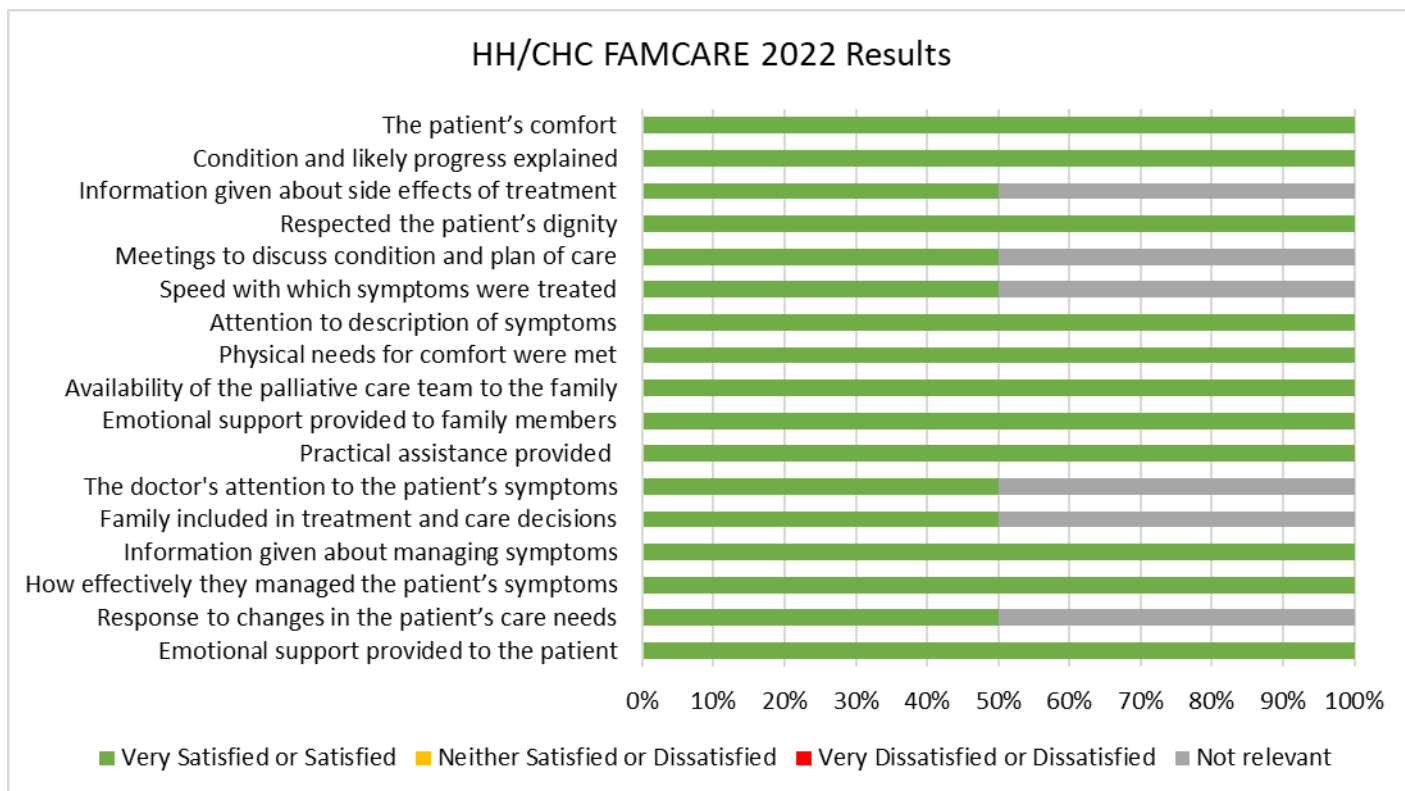
Location	No. of Teams Participating	No. of Questionnaires Returned
Hospice Inpatient Units	32	522
Home Care Teams	29	673
Hospital Support Teams	1	50

The service evaluation questionnaire was sent to the next of kin of patients who died between 1st June and 30th August 2022, with a prepaid envelope for completed forms to be returned directly to the APM.

Garden House Hospice Care sent out 42 questionnaires; 17 IPU surveys and 2 HH/CHC surveys were returned. There was a 45% return rate.

The APM collated the results and provided each participating specialist palliative care team with graphs comparing their results with the national results for equivalent services.





