

# Quality Account 2021/22

A report detailing the quality of healthcare services  
provided by St Ann's Hospice, Greater Manchester



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# Part One

## Chief Executive's statement



On behalf of everyone at St Ann's Hospice, I'm pleased to introduce our Quality Account for 2021-2022, and confirm that our Board of Directors agree that it is an accurate reflection of our performance over the past year.

Whilst the last twelve months certainly brought plenty of challenges as we continued to provide care during the pandemic, I'm extremely proud that we've also carried on moving forward at pace – being bold and brave and continuing to innovate, improve services and reach out to new communities.

This document is only a snapshot of the hard work that has occurred across the organisation this year, and it makes me extremely proud as I'm reminded of everything that has been achieved.

Collaborations have been key, whether that's staff and volunteers working hard across teams to ensure the very best, compassionate care for patients; local healthcare professionals who have worked with us to improve the continuity of care across providers; or funders who have generously supported us and enabled that work to happen. I can't thank everyone enough – your involvement has meant we've been able to ensure our patients and their families have remained at the centre of everything we've done this year.

After celebrating our 50th anniversary in 2021, we are heading into the next half a century of care with an exciting project to build a brand new hospice in Heald Green. The new site will be on land adjacent to our current hospice and is being developed as our old building is no longer fit for purpose, with parts of it more than 100 years old and therefore not conducive to modern day hospice care. It's an ambitious undertaking, but one that we must carry out urgently – if we don't, we are in danger of having to close or reduce services in the near future.

The new hospice site, along with our recently innovated services, and wide range of inpatient, community and outreach provisions mean that we can remain an organisation of choice for people from across Greater Manchester and parts of Cheshire.

It's a privilege to have been part of the communities we serve for more than half a century, and I'd like to say a huge thank you to everyone who has played a part in that journey so far.

I'm really excited about what the future holds, and I hope you enjoy reading this Quality Account and learning more about everything we've achieved this year.

On behalf of our patients and those closest to them, thank you for your support. We really do appreciate it - you make the work we do possible.

**Rachel McMillan**

Chief Executive, St Ann's Hospice

# About St Ann's and how we serve Greater Manchester

St Ann's cares for thousands of patients affected by life-limiting illnesses (over the age of 18) and their families and carers every year. We work in partnership with acute hospitals, community services, local authority social care providers and voluntary organisations to deliver care that is special and unique to each individual person. We support patients, families and loved ones right through their illness journey, from point of diagnosis through to treatment and beyond. We have a range of services which we deliver from our Heald Green and Little Hulton sites as well as a range of community and outreach services. Around a third of our patients at St Ann's are discharged after treatment.



# St Ann's purpose and core values

## Purpose

St Ann's purpose is to provide excellent care and support to people living with or affected by life-limiting illnesses. Our purpose drives our clinical care and how we develop our services.

## Core values

During 2021, we embarked on an exciting journey together to review our hospice values. The values had been in place for over 10 years, so in our 50th year we reviewed them to make sure they still properly reflect who we are today, and will help us achieve our future vision and strategic aims. The core values are:

### *People matter*

People are at the centre of everything we do. We treat each other, and ourselves, with kindness and compassion. We value and celebrate diversity; recognising everyone as an individual.

### *Brave and bold*

We want to grow for the future, not settle. We're not afraid to do things differently, get creative, challenge ourselves and the status quo. We're ambitious in our aims, accountable for our actions and learn from our experiences and successes.

### *Lead and learn*

We're experts in what we do, and we don't stop there. We're always learning; informing and shaping the sectors we're in through education, training and research. We lead by example; sharing best practice, advancing in our fields and pioneering new approaches.

### *Together we are stronger*

Together, we're stronger and have a bigger impact than we could have alone. As a charity, we work in collaboration with supporters, partners and the communities around us. We think beyond traditional boundaries to make sure we're here for our communities for years to come.

Our core values are embedded in all aspects of our work. To ensure that staff live the values, we ask for evidence that demonstrates these behaviours within the Performance Development Review (PDR) programme. We also use values based interviewing to ensure that we recruit people with values which align with our own.



# Summary of the quality of services

St Ann's is one of the oldest and largest hospices in the UK, and we care for thousands of patients from across Greater Manchester and parts of Cheshire every year. Our services include inpatients, outpatients, community, rehabilitative and bereavement support. In addition, patients, their carers and families are supported in their community, via our Being You Centres. Our core purpose is to provide excellent care and support to people living with, or affected by, life-limiting illnesses.

St Ann's puts patient safety and quality at the heart of everything we do, and it is important to note the second extraordinary year that we have had due to COVID-19 and the challenges that the past year has brought. Throughout the reporting period of 2021/2022 St Ann's has continued to adapt and reshape services in response to the pandemic, ensuring that the services we provide meet the needs of our patients, carers, staff and volunteers and are safe in accordance with the requirements set out by Public Health England (PHE) and NHS England (NHSE). We have successfully achieved our 'Roadmap to Recovery' plan and resumed all clinical services by using a blend of virtual and face-to-face care.

During 2021/2022, St Ann's has provided the following services:

- Inpatient units
- Day therapy and interventional outpatient services
- Medical outpatient services
- Hospice@Home services (Salford and Trafford only)
- Community Specialist Palliative Care (Salford only)
- Rehabilitation services
- Patient and family support services
- 24 hour advice line
- Homeless palliative care service
- Lymphoedema service

Our services are open to people with life-limiting illnesses, regardless of race, religion, gender, sexual orientation or diagnosis. We provide care to people with a range of diagnoses including cancer, neurological conditions, and end-stage organ disease.

Our clinical services are provided by a multi-disciplinary team comprising of:

- Doctors, including Palliative Medicine Consultants
- Clinical Nurse Specialists, Registered Nurses, Trainee Advanced Practitioners, Assistant Practitioners, and Healthcare Assistants
- Therapists to support independence including physiotherapy, occupational therapy and complementary therapy
- Social workers
- Chaplain
- Counsellors
- Clinical Administrators
- Support services providing cleaning, catering and laundry services for patients

Throughout 2021/2022 we have worked in collaboration with the Clinical Commissioning Groups (CCGs) and our neighboring NHS health, social care and voluntary organisations, providing mutual aid and support for patients across Greater Manchester and Cheshire.

In November 2021 our Little Hulton site was inspected by the Care Quality Commission and we received a rating of 'Outstanding'. The report, published in January 2022 noted that services were 'delivered in a way to ensure flexibility, choice and continuity of care and were tailored to meet patients' individual needs and wishes. Little Hulton planned and provided care in a way that fully met the needs of local people and the communities served. The hospice had worked to increase the inclusion of underrepresented patient groups as part of their strategy. They worked to increase access to services for the homeless population, people with learning disabilities, people with autism, those from a range of cultural backgrounds, older patients, and those with dementia'.

## Our strategies

Whilst celebrating our 50th anniversary we have continued to work towards achieving our five-year strategy.

In 2018, we commissioned Health Innovation Manchester to provide a report to focus on the current and predicted population-based palliative and end of life care needs assessment. The clinical strategy was developed in response to the Health Innovation Manchester report and the Greater Manchester 'Heath and Social Care Commitments and Framework' for those people with palliative and end of life care needs.

As part of the delivery of the Greater Manchester commitments, in partnership with each locality, we have reviewed their own self-assessment baseline of their palliative and end of life care offer against the national 'Ambitions for Palliative and End of Life Care – A Framework for Local Action'.

Our strategies focus on the needs of our patients, their loved ones, volunteers, collaborators and key stakeholders. They continue to be innovative and aspirational, bringing communities together in order for people to receive the care that they deserve, supporting the importance of empowerment, sustainability and personalisation. We will continue to work towards achieving our strategies in the coming year and we will use them as a benchmark to measure our progress and to identify and drive improvement.

## Progress against our five strategic aims

### 1. To provide world class innovative care

Over the last year, St Ann's has:

- Responded to national, regional and local guidance to support and maintain the ongoing delivery of services.
- Continued to adapt and reshape services in response to the COVID-19 pandemic, ensuring that the services we provide meet the needs of our patients, carers, staff and volunteers.
- Facilitated patients and visitors with choices around decision-making; for example, video visits using tablets or phones when we have had COVID-19 restrictions remaining in place relating to visitors.
- Worked closely with colleagues across Greater Manchester to ensure a coordinated response, manage pressures on health and care services in an integrated way.
- Increased levels of care delivered using a blend of virtual and face-to-face consultations.
- Continued medical outpatient clinics in our Little Hulton and Heald Green sites. Face-to-face reviews have been safely reintroduced but a hybrid approach has continued following the successful introduction of video and telephone consultations during the pandemic.
- Further embedded a culture of rehabilitative palliative care with a focus on personal priorities and goal setting.
- Continued to be loud and proud as part of Greater Manchester's thriving hospice movement. Our strong, unified voice of Greater Manchester's Hospices has enabled us to influence the ongoing developments across Greater Manchester.
- Continued to be committed to measuring and reporting on the impact we have to the health of people in our care, in addition to their experience, by using patient outcome measure Integrated Palliative Care Outcome Score (IPOS) and investing in the reporting of IPOS.
- Increased the provision of Safeguarding Lead time within the organisation.
- Successfully completed a Single Nurse Administration of Drugs (SNAD) pilot, enabling staff to provide more timely and responsive symptom control for patients.
- Secured a robust supply of, and training plan for, Personal Protective Equipment (PPE) including FIT Mask Train the Trainer to ensure staff, patients and visitors were safe and services could continue to function.

