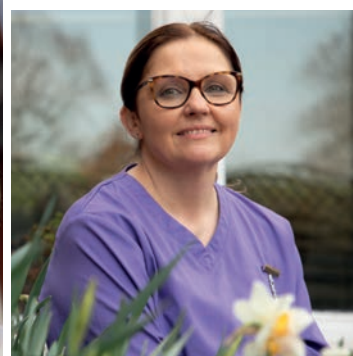


# Quality Account

## 2023/24

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



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## Chief Executive's statement



On behalf of everyone at St Ann's Hospice, I'm pleased to introduce our Quality Account for 2023-2024, and confirm that our Board of Directors agree that it is an accurate reflection of our performance over the past year.

We are incredibly proud of all that we have achieved this year, especially against a backdrop of the continuing financial challenges faced by all hospices, and indeed all corners of society. We have worked innovatively and confidently to ensure our services continue with the same quality of care and compassion that we demand for our patients and their families.

Our rehabilitative approach to end-of-life care is something that is incredibly important to us at St Ann's, and in March we were delighted to be recognised at the national Markel 3rd Sector Awards for our dedication to

this approach. The awards intend to uncover excellence, innovation and creativity in the voluntary care and support sector. The judges for the End-of-Life Care Award were impressed with our dedication to working with patients on what matters most to them and our collaborative approach across teams to make sure their wishes and goals were achieved.

This year has been one of progress and great excitement for our new Heald Green hospice project. After months, and even years, of planning and paperwork, we broke ground on the new land in October 2023. It was a huge milestone for our incredibly ambitious project to build purpose-built hospice for our community and a wonderful occasion to celebrate with our staff, patients and neighbours. This ceremonial event was the first bit of activity on the land and we haven't stopped since. 2024 has seen the arrival of diggers and a workforce to site and it has been brilliant to see progress on what was an over ground piece of land next to our current hospice.

I very much look forward to watching the hospice take shape and for our patients and staff to experience what I know will be a truly amazing space very soon. This development of our environments is essential to patient care and our commitment to improving continues at our Little Hulton site with plans for development taking shape there as well.

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. We can't and won't stand still and I hope you get the sense from this document about how intentional we have been in driving improvement and providing the end-of-life and palliative care we would want for ourselves and our loved ones.

**Rachel McMillan**

Chief Executive, St Ann's Hospice

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

In the course of a year, St Ann's Hospice provides care to numerous individuals and their families and carers who are affected by life-limiting illnesses and are over the age of 18. Our services are delivered in collaboration with acute hospitals, community services, local authority social care providers and voluntary organisations to provide tailored care that is special and unique to each individual. We support patients, their families and loved ones throughout their illness journey, from diagnosis to treatment and beyond. Our range of services is provided from our Heald Green and Little Hulton sites, as well as various community and outreach services. Approximately one-third of our patients are discharged after treatment.





# St Ann's purpose and core values

## Purpose

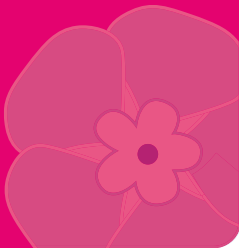
St Ann's is committed to providing excellent, patient-centred care and support to those affected by life-limiting illnesses. Our purpose is the driving force behind our clinical care, and informs the development and delivery of our services.

## Core values

Our core values guide our actions and interactions with patients, families, carers, and colleagues, and are essential in creating a positive and compassionate environment. Our values and associated behaviours are embraced by all members of our organisation, regardless of their role or position. We recognise the significance of these values in achieving our mission and vision, and strive to practice them in everything we do. Our 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.




### *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.



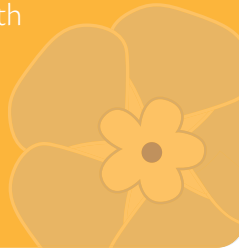
### *Bold and brave*

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.



### *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.



In order to ensure that our core values remain central to our work and are practiced by all staff, we have implemented various measures. One of these measures is the Performance Development Review (PDR) programme, which requires staff to provide evidence of the behaviours that align with our values. Additionally, we use values-based interviewing when recruiting new staff to ensure that their values align with our own. These measures help us to maintain a strong culture that is guided by our core values.

# Summary of the quality of services

St Ann's Hospice is one of the oldest and largest hospices in the UK, providing care and support to the diverse and growing population of Greater Manchester and parts of Cheshire each year.

Our services include inpatient care, outpatient care, community care, rehabilitative care, and bereavement support. Our core purpose is to provide excellent care and support to people living with, or impacted by, life-limiting illnesses. We provide care to people with a range of diagnoses including cancer, neurological conditions, and end-stage organ disease.

We are proud to present an overview of the quality of our clinical services over the past year.

During 2023/2024, 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 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
- Pharmacists and pharmacy technicians
- Therapists to support independence including physiotherapy, occupational therapy and complementary therapy
- Social workers
- Chaplain
- Counsellors
- Clinical Administrators
- Homeless Palliative Care Co-ordinators
- Support services providing cleaning, catering and laundry services for patients

Our services remain open to individuals impacted by life-limiting illnesses, regardless of race, religion, gender, sexual orientation, or diagnosis. We offer care to those managing various conditions such as cancer, neurological disorders, and end-stage organ diseases.

Our commitment to delivering exceptional specialist palliative and end-of-life care remains unwavering. Despite ongoing transformations within the healthcare system, we are dedicated to collaborating closely with our partners in NHS health, social care, and voluntary organisations. Through this collaboration, we aim to ensure a seamless and co-ordinated care experience for our patients throughout their journey.