NHS Protect Medicines Security Self-Assessment

This audit is undertaken twice a year, scoring 86% in May 2022 and 95% in November 2022.

Hospice UK Audits

Controlled Drugs

GHHC undertakes the Hospice UK Controlled Drugs audit biannually. In 2022/2023, compliance was 96%

Medical Gases

GHHC undertakes the Hospice UK Medical Gases audit annually. In 2022/2023, compliance was 89%

General Medicines

GHHC undertakes the Hospice UK General Medicines audit annually. In 2022/2023, compliance was 88%

Pressure Ulcers

GHHC undertakes the Hospice UK Pressure Ulcers audit biannually. In 2022/2023, compliance was 98%

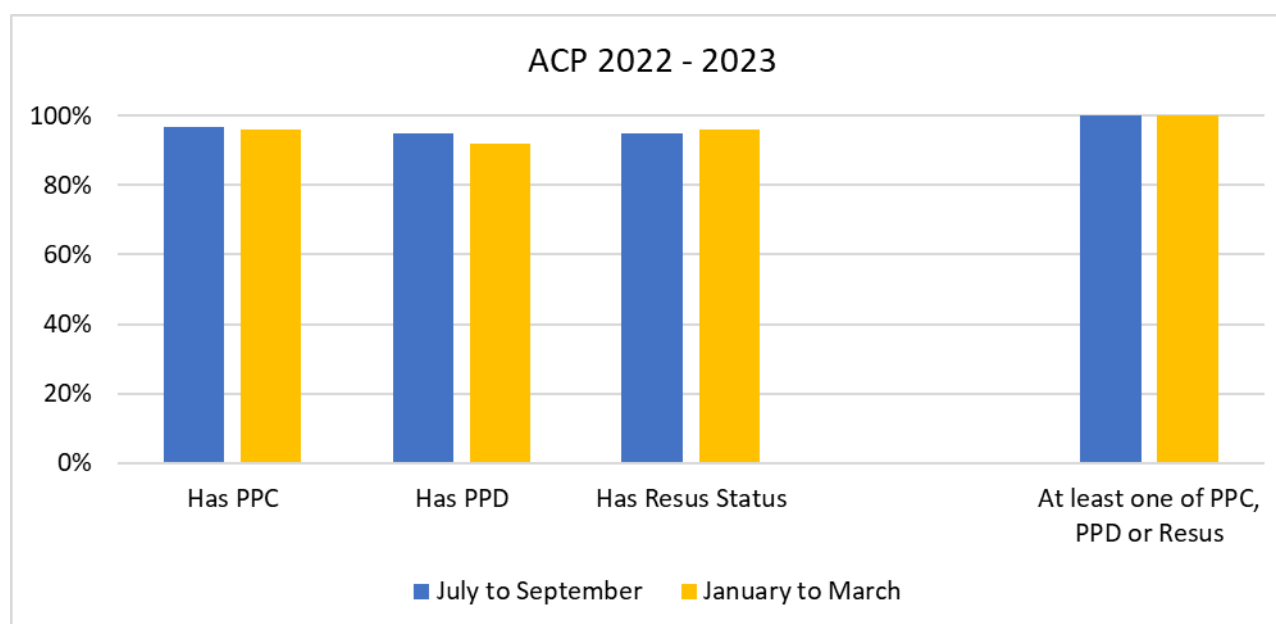
Examples of local audits undertaken

Advanced Care Planning

Advance care planning (ACP) is a voluntary process of discussion about future care between an individual and their care providers, irrespective of discipline. It is recommended that with the individual’s agreement this discussion is documented, regularly reviewed, and communicated to key persons involved in their care. An ACP discussion might include:

- The individual’s concerns and wishes
- Their important values or personal goals for care
- Their understanding about their illness and prognosis
- Their preferences and wishes for types of care or treatment