- Improved admission and discharge planning by enhancing the communication and coordination between our inpatient units and community settings.
- Continued to deliver joint neurology/palliative care clinics throughout the pandemic (virtually and face-to-face). The Heald Green site continued to offer a joint Motor Neurone Disease clinic alongside the neurology team from Northern Care Alliance NHS Foundation Trust..
- Continued to embed seven-day working across both the hospital and community provisions that is bespoke to individual need.
- Increased the number of discharges from our inpatient units supporting patient choice and partnership working with community colleagues.
- Continued to provide a consultant-led service over seven days on both sites. This has facilitated the delivery of enhanced symptom control to our inpatients and has improved patient flow. We have seen an increase in weekend admissions and more timely discharges from the inpatient units.
- Provided ongoing delivery of specialist palliative medicine virtual and clinic support to those living in the community but requiring this specialist support.
- Improved our reporting and management of incidents by reviewing and updating our electronic incident management system and providing training across the organisation.
- A weekly Prescriber's Huddle (Puddle) has been introduced on both sites to share learning from prescribing incidents and offer an opportunity for a brief update on different drugs each week.
- Improved our management and reporting of risks, by developing and launching our own risk management system.
- Launched The Christie NHS Foundation Trust Systemic Anti-Cancer Therapy (SACT) and Phlebotomy Service, hosted at our Little Hulton site.
- Made significant changes to our quality improvement group to ensure that the process for proposing and updating projects is embedded into practice and there is effective oversight.



## 2. To be an organisation of choice

Over the last year, St Ann's has:

- Successfully delivered a flu vaccination campaign for staff.
- Provided a COVID-19 secure environment within all areas of hospice.
- Provided access to COVID-19 vaccinations for staff and patients.
- Provided an asymptomatic COVID-19 testing programme for patients, visitors, volunteers and staff.
- Continued to deliver Schwartz Rounds for staff to talk about the emotional challenges of working at the hospice, particularly through the second year of the COVID-19 pandemic.
- Held our second Wellbeing Festival in January 2022, which focused on the health, wellbeing and resilience of our staff and provided links to internal and external support resources and provision.
- Continued to develop our staff, associate specialist and speciality (SAS) doctors, ensuring that we are an organisation of choice, attracting a high standard of applicant for these medical roles.
- Continued to support the development of two Advanced Nurse Practitioners at either site.
- Supported our first Trainee Assistant Practitioner in psychological support to complete the Health & Social Care foundation degree. This individual has now progressed to the role of Assistant Practitioner.
- Been able to recommence supporting the training of numerous grades of medical staff and undergraduate medical students, including supporting an additional General Practitioner training post at Heald Green. The hospice remains a popular training placement.
- Provided three secondment opportunities for staff, to deliver three specific projects in collaboration with external organisations.
- Supported staff from across the organisation to apply for various apprenticeship programmes.
- Continued to update and improve our training system, including promoting its usage and providing drop-in training sessions for staff.
- Continued to promote and embed the mental health first aiders.
- Achieved Gold standard for Investors in People.
- Continued with our non-clinical apprenticeship programme. Two staff undertaking these programmes received recognition awards for their dedication throughout the year.
- Been shortlisted for an international third sector award for Investors in People.
- Held our staff and volunteer longer service awards (online) which recognised their contribution and commitment to the hospice.
- Produced a wellbeing postcard around five ways to wellbeing which was launched in our online Wellbeing festival.
- Held staff Wellbeing and Resilience workshops (offered by the Greater Manchester Resilience Hub) focusing on how to cope in challenging and stressful times.
- Been proud that, by year 4 (2021) of introducing apprenticeships (clinical and non-clinical) to St Ann's we have now invested more than £120,000 (through internal and external apprenticeship levy funding) in workforce development, which equates to approx. 3,656 hours, supporting our vision of strong career development.



### 3. To continue to develop a values-based culture in which there are high performing individuals and teams

Over the last year, St Ann's has:

- Refreshed and relaunched the hospice's values through rigorous stakeholder engagement and the invaluable input of our staff from across the organisation, ensuring the values are key to their practice.
- Reviewed, developed and updated our mandatory training plan aligning to our mandatory training policy to ensure any gaps have been identified and bridged.
- Maintained a full programme of mandatory training throughout the past 12 months.
- Maintained a full programme of medicine management updates for all clinical staff.
- Continued to work cross-site, with our clinical leadership team sharing learning, best practice and providing peer support.
- In collaboration with inpatient staff, relaunched link groups using a structured, documented approach to give staff the opportunity to develop skills and knowledge in specific areas.
- Updated clinical e-learning modules, including investing in an aseptic non-touch technique (ANTT) module to ensure staff can access the latest evidence based best practice information.
- Ensured all medical staff have annual appraisals and are subject to revalidation with the General Medical Council.
- Encouraged medical staff engagement with the Aspire leadership programme and Leadership Exchange Network.
- Continued to prioritise learning and development of the teams; for example, a number of our senior nurses are completing their Masters degrees.
- Continued to explore collaborative opportunities with NHS Foundation Trusts and other providers of health and care, sharing best practice through a heightened spirit of mutual cooperation during the second year of the COVID-19 pandemic.
- Supported staff to access external coaching opportunities.
- Increased the provision of band six nurses on the inpatient units, supporting staff development and leadership.
- Continued to have all consultants working across different settings in the Greater Manchester area allowing better collaboration between services; for example, input to multi-disciplinary teams in Salford and Stockport.
- Enabled a number of secondment opportunities within our clinical and practice development departments including Learning Disabilities Facilitator and Clinical Educator.
- Launched our Digital Champion programme, supporting staff with the ICT skills and knowledge that they require to perform their duties.
- Commenced work to develop career pathways within the Community Specialist Palliative Care Team.
- Supported staff in the clinical areas caring for patients with a tracheostomy including training and clinical competencies associated with tracheostomies.
- Simplified the incident management system to ensure we have a straightforward process and no barriers to staff reporting incidents.
- Relaunched the Quality Improvement Group so staff are supported and enabled when looking at quality improvement projects and audits.
- All appropriate training requests were granted.
- Introduced a competency based framework for determining pay and pay progression. The skills and competencies will help to ensure we have high performing individuals and teams.
- Reviewed and amended the Personal Development Review framework and forms to reflect the new hospice values and the competency based framework.
- Created a portfolio of e-learning for staff and volunteers to ensure they have the skills and knowledge to perform in their roles and across the organisation.

- Embedded the St Ann's 'Leadership Behaviors' into the competency frameworks.
- Continued to develop leaders via our Leadership Exchange Network with the design being in line with strategic vision, values and leadership behaviors.
- Created a Leadership Exchange Network Bitesize initiative to support continued leadership development, in response to leadership feedback on their training and development needs.
- Reviewed and delivered the Human Resources Masterclass to ensure high performing leadership and management.
- Delivered training to a cohort of 16 managers who have now completed 2021 Inspire/Aspire leadership development programme.
- Continued to review and update the 'Managers Human Resources Toolkit'.
- Secured external sponsorship/funding under the Apprenticeship Scheme to enable six individuals to complete or commence apprenticeships.



## 4. To develop appropriate environments and outreach services to facilitate world class specialist palliative and end of life care

Over the last year, St Ann's has:

- Continued to offer a joint Motor Neurone Disease clinic alongside the neurology team from Northern Care Alliance NHS Foundation Trust.
- Maintained a full service of the homeless palliative care programme, providing support to this highly vulnerable population.
- Collaborated with our partners in the Greater Manchester (GM) Hospices group on a variety of joint initiatives, to help ensure our hospices survive, thrive and continue to play a vital role in ensuring that people from all corners of GM can equitably access specialist, supportive, high quality care when they need it.
- Provided safe visiting on the inpatient units throughout the second year of the pandemic and facilitated virtual visiting alongside, regularly reviewing and amending our visitor's policy in line with best practice guidance.
- Refurbished the cafe and reception at our Little Hulton site.
- Gained planning permission for a new hospice to be built on the land adjacent to our Heald Green site.
- Purchased new equipment to ensure the hospice is able to deliver high quality services for patients, visitors and volunteers including a new mortuary trolley and access ramps for our outpatient building.
- Ensured that St Ann's meets the requirements arising from both the Information Commissioner's Office (including General Data Protection Regulations) and the NHS's information governance code.
- Responded to enquiries from data subjects regarding the information we hold about them, and have respected their wishes in accordance with regulation.
- Reached out to a greater number of external organisations to ensure that our Homeless Palliative Care Service is continually growing and awareness is raised.
- Produced a film highlighting the need for palliative care services for the homeless community, which has been used nationally and was nominated for a World Health Organisation award.
- Successfully bid from the Salford Clinical Commissioning Group Innovation fund to introduce a Learning Disability and LGBTQ+ post in Salford.
- Gained recognition for our Homeless Palliative Care Team, which was awarded the Mayor's Special Recognition Award in the Greater Manchester Health and Care Champion Awards.
- Supported the Jewish Dying Matters week.
- Provided specialist palliative care advice via our advice line 24-hours a day, seven days a week, 365 days a year.
- Implemented a Learning Disability Palliative Care Coordinator to scope out the provision of care for people with advancing disease and learning disabilities in Stockport in collaboration with Stockport health and social care services.
- Led on an online training programme with our Homeless Palliative Care team, 'Community of Practice', in collaboration with delegates from health, housing, mental health and social care in Salford.
- Worked in collaboration with the Palliative Care Strategic Clinical Network to develop an educational package looking at the inequality of services to specific community groups.
- Redeveloped and re-landscaped our interior gardens at our Little Hulton site.
- Conducted a painting programme at our Heald Green site including interior doors and exterior plaster reliefs.
- Installed a ramp system to allow wheelchair access to out-patients areas at our Heald Green site.
- Conducted projects to remove historic furniture and replace with modern alternatives at both sites.