St Ann's Hospice continues to provide outstanding care and support to individuals facing life-limiting illnesses, while adapting to the changes and challenges in the healthcare landscape.



## Our strategy

In 2023/24, we proudly reaffirm our unwavering dedication to advancing our five-year strategy aimed at enhancing palliative and end-of-life care services throughout Greater Manchester. Through collaborative efforts and a steadfast commitment to continuous improvement, we strive to provide the highest quality care possible to our community.

Health Innovation Manchester conducted an updated assessment of the region's hospice in-patient bed requirements, building on their previous work. This has provided crucial insights informing our ongoing clinical strategy. This ensures alignment with the evolving healthcare landscape in our community, ensuring responsiveness to current needs.

As part of our ongoing collaboration with localities and hospices across Greater Manchester, we have further strengthened the GM Hospices Collaborative Partnership. Together, we prioritise our efforts based on the outcomes of the updated assessment.

This collaborative approach empowers us to strategically allocate resources where they can make the most significant impact, effectively addressing the diverse needs of patients, families, and the broader community. Additionally, it serves to elevate the profile of financial sustainability within hospices, ensuring long-term viability and resilience in our pursuit of providing exceptional care.





## Progress against our strategic aims

### 1. To provide outstanding person-centred care that is innovative and evidence-based.

Over the last year, St Ann's has:

- Been proactive in responding to national, regional, and local guidelines to ensure the uninterrupted provision of our services.
- Collaborated closely with our colleagues throughout Greater Manchester to ensure a synchronised response and to effectively manage the pressures on health and care services.
- Maintained our proud and vocal presence as an integral part of Greater Manchester's thriving hospice movement. Our collective and cohesive voice, as Greater Manchester Hospices, has allowed us to exert influence on the continuing developments throughout the region.
- Continued to foster a culture of rehabilitative palliative care, with an emphasis on individual priorities and goal setting.
- Showcased several of our quality improvement projects at regional and national conferences.
- Held our first Audit and Quality Improvement seminar enabling colleagues to present completed quality improvement projects across the hospice.
- Sustained our consultant-led service over seven days on both of our sites. This has resulted in enhanced patient flow (increase in weekend admissions/prompt discharges) and more effective symptom management for our inpatients.
- Made significant improvements in the governance of our clinical services. Our efforts have focused on strengthening governance processes and procedures, including the management of incidents and complaints, and the recording of clinical risks.
- Delivered, contributed and facilitated joint clinics with partner organisations to ensure the needs of patients and their loved ones are being met, in the right place, at the right time.
- Enhanced communication and co-ordination between our inpatient units and community settings to improve admission and discharge planning.
- Collaborated with partners in the Greater Manchester Hospices group on a variety of joint initiatives to help ensure the survival and continued role of hospices in providing specialist, supportive, and high-quality care to people from all corners of Greater Manchester when they needed it.
- Hosted a number of clinical nurse specialist clinics at our Being You Centres, building relationships with external colleagues and enabling external health care professionals to use our facilities, and providing more patients with access to hospice services.



## 2. To lead the sector in education, research and innovation.

Over the last year, St Ann's has:

- Implemented a bi-monthly medical journal group to keep up to date on current research, learn from both the papers and each other and discuss how the findings may be relevant to clinical practice at the Hospice.
- Offered several members of our staff the opportunity to attend local, regional, and national workshops and conferences. This initiative provided a platform for their professional growth and enabled them to network with their peers.
- Provided numerous internal education opportunities for our staff members.
- Facilitated the training of numerous grades of medical staff and undergraduate medical students, including the facilitation of a swap between a Trust Doctor and Hospice Doctor in order to gain experience across settings. The hospice remains a popular training placement.
- Effectively conducted two three-day Palliative Care Study Days, with attendance from both internal and external colleagues.
- Implemented ClinicalSkills.net for our clinical teams, enabling access to over 380 fully evidenced based, up-to-date, step-by-step guidelines for staff.
- Redesigned our programme for students coming to the Hospice, primarily nurses, but also for paramedics, and any other types of clinical student.
- Ensured all registered nurses have received training on being a supervisor and assessor as part of the student nurse programme.
- Worked with the Ruth Strauss Foundation on delivering communication on cancer training for 15 staff members in patient facing roles.
- Progressed with planning and networking to ensure we can implement the new preceptorship passport in 2024, in collaboration with Greater Manchester Hospices.
- Continued the development of our leaders via our Inspire Leadership Development Programme, with 12 leaders progressing through the programme.
- Continued to develop and support leaders through our Leadership Exchange Network to ensure engagement with our strategy and supporting quality improvement.