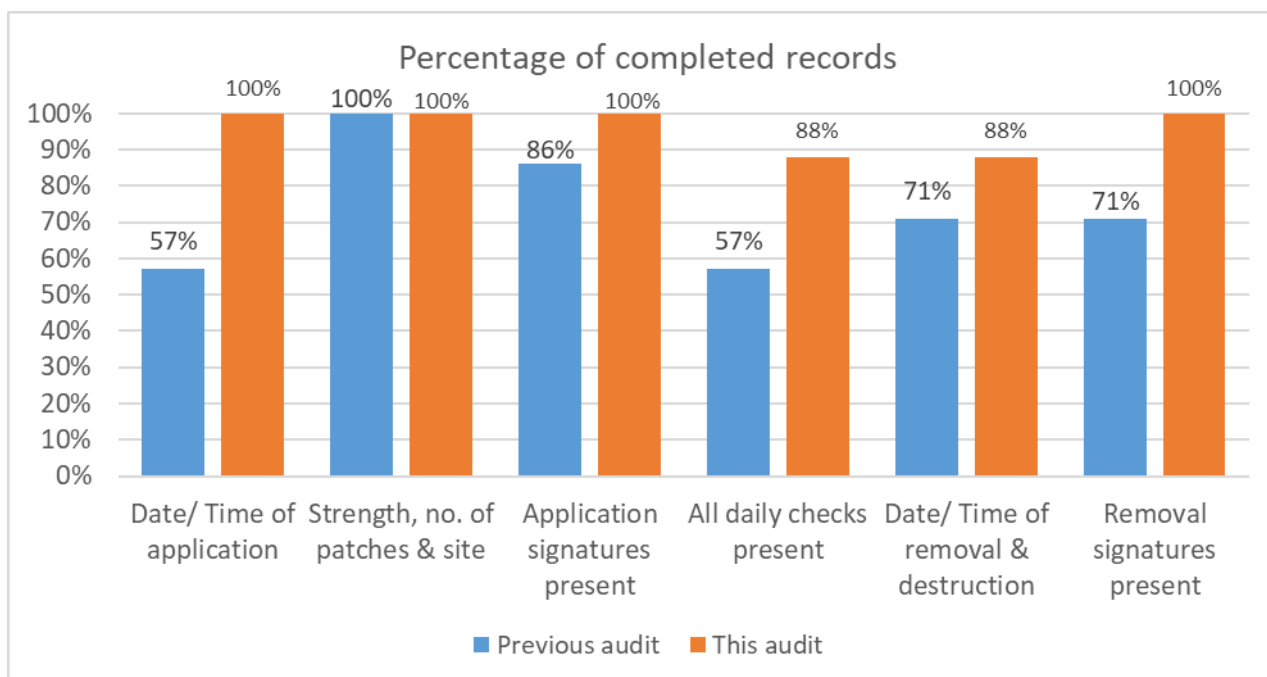
This audit is undertaken every six months to provide assurance that ACPs are offered for patients using Garden House Hospice Care (GHHC) Hospice at Home, Continuing Health Care and Inpatient Unit services. For the purposes of this audit, an individual is considered to have undergone ACP discussions if they have any of the following three things documented on their patient record: Preferred place of care, Preferred place of death and/or Resuscitation status.



Garden House Hospice Care continues to ensure as many patients as possible have discussions about advance care planning and that this is recorded appropriately.

Transdermal Patch Monitoring

The Transdermal Patch Monitoring Chart was developed as best practice after a CQC inspection, to enable staff to record when patches are applied, removed and destroyed. A 6 monthly audit was introduced to check the documentation of patches was accurate and complete. As a result of a previous audit, the checking of drug charts at handover was introduced to try and improve documentation.



2/8 (25%) patient records had one non-compliance. Previously, 6/7 (86%) patients had non-compliances, with some having multiple issues identified. There was a significant improvement in transdermal patch documentation. Overall compliance was 96%, where previously this was 73%. These results were included in the subsequent IPU newsletter reminding staff to keep clear, compliant records.

Complaints

During the period, April 2022 – March 2023 (2021 – 2022):