- Created a dedicated space at Little Hulton to allow collaborative working with The Christie NHS Foundation Trust for the Systemic Anti-Cancer Therapy clinic.
- Made three easy access videos to help external organisations with recognising dying, symptom control and advanced care planning.
- Delivered various education packages for external organisations using virtual and face-to-face methods.



## 5. To continue to be financially viable

Over the last year, St Ann's has:

- Recruited new donors and new income via our Facebook challenge events.
- Grown our third party sporting campaign by 83%.
- Recruited new legacy donors through a targeted campaign which should see results in future income of circa £250,000.
- Secured a number of gifts and pledges for our new building totaling £1.3million.
- Developed a digital fundraising strategy for transformational growth in digital giving.
- Enabled our Data Protection Officer to provide expert information governance support and guidance under a Service Level Agreement for three other Greater Manchester hospices.
- Developed our new Trading Company Corporate Strategy, 2022-2027.
- Implemented monthly clearance sales at our warehouse raising more than £16,000.
- Closed our Cheadle and Monton shops due to increased rent and none performance.
- Created a bridal wear shop within our Stockport town centre shop which has seen increased sales and publicity.
- Closed our Amazon online selling platform to focus on eBay sales.
- Introduced a weekly lottery member email communication.
- Continued to promote our lottery both face-to-face and remotely (by telephone) resulting in a 4% increase in weekly plays.
- Promoted our lottery with paid advertisements on social media.



## Our future plans, aspirations and forward direction

### What are our plans for 2022/2023?

#### Organisational:

- Embed our new values with our workforce and other stakeholders.
- Develop our new Organisational Strategy which will span 2023-2028.
- Review, prioritise and carry out the Organisational Development Strategy actions for 2021-2024.
- Continue to embed and promote the new competency frameworks.
- Continue to work with the Greater Manchester Hospice group to support our value of 'Together we are Stronger'.
- Review and implement recommendations from our Investors in People report to strive to achieve the next level in three years.
- Build strong engagement with our volunteers as they are welcomed back to St Ann's following the pandemic.
- Continue to develop and build career pathways concentrating on clinical services initially.
- Work and develop inclusivity and diversity initiatives across the hospice utilising existing groups (e.g. EDI).
- Continue improvement work around our electronic training and education system.

#### Clinical:

- Review and seek opportunities to work with the newly forming Integrated Care Services (ICS).
- Collaborate with services across Greater Manchester to support patient flow.
- Introduce a formal Learning from

Deaths process including the use of structured judgment reviews and regular meetings.

- Review and streamline after death processes with alignment to requirements of the new Medical Examiner role.
- Maximise our community offer, including interventional outpatient clinics, Hospice@Home (Salford & Trafford).
- Continue to maximise our inpatient units by supporting patient flow, and timely and responsive discharges.
- Seek to be a research active organisation. In 2022/23 we will continue to strengthen our partnership with Lancaster University to this end.
- Embed the St Ann's Audit Programme by undertaking regular audits to ensure compliance with legislation, policy and best practice.
- Review data flow and use of services to maximise service provision in line with our clinical strategy.
- Attend and present at national, regional and local conferences, promoting our work and seeking opportunities to learn and develop.
- Review the clinical team education and training programme, prioritising and enabling protected time for clinical team learning, development and supervision.
- Continue to undertake our five year project which started in January 2020 to streamline services for people in the

homeless community.

- Improve access and equity to hospice services for hard to reach communities, including learning disabilities and LGBTQ+. Our LGBTQ+ and Learning Disabilities Palliative Care Coordinators will start in April 2022.
- Launch our external education and training programme, including delivering four new packages of training for internal and external staff, using a blended approach. Modules will include 'Pick and Mix' sessions for palliative care, skills for teaching and facilitation, advance care planning and various one day workshops.
- Embed Single Nurse Administration (subject to evaluation) at both of our inpatient units.
- Further develop the career pathways, supporting staff development and talent management within clinical services.
- Undertake a piece of work to review our current establishment and safe staffing guidance to ensure that it is current and reflective of patient need.
- Maximise the holistic provision of care in collaboration with external providers.
- Launch The Christie NHS Foundation Trust' Phlebotomy Service at our Heald Green site in May 2022.
- Launch our Lung Multi-Disciplinary Team Clinic at The Neil Cliffe Centre which will provide support and specialist palliative care advice.

## Facilities management:

- Refresh the ICT infrastructure, server system and network to ensure compliance with both current information governance legislation and the demands of a sophisticated healthcare service.
- Develop the catering offer for patients, visitors and staff into a high specification service providing the required level of quality, choice and nutrition.
- Open the newly refurbished Little Hulton cafe to visitors to create an income stream and additional focus point for the organisation.
- Commence the secondary stages of the Little Hulton re-development by beginning the consultation of 'Phase 2'.
- Continue to develop services with The Christie NHS Foundation Trust in a dedicated space at Little Hulton.
- Commence the new build of our Heald Green site.

## Fundraising, Trading Companies and Finance :

We plan to begin implementing and working towards our Trading Company Corporate Strategy 2022-2027 for which our vision statement is to be the most profitable trading subsidiary in the hospice sector. Our strategic objectives to achieve this vision are:

- To maintain robust annual growth in lottery members and profit.
- To ensure every shop in our portfolio is individually profitable.
- To exploit changing consumer habits by growing our online operation.
- To improve the efficiency of business processes using technology.
- To explore new business opportunities and commercial partnerships.

We also have plans to:

- Run a targeted volunteer recruitment campaign.
- Deliver a targeted furniture donation campaign and furniture shop promotion campaign.
- Develop our online operation.
- Implement a new Electronic Point of Sale (EPOS) system
- Increase electronic Gift Aid sign up and declaration communications.
- Continue to promote our lottery face-to-face, by telephone and online.
- Develop a Prize Draw to allow data capture for future campaigns.



## Forward direction:

At St Ann's Hospice we pride ourselves in striving to achieve world-class palliative and end of life care for our patients, their loved ones and care givers. We will continue to work towards achieving our five- year strategy during 2022 whilst embedding our clinical strategy and new exciting hospice values which our staff and stakeholders have helped to develop.

We will endeavor to take a collective approach to review, reflect and monitor the quality of services to ensure we are working effectively and efficiently, and to help us to drive improvement. We will face achievements and challenges together whilst listening to, and learning from our staff, patients, their families and volunteers to shape, inform and develop our new strategy.

This Quality Account is available on NHS Choices and the St Ann's website ([www.sah.org.uk](http://www.sah.org.uk)) for public view.



# Part Two

## Our services

St Ann's works in partnership and our services are commissioned by seven Clinical Commissioning Groups, four of which are in a consortium led by Stockport and including Manchester, Salford and Trafford. This approach and cross-site setting provides opportunities and supports patient choice allowing us to deliver the best care and achieve good outcomes for the population regardless of diagnosis or care setting. Our services are currently delivered across two sites; Heald Green and Little Hulton. We serve a population of just over two million across Greater Manchester and Cheshire.

## Statutory Requirements

### Services

During 2021/2022, St Ann's Hospice provided nine relevant health services.

St Ann's Hospice has reviewed all the data available to them on the quality of care in all nine of these relevant health services. This information can be found within part three of this Quality Account.

### Income

The income generated by the relevant health services reviewed in 2021/22 is estimated to represent 45% (estimated at time of publication) of the total income generated by St Ann's Hospice.

### National Clinical Audits, local clinical audits and national confidential enquiries

During 2021/2022 the number of national clinical audits and national confidential enquiries which covered the relevant health services that St Ann's Hospice provides was NIL.

The number of national clinical audits and national confidential enquiries that St Ann's Hospice was eligible to participate in during 2021/2022 was NIL.

The reports of twelve local clinical audits were reviewed by the provider in 2021/2022 and St Ann's Hospice intends to take the following actions to improve the quality of healthcare provided:

- Continuation of the single nurse administration pilot cross-site prior to making this standard practice during late 2022 (subject to evaluation).
- Continuation of our project to develop and improve our electronic patient record system.
- Continued evaluation and improvement of our

electronic TTO (to take home) system to reduce errors and align to best practice and current legislation.

- Introduction of a standard good record keeping audit to improve patient records and align to current standards and best practice.
- Reinvigoration and standardisation of our routine audit programme increasing the standard clinical audits to 18 to encompass all key areas of clinical care and monitor compliance against our policies and best practice guidance.

### Research

The number of patients receiving relevant health services provided or sub-contracted by St Ann's Hospice in 2021/2022 that were recruited during that period to participate in research approved by a research ethics committee was NIL.

### Quality improvement and innovation (CQUIN) goals

St Ann's Hospice's income in 2021/2022 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework. This was because the operation of CQUIN has remained suspended for all providers due to the COVID-19 pandemic. St Ann's was not required to implement the CQUIN requirements, carry out CQUIN audits nor submit CQUIN performance data. However, we have continued to actively participate in the CQUIN and further details are provided in part three of this Quality Account.

## Regulatory Information

St Ann's Hospice is required to register with the Care Quality Commission and its current registration status is registered with no conditions attached to the registration.

The Care Quality Commission has not taken enforcement action against St Ann's Hospice during 2021/2022.

St Ann's Hospice has not participated in any special reviews or investigations by the Care Quality Commission during the reporting period.

## Information Governance

St Ann's Hospice did not submit records during 2021/2022 to the Secondary Uses service for inclusion in the Hospital Episode Statistics which are included in the latest published data.