### 3. To be an organisation of choice for all.

Over the last year, St Ann's has:

- Continued the provision of homeless palliative care service, ensuring inclusivity and accessibility in our care offerings.
- Established partnerships with various specialty services across our communities, enhancing our reach and effectiveness in addressing diverse needs.
- Embedded the rehabilitative palliative care model throughout the hospice, empowering patients to identify and pursue their personal goals.
- Participated in the Manchester Pride event 2023, demonstrating our commitment to diversity, inclusion, and community engagement.
- Implemented various initiatives to promote diversity and equality within our organisation, fostering an environment of acceptance and respect.
- Continued our efforts to improve accessibility to our services for all individuals, regardless of background or circumstance, reaffirming our commitment to being an organisation of choice for everyone.
- Developed and implemented a new series of Key Performance Indicators (KPIs) to measure the diagnosis of hospice patients and track ethnicity data, ensuring accountability and driving continuous improvement in our efforts to provide equitable and high-quality care to all individuals.
- Conducted regular patient interviews to gauge the effectiveness of our services and identify areas for improvement, ensuring that we are meeting the diverse needs and preferences of our community.
- Actively engaged with local community leaders and advocacy groups to better understand and address the social determinants of health that may impact access to hospice care for certain populations, advocating for resource allocation to promote health equity.
- Regularly reviewed and updated our organisational policies and procedures to ensure that they align with best practices in diversity, equity, and inclusion, and actively seeking feedback from stakeholders to inform these efforts.
- Maintained a robust system for reviewing and addressing complaints, using feedback as an opportunity for organisational learning and improvement, ensuring that our services are responsive to the needs and concerns of all individuals within our care community.
- Engaged in ongoing community outreach initiatives to raise awareness about the availability and benefits of hospice care, particularly targeting under-served and marginalized populations, and actively seeking feedback to tailor our services to better meet the needs of these communities.
- Maintained the provision of Schwartz Rounds as a platform for hospice staff to discuss the emotional difficulties associated with their work.
- Held our fourth Wellbeing Week in January 2024, providing links to internal and external support resources and provision.
- Conducted an analysis of stress and anxiety related absences, ensuring ongoing support and targeted wellbeing initiatives.
- Continued to promote and embed our Mental Health First Aiders Programme.
- Held our staff and volunteer awards (in person) which recognised their contribution and long service to the hospice.
- Continued to review the NHS Jobs platform, in order to create efficiencies in the recruitment process for recruiting managers.
- Continued to refresh and promote an attractive benefits package.
- Further enhanced the recruitment pages on the Hospice's website and maximised opportunities presented by social media to attract high calibre employees and volunteers.



#### 4. To sustain and further develop a values-based culture within which there are high-performing people and teams.

Over the last year, St Ann's has:

- Created opportunities for cross-departmental collaboration and knowledge sharing, enabling clinical teams to leverage diverse perspectives and skills to achieve shared goals and drive innovation.
- Introduced a clinically based People Business Partner role aimed at supporting and fostering a values-based culture through direct integration of Human Resources functions with clinical operations.
- Invested in leadership development initiatives, including organising a 'Clinical Team Leaders' Away Day', to nurture a cohort of capable and empathetic leaders who epitomize our organisational values.
- Introduced a 'Healthcare Assistant Away Day' facilitated by Advanced Clinical Practitioners, providing a platform for reflection, continuous development and learning among our healthcare support staff, thereby enhancing their skills and supporting their professional growth within our values-based culture.
- Introduced the Patient Safety Incident Response Framework (PSiRF), encompassing staff education, structured protocols for incident response, alongside the promotion of a speak up culture, encouraging all staff members to report safety concerns, promote a learning culture and contribute to continuous improvement efforts within our values-based care environment.
- Maintained a full programme of mandatory training throughout the past 12 months for all staff including moving and handling techniques and basic life support skills.
- Reviewed and updated our mandatory training plan aligning to our mandatory training policy to ensure any gaps have been identified and bridged.
- Provided a comprehensive training programme for clinical staff including face-to-face training on medicine management and ward-based competencies.
- Celebrated a number of high-performing individuals and teams and recognised their efforts through our staff award programme.
- Continued to review and update the Managers People Toolkit supporting our staff in their roles as managers and leads within the organisation.
- Aligned our values to our annual staff awards.





## 5. To ensure our buildings, estate and facilities are fit for the future to enable the delivery of outstanding person-centred 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.
- Continued to work in partnership with The Christie NHS Foundation Trust Systemic Anti-Cancer Therapy and Phlebotomy Service, which is hosted at our Little Hulton site and Phlebotomy Service at our Heald Green site, which supports care closer to home.
- Collaborated closely with architectural and design experts, as well as engaging with patients, families, and stakeholders, in the planning and design process for our new hospice.
- Regularly conducted infection prevention control audits with invaluable support from the Manchester NHS Foundation Trust Infection Prevention Team, ensuring the highest standards of cleanliness and safety within our facilities.
- Reviewed and responded to a national patient safety alert from the MHRA in relation to medical beds, bed rails and bed grab handles and the risk of death due to entrapment or falls. We have worked through recommendations to ensure our practice, policies and equipment enable bed rails to be used in the safest possible way. Our approach has now changed with a thorough and dynamic risk assessment process to support the decision making around the safe use of bed rails.
- Completed a fire stopping and compartmentation project to reduce risk of fire spreading during an incident.
- Opened our café at Heald Green to patients, visitors, service users and staff. This project provided high quality and freshly made sandwiches and salads along with fresh coffee, juices and confectionary – all served in a welcoming setting with a mix of sofas and casual dining arrangements.
- Resurfaced the road entrance at Little Hulton to ensure a smooth vehicle entrance for patients.
- Relunched our patient food offer with an emphasis on individualised fresh food cooked on site with additional choice and quality, and improved presentation.
- Developed the design for the new build, working closely with external architects, interior designers and signage and wayfinding experts.
- Conducted floor repairs and replacements to ensure safe access and egress for patients and wheelchair users.
- Updated our IT Servers.