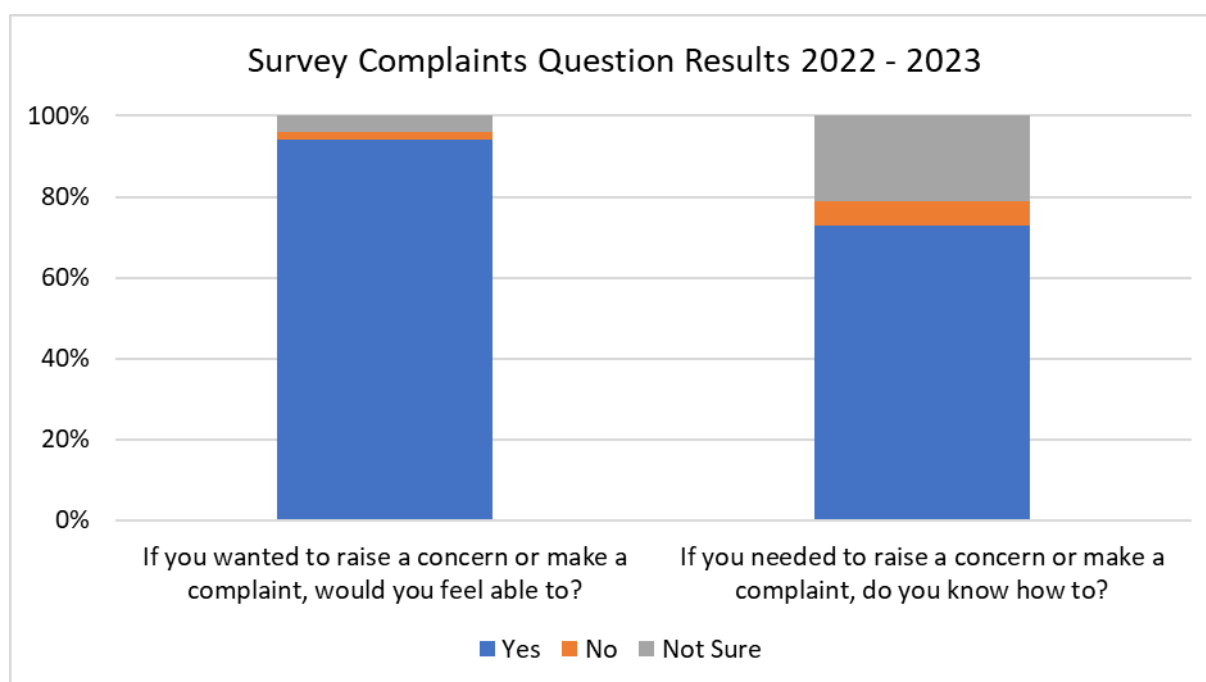
Total number of complaints	1	(0)
Total number of complaints upheld in full	1	(0)
Total number of complaints upheld in part	0	(0)
Total number of complaints not upheld	0	(0)

Concerns

During the period April 2022 – March 2023, no concerns were raised.

Complaints questions on surveys

The real time surveys have two questions relating to complaints: ‘If you wanted to raise a concern or make a complaint, would you feel able to?’ and ‘If you needed to raise a concern or make a complaint, do you know how to?’.



95% of survey responders felt able to raise a concern or make a complaint if needed. 73% of survey responders knew how to raise a concern or make a complaint if needed. GHHC provides information on raising concerns and making complaints through an information leaflet that is provided to all service users upon entering the service. These leaflets are included in patient admission packs and there is information regarding raising concerns and making complaints distributed throughout the hospice. Garden House Hospice Care encourages feedback both negative and positive from our service users with the aim of improving the service we provide.

Feedback from patients and families on services

Patient and family feedback is very important to Garden House Hospice Care. Feedback is received via surveys, comment cards, emails, letters, cards and social media posts and is logged to enable teams to learn from service users' experiences.

Comment cards: What went well for you today?

- *I have learnt a lot about using techniques to help with breathing. Also about services that are available to make life easier and tools/ equipment available. Knowing that there are people/services out there and how to access them.*
- *These ladies are very special and caring. They made sure my husband was clean and comfortable in the bed, and also spent time talking to me and giving me advice on how best to deal with his problems which means a lot. They truly are a gift.*
- *I was quite amazed how relaxed this (reflexology) therapy made me feel. It also helped with the pain in my feet. I would encourage others to give it a go. You will be surprised!*
- *My husband brightens up when the ladies come in, he feels safe. From my point of view cannot fault them. Nothing too much trouble. Makes such a difference to a traumatic time. We look forward to them coming.*
- *The happy, respectful 'vibe' that the Hospice staff provides is a strong backdrop to the essential, personal care. It lessens the inevitable feelings of degradation to a level where one can laugh at oneself!*

Comment cards: Today it would have been better if?

- *I cannot think of improving this. It's all very good.*
- *No problems – it is lovely to see the girls who are so friendly and helpful.*
- *There was a second slot available each work. Session could not be improved - great staff, friendly volunteers well led by Diane.*

Real-time patient surveys: What do you think has been of particular benefit to you?