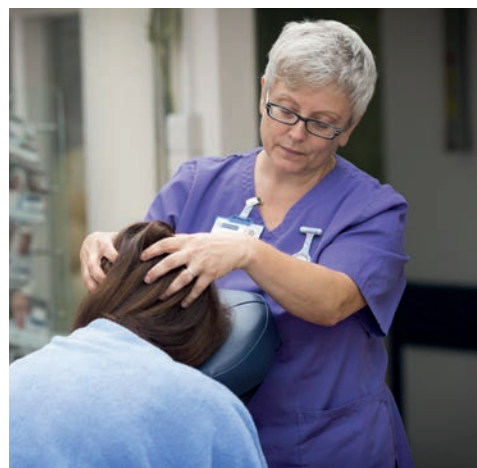
St Ann's Hospice submitted the Data Security and Protection (DSP) toolkit by the deadline of 30th June 2021 and all mandatory requirements were met.

St Ann's Hospice was not subject to the Payment by Results clinical coding audit during 2021/2022 by the relevant authority.

St Ann's Hospice has taken the following actions during 2021/2022 to improve data quality:

- All policies and procedures are now in date, in line with the three-year review cycle.
- In line with the policies and procedures, the Information Governance Team has supported the teams consistently, with the implementation of new technologies and processes to support hospice activities.

- The Information Governance Team completed all mandatory training and the Data Protection Officer attended an ISO27001 Lead Implementer course to support the Information Security management programme as it moves forward.
- The Information Governance group was aligned with other committee meetings and is now scheduled quarterly. Information governance is now included at the quarterly Audit Committee to ensure appropriate governance structures and processes are in place.
- The Information Governance Team has responded to a total of three reportable incidents, and has liaised with the relevant authorities to ensure appropriate corrective and preventative action was taken. Recommendations from the Information and Communications Technology, Information Governance Team, Information Commissioners Office, National Cyber Security Centre and Greater Manchester Police have been escalated to the Executive Leadership Team for consideration. This has ensured the organisation's network and data is protected from confidentiality, integrity and availability incidents.
- During 2021-22, a new Clinical Record Keeping and Data Quality Policy has been ratified to make improvements within the electronic patient record system. In addition, the electronic patient records system reconfiguration project has been initiated, which will support data quality and data reporting moving into 2022-23.



## Areas for Improvement

### Priorities for improvement 2022/2023

Area	Aim	How we will measure ourselves	How we will report back on improvements
Clinical	Maximise the inpatient unit provision and provision of community services	Achievement of KPIs Data reviews of referral journeys Reviewing services – increase in interventional outpatient clinics	Internal reporting via our quarterly Clinical Quality and Performance Committee External reporting via our Clinical Commissioning Group Contract meeting
Clinical	Increase the provision of education and training opportunities for internal and external stakeholders	Attendance at educational sessions Delegate feedback	Internal reporting via our quarterly Clinical Quality and Performance Committee External reporting via our Clinical Commissioning Group Contract meeting
Clinical	Implementation of e-prescribing	Steering group set up comprising of clinical and non-clinical professionals from across Greater Manchester to draft an approach to this large work stream. We have sought and secured external funding to support this piece of work  When implemented the e-prescribing module includes inbuilt auditing tools that will be used to monitor prescribing practices and the administration of medicines	Internal reporting on progress via our Clinical Quality and Performance Committee. External reporting on progress via Greater Manchester steering group meetings and externally attended pharmacy meeting
Organisational	To improve the recording and management of complaints	Usability of new electronic complaints system and associated policy Internal audit Stakeholder feedback	Internal reporting via our quarterly Clinical Quality and Performance Committee, Board of Trustees and Executive Leadership team meetings External reporting via our Clinical Commissioning Group Contract meeting Shared learning from complaints at relevant team/departmental meetings
Facilities Management	Improve all aspects of Information Technology infrastructure	Review and analysis of: <ul style="list-style-type: none"> <li>Reduction in downtime of critical software</li> <li>Reduction in the number of successful cyber attacks</li> <li>Increase in speed of operating systems</li> <li>Improvements to information governance and GDPR data handling</li> </ul>	Internal reporting via relevant team/departmental meetings Bi-annual Facilities Management and Support Services Meetings Board of Trustees/Executive Leadership Meetings

## Improvements in 2021/2022

Area	Our aim was to.....	We achieved.....
Facilities Management	Progress the refurbishment of our Little Hulton site to ensure we have an appropriate environment in which to deliver care and treatment.	<p>Completion of phase one of the refurbishment of our Little Hulton site. This included:</p> <ul style="list-style-type: none"> <li>Consulting with architects to create a number of plans</li> <li>Consulting with staff through focus groups and displaying plans for staff to comment/input.</li> <li>The development has been completed as a shared space for patients, families and staff. It is bright, welcoming and accessible.</li> <li>The gardens have been remodelled extensively allowing access to patients of varying mobility.</li> </ul>
Facilities Management	<ol style="list-style-type: none"> <li>Reassess and re-evaluate the development plans for our Heald Green site to ensure the plans meet the needs of our patients, families, visitors, volunteers and staff.</li> <li>Begin progress with development plans with a view to mapping out a schedule for the development.</li> </ol>	<ol style="list-style-type: none"> <li>Plans were reassessed and re-evaluated with engagement from stakeholders from key areas and departments to ensure specifications were correct, this detailed process included planning down to individual rooms using data sheets.</li> <li>A detailed schedule of the week by week project development has been created by a contracted third party. The schedule is complete and spans from the start of the project to the finished realisation and hand over.</li> </ol>
Clinical	Single nurse administration programme to improve patient care and treatment; for example, timeliness of pain control.	The successful completion of the single nurse administration pilot at our Little Hulton site, and rollout at Heald Green. Initial feedback from the single nurse administration nurses at Little Hulton is positive and supports the aim for timely and responsive symptom management for patients.
Clinical	<ol style="list-style-type: none"> <li>Continue to develop the operability of the electronic patient record system including ensuring we have effective care plans which are safe and appropriate for patients.</li> <li>Continue to develop our systems and processes to ensure that information is shared appropriately and in line with legislation.</li> </ol>	<ol style="list-style-type: none"> <li>A new electronic patient record training record which will allow us to reconfigure our electronic patient records.</li> <li>Purchase of EMIS X Analytics to ensure more meaningful clinical data.</li> </ol> <p>Development of a robust Clinical Data Business Continuity Plan, supporting clinical teams.</p>
Clinical	Development and implementation of a 'clinical roadmap to recovery' which aims to look at accessibility to services, resuming services safely and learning from the COVID-19 pandemic. This will support our existing work stream around seven day services.	The Clinical Services 'Roadmap to Recovery' has enabled the safe resumption of all clinical services including the safe use of aerosol generating procedures (AGPs), face-to-face outpatient appointments, onsite patient group sessions in our Being You Centres, home visits by our rehab teams, and introduction of hosted services including The Christie NHS Foundation Trust Systemic Anti-Cancer Therapy and phlebotomy clinics, and tumour specific specialist nurse led clinics.

# Part Three

## Collaborative working

During the past year, St Ann's has continued to work collaboratively, providing support wherever possible and building on the lessons learned and positive alliances formed as a result of the COVID-19 pandemic. We have worked to strengthen these alliances with our external partners, key stakeholders and the wider Greater Manchester community to enable us to move forward effectively.

During 2021/2022, we have participated in and collaborated with the following:

- Clinical Commissioning Groups, supporting the transition to Integrated Care Systems.
- Lancaster University research.
- Salford University for the launch of the Clinical Leadership in Action (CLiA) MSc programme.
- Manchester University NHS Foundation Trust's Infection Prevention Control team, which has been pivotal in ensuring safe practice in line with national and local best practice guidance. This relationship has meant we have been able to respond quickly and effectively to changes and updates. We have also benefited from training, audit and onsite verification of our safe practice.
- Our Director of Clinical Services is the Executive Clinical Leads in Hospice and Palliative Care (ECLiP) representative for the North West. The ECLiP is a forum for executive clinical leaders engaged in the strategic planning and operational delivery of contemporary hospice care.
- Jewish Dying Matters team in Salford.
- LGBTQ+ groups in Salford.
- Learning Disabilities groups in Stockport and Salford community and acute teams.
- North West Hospices – St Ann's has continued to be a North West Personal Protective Equipment (PPE) Hub.
- Greater Manchester Hospices and Networks - regular telephone calls and meetings with other locality and palliative care leads to maintain best practice and share learning.
- Homeless Palliative Care Service delivered training to Salford Health and Social Care services.
- Homeless Palliative Care Service working in collaboration with the Manchester Pathway Hospital Service team and Manchester Royal Infirmary.
- Strategic Clinical Networks to review how the Integrated Palliative care Outcome Scores are delivered and reported.
- Manchester Metropolitan University team's Good Employment Learning Lab to develop managerial skills and offer leadership development (e.g. coaching, conflict resolution etc.).
- External consultants to develop our online teaching skills and leadership development; for example, root cause analysis and problem solving workshops.
- The Christie NHS Foundation Trust to develop training and information videos.
- Royal College of Occupational Therapists Major Conditions day conference, with panel representation.
- Various external training organisations to upskill staff including our Mental Health First Aiders.
- Greater Manchester Resilience Hub for the delivery of training and support for various team meetings to support the wellbeing of staff.
- Human Resources North West Hospice Group.
- Greater Manchester Working Together Group which focused on Organisational Development to share best practice, methodologies etc.
- Greater Manchester Levy Matching Service and local organisations to support further apprenticeships.
- Pure Innovations to support diversifying our talent pool.
- Salford University for the development and production of our accredited Clinical Leadership in Action programme. The first cohort started in 2021.
- External systems developer to improve our current learning management/training systems to support users and managers.
- Investors in People Assessor to support the re-accreditation process and taking action in response to their recommendations.