## 6. To be financially viable and develop growth in our business for future sustainability

Over the last year, St Ann's has:

### In Trading:

- Continued to promote our lottery face-to-face and remotely (by telephone) resulting in 2,500 new lottery players.
- Introduced online raffle sales for our Summer and Winter Raffles generating just over £4,000 in online ticket sales and attracting around 200 new Hospice supporters.
- Recruited 20 new Trading Company volunteers to support our charity shops, warehouse and online teams.
- Launched a St Ann's Hospice online shop linked to our existing website.
- Made updates to the Romiley shop interior.
- Launched a cloud-based electronic point of sale (EPOS) system across our Trading Company and Hospice receptions.
- Held monthly sales at our warehouse including fashion, accessory & toy sales, generating over £10,000 during the year.
- Organised and took part in several events during the year, generating an additional £11,498, including £2,446 from the Charity Super.MKT event at the 'We Invented the Weekend Festival'.
- Recruited and trained an Online Sales Assistant to increase online sales listings and income.

### In Fundraising:

- Secured partnerships with USwim, Stockport's Krazy Races, and Salford Triathlon.
- Recruited and supported two volunteer committees to deliver fairs at the hospice sites.
- Delivered a legacy mailing resulting in notification of an additional 26 legacy pledges.
- Delivered income from legacies and voluntary income to meet the budget.
- Reimagined our flagship event 'Manchester Midnight Walk' to become 'Moya's Manchester Walk' following feedback from participants.
- Secured an additional £700K for the capital campaign.
- Delivered a high-profile launch event for the build in conjunction with the Communications and Marketing team.
- Secured a partnership with a past Premiership footballer for an event in November 2024.





## Our future plans, aspirations and forward direction

### What are our plans for 2024/2025?

#### Organisational:

- Further enhance the knowledge, skills and behaviours of all leaders to support progression in line with our leadership competencies.
  - Build on our employee value propositions and other initiatives to support staff recruitment and retention.
  - Continue to work with Investors in People throughout our reaccreditation process striving to achieve the next level in 2024.
  - Continue to strengthen and enhance our wellbeing programme.
  - Consider further recognition ideas for the workforce in line with our values.
  - Further develop our initiatives for engaging with our volunteers.
  - Continue to maximise the use of technology and online processes.
  - Continue to consider initiatives that will raise awareness of equality, diversity and inclusion across the organisation.
  - Continue to review and strengthen our flexible and agile working practices.
- Conduct a comprehensive workforce review to ensure our clinical workforce is aligned with future needs and challenges, including robust succession planning to cultivate talent and leadership within the organisation.
  - Implement the full Patient Safety Incident Response Framework (PSiRF) to strengthen our commitment to patient safety, establishing structured protocols for incident response and continuous improvement in line with best practices and regulatory standards.
  - Launch targeted training and development initiatives to equip staff with the necessary skills and competencies to excel in their roles, fostering a culture of continuous learning and professional growth.
  - Enhance community engagement efforts to raise awareness about our services and promote access to palliative care for underserved populations, ensuring equitable access to high-quality end-of-life care.
  - Prepare for the opening of the new hospice in 2025 by conducting thorough planning and co-ordination efforts, ensuring a seamless transition and continuity of care for patients and their families.
  - Ensure representation at local, regional, and national clinical conferences to stay abreast of the latest developments in palliative care, share best practices, and contribute to the advancement of the field, fostering collaboration

and networking opportunities with healthcare professionals and stakeholders.

- Continue conducting patient interviews and implement loved one surveys to gather feedback and insights, ensuring that the voices and experiences of our patients remain central to our quality improvement efforts, allowing us to continuously refine and enhance the delivery of person-centred care.
- Engage with teams in the development of the new clinical strategy, fostering a collaborative approach that harnesses diverse perspectives and expertise to ensure alignment with organisational aims and values, ultimately driving innovation and excellence in patient care.
- Extend the bi-monthly journal club out to the wider multi-disciplinary team.

#### Facilities Management:

- Continue the next phase of the catering strategy which will develop a food service standardised brand based on the individual needs of patients and using technology to drive quality.
- Launch and implement the estates and facilities strategy.
- Conduct a feasibility study for the redevelopment of the Little Hulton site to improve the patient experience and create modern, well-designed, flexible spaces fit for the future.
- Begin to scope 'smart' mechanical and electronic housekeeping

#### Clinical:

- Implement and achieve year five of the clinical strategy.
  - Continue working closely with the Greater Manchester Hospices Collaborative Partnership, leveraging collective expertise and resources to enhance palliative care provision across the region, promoting shared learning and best practices.
- Ensure representation at local, regional, and national clinical conferences to stay abreast of the latest developments in palliative care, share best practices, and contribute to the advancement of the field, fostering collaboration

systems that improve the quality and efficiency of the hospice cleaning and infection control procedures.

- Create an action plan for the soft landing and commissioning of the new build site.
- Further develop out-of-hours and business continuity provision for estates and support services.

## Fundraising, Trading Companies and Finance :

- Continue to promote our lottery both face-to-face and by telephone and build on existing relationships to increase venue promotions.
- Grow income from our Lottery membership by introducing a 'keep the change option' for all current and future players.

- Review our annual raffles, including analysis of data segment responses, with a view to relaunching these in 2025.
- Implement regular communications to our Retail Gift Aid donors.
- Work with Manchester University students on the Manchester Enterprise project to increase our furniture donations and income and develop our social media content.
- Increase online volunteer numbers to facilitate the growth of our online business.
- Investigate and develop a programme of pop-up shops and events within Greater Manchester.
- Deliver a minimum net profit of £500K from The Great Mancunian Ball.