- *The full care and attention given from the staff, from every department. It has been of the highest standard.*
- *Management of symptoms and great communication around treatment plans*
- *The clearness of what the Dr's, Nurses and Care staff are doing. The words used are understandable - broken down into layman's terms.*
- *Being 'heard' and not just listened to. Controlling pain is difficult and I feel safe, secure and cared for as different approaches are looked at.*
- *Given time to look and plan for the future. Time to recover from illness following acute admission to hospital. Open honest answers, support to accept outcome, confidence increasing.*

- *exercise sessions have been very helpful, have not been asked to do more than I am capable of. education sessions also very beneficial an added benefit was hearing the experiences of other members of the group.*
- *it is hard to pick out one thing because it seems to work very well as a complete package, but if I had to for me would be the exercise, I feel stronger and better having completed the course, the tai chi also has made me stronger and feel better, but also the information I learnt is also beneficial, so it is the whole package.*
- *The help and advice, from knowledgeable and friendly staff. Being local, and easy to get to.*
- *Meeting with professionals who actually listen to me and treat me as a person not an inconvenience.*
- *Counselling helped me to reflect on my situation by introducing different approaches to the problems I am facing. As well as thinking of things I had not considered.*
- *My counsellor was very empathetic without being condescending.*

Real-time patient surveys: What do you think Garden House Hospice Care can improve on?

- *Too much paperwork and questions during my first day, which was quite overwhelming.*
- *There is no improvement that I can think of. This is the best possible place for me and fills me with hope and I am entirely pain free.*
- *As long as Staff and Volunteers are well looked after - nothing could improve such an excellent set of teams.*
- *You are all doing a fabulous job! Not one member of staff complains about anything - or even appears to mind what they do for the patients. Bless you all and keep the good work up!!*
- *I can't think of anything, it was all that I hoped it would be and all the staff and volunteers were so kind and helpful, this is proper health care and I thank you very much.*
- *I cannot think of anything to improve system, it's very professional + advice always at hand.*
- *I would appreciate being able to attend more sessions as I have seen a great improvement.*
- *Not sure of all facilities entitled to.*
- *I think it would be nice if you offered a service to speak to same counsellor 6 months later just to see how you are getting on.*
- *Possibly quicker access but I understand the constraints you are dealing with.*
- *Initial referral was slow - but was later explained.*
- *I thought it was excellent. I wonder whether a male counsellor would have made any difference to the outcome.*

Family, Friends and Carers surveys: What do you think was of particular benefit to you and the patient?

- *Empathy, understanding, respect, friendly, efficient. Thank you, I couldn't have coped without you all.*

- *I was particularly impressed with the care and communication offered. Although F's stay was very brief as she died the same day as admission, the care and concern shown by all members of staff was amazing. Thank you.*
- *My family and I can't fault the care given to my husband in his final days by the Hospice at Home team and for the support they gave us all. We wouldn't have been able to look after my husband without their help and it allowed him to die peacefully at home which was his wish.*
- *My husband was with you only a short time before he passed. You gave him dignity; he was out of pain. I was able to stay with him all the time. I would like to thank all doctors and amazing staff for their support at this sad time for us all. Thank you all.*
- *All staff were friendly while maintaining professionalism. They gave peace of mind that I wasn't also caring for my husband. They maintained his dignity at all times and were very supportive of me as well, showing concerns for my welfare not just the patient. I knew I could call on their support at any time, not just during visits. The girls/ ladies who came are truly angels on earth. Thank you all.*
- *The nurses involved with my husband's care were beyond amazing. They made him feel at ease and always left him clean and comfortable with a cheeky smile on his face. I was so grateful for the time they spent with myself explaining things I was unsure about and reassuring me when I was feeling low.*
- *Hospice at Home was brilliant to both of us. The carers were amazing and had time for both of us. Nothing was too much trouble. And if the cares were going to be late, they/ office would ring and tell us. That was more than helpful. I can't speak to highly of the carers - brilliant! And they kept me sane!!*
- *Having someone to contact 24 hours a day was very comforting. When it became clear that my dad needed extra support, the home team offered straight away to up the number of times they came in. They were always happy to have a chat with my dad, never rushed him.*
- *Excellent service and care for my mum. It was a joy to have mum included in discussions on her treatment. The staff always spoke to her with a smile and respect.*
- *My father had continuous support throughout his time as an outpatient with your team. He enjoyed his visits to the Centre and the regular contact calls especially during the lockdown.*

Family, Friends and Carers surveys: What do you think Garden House Hospice Care can improve on?