- Greater Manchester Education Group to review the mandatory e-learning offer and systems across the city.
- External engagement with other hospices across the North West to both benchmark and share best practice in relation to catering, housekeeping and maintenance.
- Students from The University of Manchester to create surveys for cafes/coffee shops.
- The Christie NHS Foundation Trust to develop new patient services at our Little Hulton site which will support over 80 patients a week to enable them to receive care closer to home.
- External third party companies to produce plans and layouts for our new build at Heald Green.
- Local Authorities to support safeguarding assurance.
- Greater Manchester and Eastern Cheshire Strategic Clinical Networks - our Medical Director has held a leadership role and is the Palliative Care Clinical Lead across Greater Manchester.
- Greater Manchester Hospice Forums including Medical Directors Forum and Director of Clinical Services Forum.
- Greater Manchester Health and Social Care Partnership (GMHSCP), Greater Manchester Hospices and in conjunction with the Strategic Clinical Network regarding seven-day access, non-consultant senior medical director roles, changes to the palliative medical training curriculum and how all those variables may impact on hospice services.



## Patient facing services

### Clinical teams

Our clinical teams at St Ann's are led by the Director of Clinical Services who is our Senior Information Risk Owner (SIRO). The Director of Clinical Services is supported by our Heads of Clinical Services at each respective site. Our clinical teams consist of:

- Inpatient unit teams including Ward Managers, Ward Sisters, Advanced Nurse Practitioners, Nurses, Associate Nurse Practitioners, Assistant Practitioners and Healthcare Assistants.
- Being You Centre teams including Team Leaders, Key Workers, Healthcare Assistants, Therapists and a Music Facilitator.
- Hospice@Home Team including Team Lead, Nurses and Healthcare Assistants.
- Community Specialist Palliative Care Team which includes specialist nursing staff
- Rehabilitation Team encompassing a wide team of both Allied Health Care Professionals and Therapists including Physiotherapists, Occupational Therapists, Lymphoedema Practitioners, Assistant Practitioners and Complementary Therapists.
- Pharmacy services including specialist palliative care Pharmacists and Pharmacy Technicians.
- Homeless Palliative Care Co-ordinator.
- Patient and Family Support Team including the Bereavement Team, Chaplaincy Team, Counsellors, Social Workers and a Trainee Associate Practitioner.
- Clinical administration teams including Clinical Administration Co-ordinators, Medical Secretaries, Clinical Services Secretaries, Ward Clerks and an Admissions Officer.
- Clinical Volunteers

Our teams have continued to work hard throughout the second year of the pandemic to maintain our services and face the new challenges the last 12 months has brought with flexible, positive and adaptable attitudes. We have continued to make the safety of our patients, visitors, staff and volunteers a priority, maintaining our rolling programme of risk assessments to ensure the safety of everyone.

Our inpatient units have operated a full inpatient service and we have seen admission numbers reach full capacity again throughout 2021/2022. This has been supported by our work around access to seven-day services, meaning that admissions can be taken on weekends and bank holidays. Our staff have continued to support patients and their families with all aspects of their care, working tirelessly to provide them with information to make informed choices including preferred priorities of care, nutrition and hydration, medicines and visiting.

Our Being You Centres resumed onsite services in August/September 2021 having moved to virtual platforms in the first year of the pandemic. Feedback obtained from staff and patients indicated there was a need for face-to-face, virtual, and online resources; the biggest demand being for face-to-face. As a result of the team undertaking a rolling evaluation of the services, our Being You Centres now offer tailored service to meet individual needs. This ensures that medical, rehab, and wellbeing services are available for all patients to access. The team has continued to support both staff and visitors through the COVID-19 testing programme. During the latter part of the last 12 months, the team has been supporting The Christie NHS Foundation Trust Systemic Anti-Cancer Therapy and Phlebotomy clinic at our Little Hulton site. Our Heald Green site has also been hosting a Stepping Hill HPB clinic (Hepatic, Pancreatic and Biliary) and upper GI (gastro-intestinal) joint clinic once a month.

Our Community Specialist Palliative Care Team has continued to provide a full service during 2021/2022 and has seen continuing increases in referral numbers during this time. The team has delivered specialist clinical leadership and expertise for patients, our staff, community and acute hospital staff throughout the past year. The team has continued to provide adapted services when required including video and telephone consultation.

Our Homeless Palliative Care Co-ordinator has continued to provide a full service throughout 2021/2022. The second year of this service has seen a set of key aims developed which were:

- Co-ordination of a flexible and responsive care pathway for people experiencing homelessness with advanced ill health or terminal prognosis;
- Increasing the knowledge and confidence of homeless sector staff supporting people in the last year of life;

- Facilitating earlier identification of people in last year of life;
- Improving multi agency working;
- Increasing the likelihood that individuals are cared for and die in a place of their choosing;
- Acting as an advocate for clients' entitlements and challenge inequalities and exclusions and ensuring people can approach the end of their life with support, respect, dignity and choice.

Our Hospice@Home Team has maintained a full service throughout 2021/2022. This service has successfully triaged all referrals within 48 hours, assessed the needs of patients at each visit and continued to provide ongoing emotional and psychological support for patients and their families.

Our Rehabilitation Team resumed the majority of services throughout 2021/22 with some services being reintroduced in the latter part of the year. All teams have risk assessed and adapted services wherever possible in order to continue providing these vital roles. For example, the team designed and produced videos for our 'Breathing Space' programme to enable this to be delivered face-to-face or virtually according to service or individual needs. Our Complementary Therapists were able to provide services from summer and are currently supporting volunteers to return to enable more patients to be able to access these services. The Dietitian post was recruited to during the year which has enabled the nutritional needs of patients and how the hospice meets these needs effectively to be reviewed. The team had played a pivotal role in the supporting the culture change to a more rehabilitative one. One example of this is the development of goal setting training sessions as part of the mandatory training day to enable all nursing staff to receive this and develop their skills.

Our Patient and Family Support Team has continued to provide a full service to support our patients, their families/carers, volunteers and staff throughout 2021/2022. The team has remained flexible and responsive to meet the spiritual, psychological and social needs of our patients and their carers. The team continues to support the mental health first aid initiative and facilitates regular Schwartz Rounds for staff and volunteers. The team has also supported the Christie Hospital in the provision of clinical supervision to their Social Work Team.

Our Pharmacy Team has continued to provide pharmacy services, throughout 2021/2022 under our service level agreement with Salford and Wythenshawe. This team, with support from our Advanced Nurse Practitioners and Medical Team, has helped to maintain pain management, symptom management, medication administration and discharge planning.

The Clinical Administration Team has supported the Clinical and Support Services teams by working innovatively and collaboratively throughout 2021/2022 whilst maintaining the administration of the clinical services and data collection.

Our clinical volunteers have remained stood down from their roles during 2021/2022, the second year of the COVID-19 pandemic. However, we have begun a programme of work to reintroduce our clinical volunteers during 2022 and look forward to reinstating them as they provide vitally important support to our clinical teams and the services we provide.

## Medical team

Our medical teams at St Ann's are led by the Medical Director who is our Caldicott Guardian and is supported by our Associate Medical Director. Our medical teams consist of:

- Palliative medicine Consultants
- Associate Specialists
- Speciality doctors
- Rotational and Junior Doctors

Our consultant led medical teams have continued to provide care across both our inpatient units, seven days a week and across the Salford and Trafford communities. Our medical teams have maintained regular medical outpatients clinics at each site, including motor neurone disease clinics. These clinics have been adapted by using a blended approach of telephone, video and face to face consultations because of the pandemic. Medical support has been provided to our Being You Centres at both sites, with virtual support for patients and families and the team has also supported our 24-hour Advice Line. Our medical teams have continued to support Outcome Assessment and Complexity Collaborative (OACC) throughout the second year of the pandemic.

## 24 hour Advice Line

St Ann's 24-hour Advice Line is manned by a Registered Nurse with support from our Medical Team and pharmacists, and is provided 24 hours a day, seven days a week. The service has been maintained throughout the last 12 months and provides telephone support for both healthcare professionals and patients, families and care givers from across Greater Manchester (Salford, Trafford, Manchester and Stockport). The table below shows the number of calls received by the advice line for the current reporting period and previous four years of reporting periods.

St Ann's 24 Hour Advice Line					
Descriptor	2017/ 2018	2018/ 2019	2019/ 2020	2020/ 2021	2021/ 2022
Total number of calls	574	494	665	634	558
Healthcare professionals	249	223	285	208	229
Patients and carers	275	271	375	426	325
Pain control	170	147	214	179	156
Symptom control	193	152	189	199	171
Service and referral information	87	61	57	59	61
Non clinical	15	11	13	15	13
Other*	124	130	169	155	138

\* Includes carer support, (e.g. advice and reassurance) and information regarding external health care professionals and equipment loans

The table shows that call volumes to the advice line remain comparable to previous years. The majority of calls were around patient pain and symptom control. Advice given may be able to help patients to avoid unnecessary admissions to hospital and assist in delivering patient centred care that is appropriate to the patient. St Ann's will look to this important data to inform future care, treatment and services within the next reporting period.