- Secure bedroom sponsorships for the new hospice.
- Grow our network of major donors.
- Increase our reach with the recruitment of two further volunteer committees.
- Reduce our mailing costs through a programme of testing to improve digital communications through segmentation and targeting.





## Forward direction:

St Ann's Hospice remains committed to delivering world-class palliative and end-of-life care, not only for our patients, but also for their families and caregivers. During 2024, we will be actively working towards the realisation of our five-year strategy, with a particular focus on preparing for the opening of our new hospice in 2025 and writing the new clinical strategy set to launch in the same year.

Our commitment to excellence remains reflected in our collaborative approach to reviewing, reflecting upon, and monitoring the quality of our services. By incorporating our clinical strategy and hospice values into all aspects of our work, we aim to ensure effectiveness, efficiency, and continuous improvement.

Throughout this journey, we anticipate both successes and challenges, and we remain dedicated to actively listening to, and learning from the invaluable insights of our staff, patients, families, and volunteers.

We invite the public to explore our Quality Account, available for viewing on both NHS Choices and the St Ann's website at [www.sah.org.uk](http://www.sah.org.uk), as we continue our unwavering commitment to enhancing the accessibility, quality, and sustainability of our clinical services.



# Part Two

## Our services

St Ann's works in partnership, and our services are commissioned, by seven Integrated Care Boards, four of which are in a consortium led by Stockport and includes 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 2023/2024, 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 2023/2024 represents 45 per cent of the total income generated from the provision of relevant health services by St Ann's Hospice for 2023/24.

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

During 2023/2024, 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 2023/2024 was NIL.

The reports of 23 local clinical audits were reviewed by the provider in 2023/2024 and St Ann's Hospice intends to take the following actions to improve the quality of healthcare provided:

- Review all relevant templates within our electronic patient record system to support staff in providing evidence-based best practice care plans which can be easily audited against.
- Review training requirements for pressure ulcer care.
- Review and update our policies as defined in the recommendations from our audit and quality improvement projects.

- Implement an electronic prescribing and administration system for medicines management.
- Continue the development of additional competency frameworks to support with staff understanding and compliance against policy.

### Research

The number of patients receiving relevant health services provided or sub-contracted by St Ann's Hospice in 2023/2024 that were recruited during that period to participate in research approved by a research ethics committee was NIL.

### Quality improvement and innovation goals

St Ann's Hospice's income in 2023/2024 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework.

### Regulatory Information

St Ann's Hospice is required to register with the Care Quality Commission and its current registration status is registered without conditions.

The Care Quality Commission has not taken enforcement action against St Ann's Hospice during 2023/2024.

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 2023/2024 to the Secondary Uses service for inclusion in the Hospital Episode Statistics which were included in the latest published data.

St Ann's Hospice submitted the Data Security and



Protection (DSP) toolkit by the deadline of 30th June 2023 and all of the mandatory requirements were met.

St Ann's Hospice was not subject to the Payment by Results clinical coding audit during 2023/2024 by the relevant authority.

St Ann's Hospice has taken the following action during 2023/2024 to improve information governance and data quality:

- Continued to review the electronic patient record system to ensure all templates and documents are appropriately organised, referenced and updated so that patient records contain the agreed content and clinical codes.
- Implemented a new Information Governance Assurance Board, which has replaced the Information Governance Committee providing a more robust governance framework and escalation model to the Audit Committee.
- Through collaboration with our partners, we have continued to manage the heightened risk of cyber-attack and the affect a cyber-attack could have on our organisation. We have invested further time and resource into upskilling our workforce and have also taken specialist advice in this area to ensure that our hospice, information and service users are protected from the occurrence and impact of cybercrime.
- Collaborated with our suppliers and partners to increase data sharing across care providers and the Greater Manchester region.



## Areas for Improvement

### Priorities for improvement 2024/2025

Area	Aim	How we will measure ourselves	How we will report back on improvements
Clinical	Enhance medication management efficiency and patient safety by transitioning to an electronic prescribing and administration system	Internal reporting and audit	Internal reporting and discussion via our governance committee meetings and relevant departmental meetings
		Staff satisfaction surveys	Internal communication and team meetings
Clinical	Implement the Patient Safety Incident Response Framework, strengthening our patient safety incident systems and processes	Internal reporting and audit	Internal reporting and discussion via our governance committee meetings and relevant departmental meetings
		Compliance against Patient Safety Incident Response policies and procedures	
Clinical	Ensure clinical services departments are prepared for transition into new build (2025/26)	Key performance indicators will include progress in facility preparations, staff readiness assessments and stakeholder satisfaction with transition processes	Communication through regular project meetings, progress reports, and dedicated communication methods
			Feedback channels to gather input from both staff, and stakeholders, with action plans developed to address any identified concerns or challenges
Organisational	Improve the recording and management of risk across the organisation	Internal reporting and audit	Internal reporting via our governance committee meetings
		Stakeholder feedback	Internal discussion at relevant departmental meetings
Facilities	Create detailed task-based risk assessments for all workflows across Facilities and Support Services	Internal mapping and audit	Quarterly health and safety reports reviewed via our governance committee meetings
		Stakeholder and external auditor feedback	Internal discussion at relevant departmental meetings