- *Being able to see and speak to a doctor more often than just the once while mum was in your care.*
- *We were disappointed not to be offered the use of facilities at the Hawthorne Centre. When Hospice at Home first visited my husband was quite mobile, without support of physios my husband became more and more immobile. We were unaware of the Hawthorne Centre and the facilities it had to offer until my husband was admitted to the Hospice by which time it was much too late. We did feel that his mobility would have remained better with physio support. OT support at home was excellent.*

- *I think the only challenge was the significant amount of paperwork/ questionnaires that needed completing as soon as he was admitted. My dad was exhausted and just wanted to sleep and some of the questions were duplication of what he already told the doctors e.g. priorities, fears, etc.*
- *In terms of the care, nothing. Perhaps only on the visibility of the Hospice, I had not heard of the organisation.*
- *Very little. Perhaps sometimes the Hospice could seem a little short on staff but then that probably is the nature of medical work. One never knows how many patients need support at the same time.*

The NHS Friends and Family Test

In April 2020, NHS England changed the Friends and Family Test question. Garden House Hospice Care amended all surveys and comment cards to reflect this change. The following table is a collation of all surveys and comment cards received during 2022/2023 containing this question:

Thinking about Garden House Hospice Care, overall how was your experience of the service?

	2022/2023
Very good	89.5%
Good	9.6%
Neither good nor poor	0.9%
Poor	0%
Very poor	0%
Don't know	0%

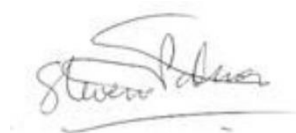
2022/2023 percentages calculated from 219 responses to the Friends and Family Test question on real-time patient surveys, Family Support surveys, comment cards and the Family, Friends and Carers Questionnaire.

External statements

Healthwatch Hertfordshire



Healthwatch Hertfordshire values the relationship it has with Garden House Hospice Care and supports the quality priorities to improve services for patients outlined in this Quality Account.

A handwritten signature in black ink, appearing to read "Steve Palmer".

Steve Palmer, Chair Healthwatch Hertfordshire, June 2023

Hertfordshire and West Essex Integrated Care Board



Hertfordshire and
West Essex Integrated
Care System



Hertfordshire and
West Essex
Integrated Care Board

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) response to the Quality Account of Garden House Hospice Care for 2022 /2023.

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) welcomes the opportunity to provide this statement on the Garden House Hospice Care (GHHC) Quality Account for 2022/23. The ICB would like to thank the hospice for preparing this Quality Account, developing future quality assurance priorities, and acknowledging the importance of quality at a time when GHHC continues to deliver services during ongoing challenging periods. We recognise the dedication, commitment and resilience of staff and volunteers, and we would like to thank them for this.

HWE ICB is responsible for the commissioning of health services from Garden House Hospice Care. During the year the ICB has been working closely with the hospice gaining assurance on the quality of care provided to ensure it is safe, effective, and delivers a positive patient experience. In line with the NHS (Quality Accounts) Regulations 2011 and the Amended Regulations 2017, the information contained within the GHHC Quality Account has been reviewed and checked against data sources, where this is available, and confirm this to be accurate and fairly interpreted to the best of our knowledge.

When reviewing the progress highlighted against priorities that were set out for 2022/23 clear improvements are evidenced. Along with system partners, GHHC have delivered education programmes to support carers. The ICB is pleased to see the progress made with the introduction of the electronic rostering system which will support planning skill mix and capacity. It is recognised that some priorities were impacted due to a number of factors and the continued focus on these areas in the upcoming year is appreciated. Looking forward to 2023/24, the ICB supports the hospice's quality priorities and are pleased to see the focus on increasing the reach of services and management of any identified inequalities. We encourage the effort towards potential efficiency savings, building resilience, and investment in staff. The planned transformation programme to achieve the 'From Good to Great' aspiration will further develop collaborative working with system partners.

The ICB recognises the challenges experienced by the hospice in 2022/23, and we look forward to a continued collaborative working relationship as well as building on existing successes and collectively taking forward needed improvements to deliver high-quality services for this year and thereafter.



Mary Emson, Deputy Director of Nursing & Quality, Hertfordshire and West Essex ICB

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