## Patient safety

### Infection prevention and control

Infection prevention and control has remained a predominant focus for our services during 2021/2022, the second year of the COVID-19 pandemic. All our teams across the hospice have worked tirelessly to ensure the safety of our patients, families, visitors, volunteers and staff. We have responded proactively to comply with Public Health England guidance throughout the second year, to continuously risk assess and to implement new ways of working as we have faced the ongoing and new challenges that this year has brought.

We have collected surveillance data in line with the requirements of PHE, NHSE and our lead CCG. The table below details that surveillance data for the period 2021/2022.

### Surveillance Data April 2021-March 2022

Hospice acquired COVID-19	2
COVID 19 Outbreak (meeting PHE criteria)	1
MRSA	0
MSSA	0
E-Coli	0
GRE	0
CDI	8
CPE	0



## Safeguarding

St Ann's Hospice is committed to ensuring safeguarding is part of its core business and recognises that safeguarding children, young people and adults at risk is a shared responsibility with the need for effective joint working between partner agencies and other professionals.

We recognise our responsibility to uphold individual human rights, treat individuals with dignity and respect and safeguard them against abuse, neglect, and discrimination. Our Safeguarding Lead and Social Work Team strive to ensure that all staff are knowledgeable, confident and equipped with the skills to deal with process and procedures when concerns arise relating to safeguarding and patient safety, this is reflected through our policies, incident management system, audits and training programmes.

Our Safeguarding Lead in collaboration with our clinical leads produces a hospice Safeguarding Strategy every three years which aligns to our clinical strategy and sets out goals and objectives to work towards to strengthen and improve our safeguarding arrangements across the organisation. Our current strategy spans 2019-2022. In addition, we produce a quarterly safeguarding assurance report which is presented at our Clinical Performance and Quality Committee and aims to provide assurance that we continue to protect patients, their families and loved ones.

## Incident management

All incidents, accidents and near misses are reported at St Ann's via our electronic incident management system. Staff are supported by a suite of policies, training, procedures and guidance around incident management within the organisation.

During 2021/2022 all aspects of incident reporting and management have undergone a complete review. Systems, training, processes and policies now align to best practice guidance and a review of governance arrangements including meeting terms of reference has ensured that incidents are discussed at relevant meetings.

We have always encouraged openness and honesty, in line with both the professional and legislative duty of candour. Our culture encourages candour, openness and transparency across all departments within the hospice and in any communication with patients and families in relation to both notifiable safety incidents and non-notifiable safety incidents. We have ensured that the requirements to be open when things go wrong are explicit within our complaints, incident management and whistleblowing policies.

The table below details the number of incidents, accidents and near misses which were reported during this reporting period and any incidents which required notification to external bodies:

Descriptor	2020/2021	2021/2022
Total	406	619
Clinical	313	489
Non-Clinical	93	130
Notifiable safety incidents (RIDDOR)	4	0
Notifiable safety incidents (CQC)	4	1
Duty of Candour Discharged	1 of 1 applicable	1 of 1 applicable

Actions taken as a result of incidents, accidents and near misses during the reporting period include:

- Development and implementation of clinical competency assessments.
- Improvements in ICT security; for example, two factor authentication for systems.
- Introduction of the electronic 'to take home' (TTO) template within patient records systems.
- Multiple improvements in maintenance/estates; for example, addition of grab/transfer rails in visitor bathrooms.
- Redevelopment and strengthening of policies and procedures.

## Staffing

St Ann's is committed to ensuring our staffing levels are safe so that patients are able to receive the person centred care and treatment they need. We review staffing levels daily, across sites and safe staffing is managed via our safe staffing policy which encompasses medium and high-risk pathway guidance and cross-organisational working for both nursing and medical staff.

The staff and volunteers of St Ann's Hospice have responded incredibly well and continued to always put the needs of patients and families at the centre of all they do. Team leaders have worked hard to make sure staff have had the support they need, in teams or individually, and we continue to do so.

Staffing has remained a challenge during the last 12 months because of the pandemic, despite successful recruitment to clinical roles across our services. Our teams have continued to work flexibly across the organisation to make sure that staffing remains safe. The Consultant weekend working on-call updated model has continued alongside the first on-call medical rota on both sites and this has continued to be provided alongside the challenges faced with staffing.

In addition, we have used the following measures to monitor, assess and improve our staffing levels to ensure patient safety during the last 12 months:

- Tracking input via the Department of Health and Social Care COVID-19 tracker.
- Securing and maintaining a robust supply of and training for Personal Protective Equipment (PPE) early in the pandemic to ensure staff, patients and visitors were safe and services could continue to function.
- COVID-19 organisational risk register.
- Regular collaboration with our lead Clinical Commissioning Group regarding staffing levels and admission requirements.
- Individual COVID-19 risk assessments for staff and volunteers and return to work interviews for staff.
- Weekly asymptomatic PCR testing programme for staff and hospice based volunteers.
- COVID-19 vaccination programme.
- Flu vaccination programme.
- Continuation of training of our advanced nurse practitioner roles at each of our hospice sites to bridge the gap between medical and nursing teams.
- Successfully recruited to our Allied Health Professional vacancies including Dietitian and Complementary Therapists.
- Re-introduction of non-clinical volunteers including Receptionists.
- Re-introduction of nursing bank staff.
- Quarterly reporting of clinical workforce vacancies to our internal Clinical Quality and Performance committee.
- Access to staff welfare resources including CareFirst and Greater Manchester Resilience Hub.
- Introduction of competency-based framework for all staff.
- Increase in the number of Band 6 Nurses, enabling increased Senior Nurse cover on our inpatient units.
- Review of our medical model to ensure it is appropriate for need.
- Medical staff working cross-site as needed to ensure patient safety with adequate cover on both inpatient unites.
- Maintained the medical bank staff.
- Consultants acting down where required to cover rota gaps.

	2017/2018	2018/2019	2019/2020	2020/2021	2021/2022
Sickness and absence	4.4%	3.8%	4.3%	4.8%	Unable to report
Staff turnover	20.2%	20.1%	14.8%	15.4%	16.7%

## Wound care

All patients admitted to St Ann's are assessed on admission for their risk of skin damage and appropriate preventative measures are put in place. Managing skin integrity and wounds within a palliative care environment can often be challenging. Many patients who are admitted can experience deterioration due to progression of their condition. Our aim is to stabilise existing wounds, prevent new wounds (where possible) and manage any symptoms to improve patient comfort, well-being and quality of life.

We provide education and training for our staff and monitor, record and investigate new pressure sores acquired 72 hours after admission which are grade 2 and above. We use the data we collate to seek improvements and feedback any learning from investigations to staff.

The table below shows the data collected for the current reporting period and the previous three years.

	2018/2019		2019/2020		2020/2021		2020/2021	
	Present on admission	Hospice acquired	Present on admission	Hospice acquired	Present on admission	Hospice acquired	Present on admission	Hospice acquired
Number of pressure ulcers	25	18	35	30	63	24	99	37
Hospice acquired pressure ulcers Grade 2 or above	12		15		21		20	



## Quality

### Quality assurance

St Ann's measures the quality of the services provided using various methods to ensure that the care we are providing is safe, effective and of the best possible standard in line with our strategic aims, legislation, policies and best practice guidance.

Quality assurance methods/tools used for the period 1 April 2021 to 31 March 2022 are set out in the table below. The information described within the table formed part of the data reviewed for this reporting period as part of the statutory requirements detailed in part two of this report.

Quality Assurance				
Name	Type	Purpose	Frequency	Governance
Data Sets	Report	Key Performance Indicators (KPIs) measurement	Reported quarterly, reviewed monthly	All Clinical Commissioning Groups, Clinical Quality and Performance Committee
Clinical Performance and Quality reports	Report	Review of all clinical services for quality assurance	Quarterly	Clinical Quality and Performance Committee
Controlled Drugs Pharmacy Audit	Audit	Monitors compliance against policy and legislation	Quarterly	Pharmacy meeting, Clinical Practice meetings
Data Quality	Audit	Monitors compliance against minimum data sets	Monthly	Team meetings, Clinical Leaders meetings
Hand Hygiene and Bare Below Elbow	Audit	Monitors compliance with Infection Prevention Control policies and best practice guidance	Monthly	Team meetings, Clinical Practice meetings
Health and Safety Walk Around	Inspection	Joint inspection for facilities/clinical services to monitor compliance with best practice and legislation	Monthly	Heads of Department Meeting, Safety Assurance Group
Incident Reporting	Report	Monitoring and reviewing the number of incidents and near misses to identify themes, trends and areas for improvement	Monthly, Quarterly (meeting dependent)	Relevant meetings
Information Governance Walk Around	Audit	Monitors compliance against information governance policies, processes, legislation and best practice	Monthly	Information Governance Committee
Local Intelligence Network reports	Report	Safe use of Controlled Drugs	Quarterly	Local Intelligence Network, Clinical Quality & Performance Committee
Outcome Assessment and Complexity Collaborative Measures	Report	Monitors defined outcome measures to inform improvements to services	Reported quarterly, reviewed monthly	Lead Clinical Commissioning Group, Clinical Quality and Performance Committee, Board of Trustees

Pharmacy Mini Inspection	Audit	Monitors compliance against defined standards as set out in policies and best practice/legislation	Six Monthly	Pharmacy meeting, Clinical Practice meetings
Quality Account	Published report	Legislative report detailing a review of the quality of services provided for the past 12 months	Annual	Lead Clinical Commissioning Group, Executive Leadership Team, Board of Trustees, Healthwatch
Safeguarding Assurance Tool	Audit Tool	Measure and evidence compliance with legislation and statutory guidance	Annual	Lead Clinical Commissioning Group
Safeguarding Report	Report	Review of effectiveness of safeguarding arrangements	Quarterly	Lead Clinical Commissioning Group, Clinical Quality and Performance
Weight	Audit	Monitors compliance with standards for weighing patients on admission	Monthly	Team meetings, Clinical Practice meetings

Our reports and audits produce detailed assurance around the quality of our services. As part of our quality assurance these findings are discussed at the relevant governance meetings which enables us to share information, best practice, challenge practice and seek improvement, across the organisation.