## Improvements in 2023/2024

Area	Our aim was to	We achieved
Clinical	Maximise the use of patient services, improving patient flow, and increasing referrals to our services	<p>We successfully implemented a comprehensive strategy focused on collaboration, responsiveness, and safety.</p> <p>Firstly, we implemented a daily cross-site triage meeting, where all referrals into the hospice are reviewed and managed in accordance with the referral criteria.</p> <p>We continued to foster strong partnerships with local acute NHS trusts, ensuring seamless communication and co-ordination for timely admissions to our inpatient units. By working collaboratively, we are assured that patients receive the highest quality care when they need it most.</p> <p>Finally, we published our Inpatient Unit Staffing Guidance, supporting the teams to effectively manage resource and admissions.</p>
Clinical	Enhance the hospice's reputation and community outreach, both clinically and educationally	<p>Our Being You Centre team has worked in collaboration with partners across all four localities, exploring ways in which our services could be accessed outside of the hospice, ensuring care closer to home.</p> <p>Several members of our staff attended local, regional, and national workshops and conferences. Providing a platform for their professional growth and enabling them to network with peers.</p> <p>We have facilitated training of numerous grades of medical staff and undergraduate medical students, including the facilitation of a swap between a Trust Doctor and Hospice Doctor to gain experience across settings.</p> <p>We have successfully conducted two three-day Palliative Care Study Days, with attendance from both internal and external colleagues.</p>
Clinical	Empower hospice patients to set realistic and achievable goals through rehabilitative palliative care	<p>We have successfully led initiatives to empower patients to set realistic and achievable goals through rehabilitative palliative care which has been tracked and monitored via our key performance indicators. This has allowed us to make informed adjustments to better support patients in setting and achieving their goals.</p> <p>We have undertaken work to improve the way in which we record and measure advance care planning conversations which has ensured patient goals have been accurately captured and incorporated into patient care plans.</p> <p>In addition to key performance indicator monitoring, we have actively sought feedback from patients regarding their experiences with rehabilitative palliative care. Through patient interviews and feedback mechanisms, we have gained valuable insights into the impact of our efforts on patient outcomes and satisfaction levels.</p> <p>Our commitment to empowering hospice patients through rehabilitative palliative care has yielded positive results, as evidenced by the data collected through key performance indicator monitoring and the feedback received from patients.</p>



Area	Our aim was to	We achieved
Clinical	Review and implement changes to clinical services that ensure the delivery of outstanding person-centred care that is both innovative, evidence-based and financially sustainable	<p>We have successfully implemented changes to our clinical services which have been meticulously monitored and evaluated through the tracking of clinical key performance indicators. We have communicated and reported internally through our quarterly Clinical Quality and Performance Committee and externally through locality contract meetings. This dual approach has ensured that we have maintained accountability and transparency throughout the process while striving for excellence in patient care.</p> <p>In addition, we actively sought feedback from patients, families, and friends through our patient interviews conducted on both of our inpatient units. The feedback, along with monitoring of our complaints management system provided invaluable insights into the effectiveness of our changes and also highlighted areas for further improvement.</p>
Organisational	Improve the administration, governance and management of our policies and documents	<p>We developed and implemented an electronic policy and document administration system and an associated user guide.</p> <p>We have updated our overarching administration/review policy and commenced regular audit reports against compliance.</p> <p>By providing access for all authors/sub-authors we have achieved shared governance, shared oversight and more effective, real-time reporting.</p>
Facilities	To improve all aspects of fire safety from implementation of policy, evacuation procedures and prevention equipment	<p>We have developed and implemented a new fire safety and evacuation policy and associated procedures.</p> <p>In addition, we have completed a fire stopping and compartmentation project.</p>



# Part Three

## Collaborative working

Over the past year, St Ann's Hospice has proactively engaged in collaborative efforts to establish supportive relationships with external partners, key stakeholders, and the wider Greater Manchester community. By fostering positive alliances and exchanging knowledge, we have been able to plan and deliver our services more effectively with enhanced oversight.

During 2023/24, we have participated in and collaborated with the following:

- Local NHS Trusts and specialist palliative care teams to facilitate appropriate and timely admissions/ discharges and prevent acute admissions wherever possible.
- Manchester University NHS Foundation Trust's Infection Prevention Control Team, which ensures we are adhering to safe practice in line with national and local best practice guidance. We have also benefitted from training, audit and onsite verification of our safe practice.
- Our Director of Clinical Services is the Hospice UK Executive Clinical Lead representative for the Northwest and Deputy Chair of the National Executive Clinical Leaders Group. The group is a forum for executive clinical leaders engaged in the strategic planning and operational delivery of contemporary hospice care.
- Local Authorities to support safeguarding assurance.
- Greater Manchester Hospices Forums including Medical Directors Forum, Director of Clinical Services Forum, Education Forum, Information Governance Forum, Human Resources North West Group, Workforce Group and Quality and Governance Forum.
- Urban Village GP practice, MPath team (Manchester Royal Infirmary) and various hostels and day services through our homeless service work.
- Manchester Foundation NHS Trust to explore a model to improve hospital cancer patients' awareness of hospice outpatient services. It has been identified that there is a general inconsistency of the communication of hospice outpatient services with their service users.
- George House in Ardwick, to set a schedule to deliver the Ways to Wellbeing Programme to a group of people living with HIV. This is an important step in reaching out and providing services to people living with HIV who do not currently access hospice services.
- Trafford Macmillan, Hospice@Home and Being You Centre working together to pilot a joint referral meeting to better meet the palliative care needs of patients living in the Trafford area.
- Gaddam (Salford carers) to improve patient and carer experience by exploring the options of Gaddam running a carer drop-in session/support from the hospice.
- CAN-Move to explore ways we can support each other to meet the exercise needs of palliative patients living in the Salford area.
- Stockport Hepatic, Pancreatic and Biliary and Upper Gastro-intestinal Teams to restart their joint clinics at the hospice.
- The Christie Systemic Anti-Cancer Therapy and Phlebotomy Services, hosted at cross site, supporting care closer to home.
- 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.
- GM Intergrated Care, 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.
- 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.