Meetings form part of our robust shared governance system at St Ann's. The standard governance meetings which took place during 2021/2022 and meetings which took place on an ad-hoc basis (based on requirement) during the second year of the pandemic are listed below:

- Board of Trustees Meetings
- Executive Leadership Meetings
- Heads of Departments Meetings
- Clinical Quality and Performance Committee (Trustee attendance)
- Consultants Meetings
- Safe, Associate Specialist and Speciality Meetings
- Quality Improvement Group Meetings
- Infection Prevention and Control Committee (external attendance)
- Safety Assurance Group Meetings
- Pharmacy Meetings (external attendance)
- Information Governance Committee Meetings
- Safeguarding Assurance Meetings (external attendance)

- Senior Clinical Leads Meetings
- Clinical Leaders Meetings
- Clinical Practice Meetings
- Team Meetings
- COVID-19 sit rep calls

St Ann's is able to gain further assurance around the quality of the services we provide through a number of other methods; for example, clinical dashboards, incident management dashboards, risk register reviews, and benchmarking against national standards (Hospice UK).

During the second year of the pandemic, we have continued with additional measures implemented during 2020/2021, to ensure the quality of our services meets with national and best practice guidance. For example, COVID-19 checklists and monitoring tools, risk assessments and daily Public Health England guidance reviews. All information regarding changes or implementation of new guidance has been communicated to staff via COVID-19 information boards, meetings and electronically. Our Heads of Departments have monitored these measures throughout the last 12 months to provide assurance to our staff, patients, visitors, volunteers and stakeholders.

## Quality Improvement Projects

### Commissioning for Quality and Innovation (CQUIN)

St Ann's Hospice undertakes CQUIN projects each year in collaboration and agreement with Stockport Clinical Commissioning Group, as the lead Clinical Commissioning Group for the consortium. CQUIN projects set targets which are performance managed against a set criteria to ensure achievement and development within services. The CQUIN framework helps make quality part of the commissioner-provider discussion and allows us to look at the quality of our services and ensure that quality continues to improve.

During the second year of the pandemic, the operation of CQUIN has remained suspended for all providers as detailed in part two of this Quality Account. However, we have continued to work through the second year of our CQUIN project which was agreed prior to 1 April 2020, recording CQUIN performance data for the project and monitoring compliance against our targets.

#### 2020/2022 – Rehabilitative Palliative Care Approach

The rehabilitative palliative care CQUIN looks at how as a hospice, we deliver care and support and ways in which we can further empower and enable patients, it is being supported by the rehab team but the changes are being led by other staff within the hospice to help support this significant culture change. As part of this work a cross site steering group was developed to lead the changes across the whole organisation in line with the aims of the clinical strategy.

#### Achievements this year:

- Development of e-learning module for all hospice staff to enable ongoing awareness of this work.
- Baseline survey completed around clinical staff's knowledge, skills and confidence in having goal setting conversations. Following this there was

development of and delivery of face-to-face goal setting training as part of an annual mandatory training day so all clinical staff received this support to develop their skills.

- Clinical change ideas have continued with the most recent one being the 'just one thing' project where patients are encouraged to identify something they want to achieve that day. This can range from seeing family, sitting out in chair in the garden to having a shower.
- Our Communications and Marketing Team has created a strategy to support the culture change and are using the opportunities they have to influence the messages to external partners/stakeholders. Stories are being shared to reflect the rehabilitative nature of the work we do.
- The rehabilitative approach was considered during the review of the hospice values to ensure that they reflected this approach.
- The Clinical Administration Team has supported in reviewing the questions they ask patients before admission and what they ask patients to bring with them to support the rehabilitative approach; for example, own clothes.
- Further self-management resources have been developed by the Rehab Team for all staff.
- A suite of resources to support fatigue management called 'Taking Charge' has been produced.
- Our Head of Clinical Services wrote and delivered a national webinar on the Rehabilitative Palliative care changes being introduced and learning so far at a national rehabilitative quality improvement conference.

The project will be evaluated and reported in July 2022 which will be two years from the date the project was started.



## Other Internal Quality Improvement Projects

St Ann's has remained focused on quality improvement within our services. In June 2021, we relaunched our Quality Improvement Group with the aim of giving oversight, support and direction to our quality improvement projects across clinical services. During 2021/2022, we have carried out the following quality improvement projects:

- North West Audit Group Regional Audits (various)
- Patient Facing Clinical Quality and Governance Boards Project
- Patient Records Reconfiguration Project
- Community Mortality Audit
- Use of Ketamine Survey
- The Christie Project
- Learning from Deaths Project
- Single Nurse Administration Project
- Opioid Toxicity and Naloxone Administration Project
- Data Quality and Good Record Keeping Project
- Ten in Ten District Nursing Educational Package Project
- The Identification and Assessment of Frailty Project
- Improving and Recording of IPOS Patient Reported Outcome Measures Project
- Homeless & Complex Needs Health Training Project
- Learning Disabilities Community Project
- Link Practitioner Roles Project
- The Use of Antifungal Medication for Oral/Oesophageal Candidiasis
- Non-Medical Prescribing Audit

## Training and education

### Training overview and clinical education

Clinical training and education at St Ann's is provided by our own Practice Development Centre which consists of clinical educators and an education and project support officer.

Non-clinical training is co-ordinated and facilitated by our Organisational Development Manager and spans the whole organisation.

Throughout 2021/2022, we have continued to adapt our training and work innovatively to ensure that learning and education has remained a priority for our workforce. We have continued to use a blended approach to our courses, utilising both virtual and face-to-face methods.

### Clinical Education and Training

Our clinical educators have delivered our internal clinical mandatory and non-mandatory training to our staff over the 12 months. This has included reviewing and updating our clinical e-learning modules, maintaining a full programme of medicine management updates and developing training and competency frameworks for specific clinical practice (e.g. tracheostomy care and syringe pump operation).

Our Practice Development Centre was delighted to reintroduce placements from April 2021 from a variety of backgrounds including nurses and Allied Healthcare Professionals (from Physiotherapists to Paramedics). We have successfully held 23 placements during the reporting period and have received positive feedback during this time from students.

Our medical team in collaboration with our Practice Development Centre have facilitated and delivered weekly multi-disciplinary team training covering a wide variety of topics. All sessions are recorded and saved onto our virtual learning platform for those wishing to access the information at a later date.



Our Medical Team have continued to support specialty training through clinical and educational supervision of trainees rotating through the hospice, participation in Annual Review of Competence Progression (ARCP) panels, specialty recruitment, attendance at Training Committees and support of the regional registrar education sessions. In addition, the team has continued to support training of non-specialist training grade doctors including Foundation Year 2 doctors, internal medicine trainees and GP trainees.

Placements for medical students undertaking quality improvement projects was reintroduced and several consultants have supported communication skills training for year 5 medical students and other undergraduate training. In addition, in the last year we have enhanced the support and training available to our speciality doctors and we are supporting two doctors to achieve specialist registration via the CESR route.

## Mandatory training

During 2021/2022, we have maintained our mandatory training programme. We have successfully achieved 94% compliance rate at the end of the reporting period. Our mandatory training includes modules for safeguarding, information governance, incident reporting and health and safety.

Our Organisational Development Manager in collaboration with subject matter experts has undertaken a full review of our mandatory training plan, which will be reviewed annually to ensure that training gaps are identified and bridged to support our staff and volunteers.

## Organisational Training

During 2021/2022 organisational training has remained a priority and has been reviewed alongside the work to create and redesign our values. A portfolio of e-learning

has been developed for staff and volunteers to ensure they have the skills and knowledge to carry out their roles across the organisation. In addition, during this period, a new e-induction package was successfully introduced and we have continued with our digital/upskilling work stream to support staff with their digital skills and competencies.

We have continued to develop our leaders through our Leadership Exchange Network events and our Inspire/Aspire leadership development programmes. During the last 12 months, over 40 leaders from across the organisation have attended events and 16 individuals have completed the Inspire/Aspire programmes.

In addition, we have supported staff from across the organisation to apply and participate in various apprenticeship programmes.

## External training

During 2021/2022, our Practice Development Centre has provided a limited programme of external training due to the challenges we have continued to face in the second year of the pandemic. The courses delivered included:

- Advanced Communication Skills (regional and national)
- Advanced Care Planning (regional and national)
- Recognising Dying and Symptom Management
- Community and care home training
- Homelessness, complex needs and palliative care programme
- Learning Disabilities with advancing disease

In addition, our Consultants have provided external education in their own localities and across the region for primary and secondary care colleagues.



## Support Services

St Ann's clinical teams are supported by a number of services and teams within the organisation who enable us to keep functioning to deliver world class, innovative palliative and end of life care to patients, their loved ones and care givers.

These services include:

- Facilities Management including Catering Teams, Maintenance Teams, Housekeeping Teams and our IT Team
- Fundraising Team
- Human Resources Team
- Finance Team
- Marketing and Communications and Team
- Training Company Team
- Volunteers

All teams have continued to deliver services throughout 2021/2022. Like our clinical teams, the teams have adapted and innovated throughout the second year of the pandemic to make sure the high quality of the support services provided has been maintained ensuring the safety, comfort and financial viability of St Ann's.

The list below details examples of the services delivered and examples of improvements which have been made alongside the running of standard functions, during the last 12 months.

- Our Housekeeping Team has continued to maintain infection control procedures ensuring that clinical spaces are safe, usable and meet best practice guidance.

- Our Catering Team has provided nutritious meals for patients and staff.
- Our Maintenance Team has completed 128 planned preventative facilities/maintenance jobs and 3391 reactive facilities/maintenance jobs.
- Our ICT Team has worked tirelessly to upgrade and improve our systems including patch upgrades (to improve reliability and reduce downtime), enhanced security features (e.g. multi-factor authentication) and contingency back-ups (EMIS tokens).
- Our Fundraising Team has supported our sporting participants at a number of in person events and held a runners reception for our marathon runners.
- Our Facilities Team has improved exterior lighting at both sites to increase visibility during non-daylight hours.
- Our Fundraising Team and Marketing and Communications Team have delivered high profile partnerships with Manchester Flower Show and Stockport Frog Trail.
- Our Facilities Team has refurbished the sister's office at our Heald Green site.
- Our Fundraising and Marketing and Communications Teams have introduced Facebook challenge events to reach a new fundraising audience.
- Our Facilities Team has completed a significant re-location project of our fundraising staff to allow our rehab team to move closer to ward.
- Our Facilities Team has successfully re-modelled the heating at our Little Hulton site to provide dedicated heating zones that both improve patient experience and reduce costs.



## Volunteers

The hospice has around 600 volunteers and they help in many ways, including in our ward areas, charity shops, reception desks, complementary therapy, and administration support. They are a diverse group who bring a wealth of skills and experience.

At the start of the pandemic volunteers were stood down from their roles, however, we have been delighted to welcome some of our volunteers back to the hospice, in areas such as, our shops, on hospice receptions, our gardens and in our complementary therapy services.

Volunteers have been supported on their return, with risk assessments and briefings from managers on changes within the hospice and updated on any new ways of working. We are looking forward to welcoming more of our volunteers back in the very near future.

To welcome our new and existing volunteers we have created an e-learning package which incorporate a 'Welcome to St Ann's' (Hospice overview) and a short video from our Chief Executive introducing our new values.

## Patient feedback

### Patient and carer feedback

Patients, relatives and care givers can provide feedback to us in many ways; for example, comment cards, verbally, in writing or via our website. Some of the comments received during the reporting period 2021/2022 are detailed below.

"It was like talking to a friend and you can say anything. At first I didn't want to get help, but I am glad I did."

"I was given as much time as I needed and was treated with dignity & respect."

"I have got nothing but kindness, respect and attention, my every need has been covered."

"Talking to the bereavement counsellor has made things much easier."

"It's hard to find words to describe how well I've been treated."

"Real team camaraderie, patient focused, couldn't ask for anything more.."

"All my needs have been met, above and beyond expectation, professional staff, felt like home, clean."



## Friends and family survey

The Friends and Family Survey is an important feedback tool that supports the fundamental principle that people who use services should have the opportunity to provide feedback on their experience. It is a single question survey which invites feedback on the overall experience of using the service. Listening to the views of patients helps identify what is working well and what can be improved.

The results for the reporting period 2021/2022 are detailed in the table below:

**Thinking about your stay in the hospice, overall, how was your experience of our service?**

	IPU	Being You Centre	Community
Very good	169	35	28
Good	16	2	4
Neither good nor poor	0	0	0
Poor	0	0	0
Very poor	0	0	0
Don't know	0	0	0
Total completed	185	37	32



## Complaints

As an organisation, St Ann's continues to take complaints seriously, investigate appropriately and manage complaints compassionately. We encourage people to make complaints if they feel something has gone wrong because we want to learn from people's experiences and improve our services wherever possible. We encourage openness and honesty and our staff are supported by our complaints and whistleblowing policies.

The table below details the formal and informal complaints made to St Ann's Hospice over the past five years

	2017 2018	2018 2019	2019 2020	2020 2021	2021 2022
<i>Formal complaints</i>	7	8	11	3	4
<i>Informal complaints</i>	6	2	2	7	6

We openly display our complaints leaflet within the hospice sites and information around making a complaint is detailed on our website.



## Social Media

We receive feedback and comments about the hospice and our services via a wide range of sources, including our social media accounts. Below is just a small snapshot of some of the comments we have received which have been shared on social using our hashtag #StAnnsCare

"I have received amazing care, compassion and help"

"The staff at the hospice are all extremely friendly and welcoming"

"Feel like someone is finally offering the service and support we need, thank you."

"Very good bereavement counselling and lots of good advice."

"The staff have helped me when looking after my sick mum. They couldn't do enough with their love and dedication from arriving on the first day, and going that extra mile making her comfortable in her last few days, to helping us to come to terms, organising and benefiting from the bereavement support, thank you."

## Staff Engagement

### Engagement with staff

St Ann's remains committed to ensuring that engagement with staff remains a priority, to ensure that we have a workforce who feel valued and fulfilled in their roles. Each staff member will complete an annual personal development review with their line manager and the completion rate at the end of the reporting period across the organisation was 89%.

During 2021/2022 communication and engagement with staff has continued to be significantly important as we have faced the challenges and changes that the second year of the pandemic has brought. The list below details the methods of engaging and communicating with staff and also additional support which was put into place during 2021/2022.

- Investors in People Online Survey, which was open to all staff and volunteers
- The Chief Executive Brief, published on a weekly basis
- The Involve Group meets on a quarterly basis, representing the views of staff from across the hospice
- The hospices Wellbeing Festival, which was held online in 2022, staff and volunteers are encouraged to participate in the events
- The Equality, Diversity and Inclusion group, representatives from across the hospice, meet on a quarterly basis
- Keep In Touch (KIT) Meetings
- A Shaping Values Group, consisting of 13 members from across the organisation clinical and non-clinical

In addition, engagement with staff takes place through various meetings; for example, clinical teams daily huddles, departmental/team meetings etc.

was created to design and develop our new values. The group will continue into 2022 to help embed the new values

- Leadership Exchange Network to promote collaborative working, sharing experiences and focus on development for leaders and future leaders
- Staff Reflection Sessions
- 150 staff attended our Values workshops, 135 attended our roadshows
- Mental Health First Aiders, which were launched in 2021, continue to support staff across the hospice
- Our Wellbeing newsletter, continues a quarterly basis, promoting health and wellbeing hints, tips and links for further support
- Team meetings and 1:1 meetings with line manager
- Staff Relaxation Sessions
- Human Resources Surgeries, held every month
- Human Resources support for staff
- Staff Drop In Sessions (inpatient units)
- Care First, Employee Assistance Programme is still in place and available to all staff
- Greater Manchester Resilience Hub is still available for all staff
- Digital Champions who meet and have been allocated a buddy to support and grow confidence around digital skills using an informally structured and flexible programme
- Staff debrief sessions following significant events
- Schwartz Rounds

## Staff survey

Our annual staff survey was completed with Investors in People, in line with our re-accreditation process.

The response rate to the survey was 49% which was slightly higher than in previous years. The responses to the survey were very positive and uplifting.

Our highest responses were in relation to values and behaviors. 97% of our people share the organisations values and 98% of our people believe their behaviors reflect the values of St Ann's. Encouragingly, 87% of our people said that St Ann's is a great place to work.



## ANNEX

Prior to publication, St Ann's Quality Account was shared with our lead locality service commissioner and Healthwatch Stockport and local Health and Wellbeing Overview and Scrutiny Committee.

The following feedback has been received:

**This Quality Account, once again, highlights the excellent service that St Ann's offers. Despite the many challenges this year, including COVID-19 and increasing financial pressures, St Ann's has consistently delivered high quality palliative care, across their two sites and more widely through their homelessness and learning disabilities projects.**

**I am always impressed by the hard work and dedication of the whole team and the commitment of the senior leadership to continuous quality improvement, identifying gaps in the service and adapting to address these.**

**It is a pleasure and a privilege to work collaboratively with such a forward thinking, caring and responsive team, where the highest quality patient care is always the priority. St Ann's should be congratulated for achieving a rating of 'Outstanding' in the recent CQC inspection at the Little Hulton site.**

**I look forward to working with St Ann's as the service continues to evolve and the exciting plans for the new build on the Heald Green site become reality.**

Karen McEwan, Stockport CCG, Planned Care GP Lead, Macmillan GP Cancer Commissioning Lead

**We welcome Quality Account 2021/2022 from St Ann's Hospice. We are pleased to read about, and review the high quality care and treatment that have been provided over the last 12 months, despite the continued challenges the second year of the COVID-19 pandemic has brought.**

**It is evident from reading this report that the services have continued to adapt and change throughout the last year. The team at St Ann's have continued to embrace these changes and have prioritised the safety of patients, their families, visitors, volunteers and staff to ensure that they were able to continue to deliver these vital services throughout the Greater Manchester footprint. It is apparent that St Ann's has continued to set an example, to act as a pioneer and to support other organisations wherever possible. It has not come as a surprise to us that the team have used the challenges faced to improve services and carry these adaptations forward in a positive and progressive way.**

**The leadership team have continued to focus on ensuring staff have felt valued and looked for innovative ways to continue to provide and increase support for staff during these continuously difficult times. It is again testament to the staff that they have continued to maintain and redevelop so many services throughout the last 12 months.**

**We are pleased to learn of the 'Outstanding' rating following the CQC inspection at the Little Hulton site and are excited to see the plans for the new build at the Heald Green site coming to fruition. We remain proud to have such an impressive organisation supplying these much needed palliative and end of life care services within our local community.**

Stockport Healthwatch



## Contact details

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