- Care First, Employee Assistance Programme in supporting our staff's wellbeing.
- Greater Manchester Working Together Group which focused on Organisational Development to share best practice, methodologies etc.
- Investors in People assessors to support the reaccreditation process and taking action in response to their recommendations.
- The University of Manchester, the University of Salford, the University of Bolton, Manchester Met University and Stockport College to invite student nurses for placements at the hospice. This has facilitated the palliative care aspect of students' degrees, but also has increased the knowledge of the hospice amongst the future nursing generation.
- Ruth Strauss Foundation for cancer communication training.
- Conducted visits to other hospices to observe processes and procedures within the catering and housekeeping departments, then inviting other hospices to our site to share best practice.
- Manchester University nutrition students who came to assist our catering team in compiling crucial data around meals and service and to assist in digitising hospice documents to improve food service.





## Patient facing services

### Clinical teams

At St Ann's Hospice, our clinical teams are under the leadership of the Director of Clinical Services, who holds the position of Senior Information Risk Owner (SIRO) and Controlled Drug Accountable Officer (CDAO). The Director of Clinical Services is further supported by our Head of Clinical Services/CQC Registered Manager and our Deputy Head of Clinical Services. Our clinical teams comprise of:

- Inpatient unit teams including ward managers, ward sisters, advanced clinical practitioners, nurses, associate nurse practitioners, assistant practitioners and healthcare assistants.
- Being You Centre teams including team lead, key workers, healthcare assistants, and therapists.
- 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.
- Clinical educators.
- Homeless palliative care co-ordinators.
- Patient and Family Support team including the bereavement team, chaplaincy team, counsellors, social workers, associate practitioner and a trainee associate practitioner.
- Clinical administration teams including clinical administration co-ordinators, medical secretaries, clinical services secretaries, and ward clerks.
- Clinical volunteers.

Over the course of the past year, our teams have worked diligently to provide services to patients, families, and their loved ones. We have exhibited flexibility and continually adapted as needed to prioritise the safety of our patients, visitors, staff, and volunteers.

In addition to prioritising safety, our teams have remained committed to meeting the unique needs of each patient we serve. Through ongoing communication and collaboration with patients and their families, we have strived to provide individualised care and support to ensure that their physical, emotional, and spiritual needs are met.



### **Inpatient Units**

Throughout 2023/24, our inpatient units have been operating at full capacity, providing a comprehensive inpatient service. Our efforts to improve access to seven-day services have enabled us to admit patients on weekends and bank holidays, thereby ensuring uninterrupted care. Our dedicated staff have tirelessly supported patients and their families in every aspect of their care, offering valuable information to help them to set realistic goals and make informed decisions on matters such as preferred priorities of care, nutrition and hydration, medicines, and visitation.

### **Being You Centres**

At our Being You Centres, we have offered personalised face-to-face and virtual appointments to cater to individual needs. This ensures that all patients have access to medical, rehabilitation, and wellness services. In the last 12 months, our team has provided support to The Christie NHS Foundation Trust Systemic Anti-Cancer Therapy and Phlebotomy Clinic. In addition, our Heald Green site has been hosting a monthly Stepping Hill Hepatic, Pancreatic and Biliary Clinic and Upper Gastro-Intestinal joint clinic. Over the past year our Being You Centre outreach service has continued to gain interest, and the team have been working closely with partners across our localities.

### **Community Specialist Palliative Care Team**

Throughout 2023/2024, our Community Specialist Palliative Care team has maintained a complete range of services and observed a consistent growth in referral volumes. They have provided exceptional clinical guidance and proficiency for patients, our staff, the community, and acute hospital staff throughout the previous year. Moreover, the team has been adaptable in delivering services, including video and phone consultations, when necessary.

### **Homeless Palliative Care Co-ordinators**

This is the fourth year of five of the Big Lottery funded project and the post has continue to grow in strength. The co-ordinators continue to provide support in the management of many complex cases to ensure individuals from this vulnerable population, who are approaching the end of their lives, have a voice which is heard. They continue to work collaboratively with other agencies and refer on when needed.

### **Hospice@Home**

Throughout 2023/24, our Hospice@Home team has provided an uninterrupted full service. The team has efficiently triaged all referrals within 48 hours, assessed the unique needs of patients during each visit, and provided consistent emotional and psychological support to both patients and their families.

### **Rehabilitation Team**

Throughout 2023/24, our Rehabilitation team has continued to provide critical services following the resumption of all services in the previous year. The team has played an essential role in promoting a more rehabilitative culture and has presented their work at several regional and national conferences.

Our complementary therapists have provided services in addition to supporting volunteers, enabling more patients to access these services. Our dietitian has continued to work closely with nursing and catering colleagues to review and enhance our ability to meet the nutritional needs of our patients effectively.

The Rehabilitation team has also provided specialist lymphoedema services to patients across Greater Manchester and Cheshire. Our team of experts has worked tirelessly to offer individualised treatment plans, including complex lymphatic drainage, compression bandaging, and skin care management, among other services. In addition, we have also provided patients with education on self-management techniques to help them manage their condition at home. The aim is to improve the quality of life for our patients by reducing pain, swelling, and discomfort associated with lymphoedema, and promoting self-confidence and independence.

### **Patient and Family Support Team**

Throughout 2023/24, our Patient and Family Support team has provided comprehensive services to assist our patients, their families/carers, volunteers, and staff. The team has demonstrated flexibility and responsiveness in meeting the spiritual, psychological, and social requirements of our patients and their carers.

In addition, the team has facilitated regular Schwartz Rounds for our staff and volunteers. They have also provided clinical supervision to the Social Work team at the Christie Hospital, while the safeguarding lead has delivered safeguarding training to a North West hospice.

### **Pharmacy Team**

Our Pharmacy team has continued to provide pharmacy services, throughout 2023/24 under our service level agreement with Salford and Wythenshawe hospitals. This team, with support from our Advanced Clinical Practitioners and medical team, has helped to maintain pain management, symptom management, medication administration and discharge planning. Over the latter end of the year, our pharmacists have led the start of our implementation of an e-prescribing and e-administration system onto our inpatient units. The system is planned to go live in April 2024 and will improve patient safety and medication management within the inpatient units.

### **Clinical Administration Team**

The Clinical Administration team has supported the clinical and support services teams by working innovatively and collaboratively throughout 2023/2024 whilst maintaining the administration of the clinical services and data collection.

### **Clinical Volunteers**

We are pleased to report on the ongoing contributions of our clinical volunteers throughout the 2023/24 period. These volunteers have remained integral to the provision of high-quality care within our hospice, offering invaluable support to our patients and clinical teams.

Furthermore, we are proud to recognise the leadership of our Clinical Quality Volunteer, who has continued to lead patient interviews across both of our inpatient units. The feedback gathered through these interviews has been instrumental in identifying areas for improvement and enhancing the overall quality of care provided.

### **Medical teams**

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

Throughout 2023/24, our consultant-led medical teams have delivered exceptional care across our inpatient units and the wider communities that we serve. Our medical teams have also continued to provide support for our 24-hour Advice Line.





## 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 two years.

### St Ann's 24-Hour Advice Line

Descriptor	2021/2022	2022/2023	2023/2024
Total number of calls	558	530	475
Healthcare professionals	229	254	244
Patients and carers	325	272	229
Pain control	156	165	144
Symptom control	171	162	160
Service and referral information	61	69	29
Non clinical	13	12	4
Other*	138	117	103

\*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 pain management 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 control

Infection prevention and control measures have remained a top priority for our clinical services during 2023/2024. Our teams across the hospice have worked tirelessly to ensure the safety of our patients, families, visitors, volunteers, and staff.

Our commitment to maintaining a safe environment for everyone can be evidenced through our audit programme and both internal and external inspection schedule which we are supported with by our colleagues from the Infection Prevention Control Team at Manchester University NHS Foundation Trust.

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 2022/2023.

### Surveillance Data April 2023-March 2024

Hospice acquired CDI	4
MRSA	0
Hospice acquired HCAI including CPC's	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 produces 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. Incidents and learning from incidents are discussed at the relevant team, departmental and committee 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 the previous two years. Any incidents which required notification to external bodies are also annotated.

Descriptor	2021/2022	2022/2023	2023/2024
Total	619	611	761
Clinical	489	544	642
Non-clinical	130	67	119
Notifiable safety incidents (RIDDOR)	0	1	1
Notifiable safety incidents (CQC)	1	1	2
Duty of Candour discharged	1 of 1 applicable	1 of 1 applicable	2 of 2 applicable

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

- Implementation of interpreter services facility and development of a standard operating procedure for staff.
- Implementation of additional security measures for our main doors after 5pm and standard operating procedures for staff – cross site.
- Review and amendments to our pressure ulcer, infection and falls incident investigation templates.
- Development of a standard operating procedure for patients requiring transfer via North West Ambulance Service.
- Mental capacity assessment training for Hospice@Home staff.



## Staffing

Ensuring safe staffing levels remains paramount in delivering exceptional hospice care at St Ann's Hospice. Over the past year, we have continued to collaborate with Establishment Genie to refine and update our safe staffing guidance, aligning it with the evolving needs of both our patients and staff.

In our commitment to transparency and accountability, we have also released Inpatient Unit Nursing Staffing Levels Guidelines. These guidelines serve as a framework to bolster the delivery of safe and high-quality care to our patients.

Recognising the importance of adaptability, we have explored various staffing models, including recruiting to the nurse bank and engaging with nursing agencies. By prioritising safe staffing practices and investing in our workforce, we remain committed in our dedication to

providing optimal care experiences for our patients and their families.

Our consultant weekend on-call updated model, coupled with the first on-call medical rota across both sites, has been sustained despite the challenges encountered in both staffing and recruitment. This continuity underscores our unwavering commitment to ensuring uninterrupted access to medical expertise and support for our patients.

Whilst acknowledging the unique staffing challenges faced by hospices nationwide, our clinical teams have exhibited commendable flexibility, seamlessly coordinating across services to maintain safe staffing levels. Through collaborative efforts and a shared commitment to excellence, we remain steadfast in our mission to provide compassionate and high-quality care to those entrusted to our services.

### Sickness, absence and staff turnover

	2021/2022	2022/2023	2023/2024
Sickness and absence	Unable to report	4.6%	4.9%
Staff turnover	16.7%	21.7%	25%



## 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 and comorbidities. Our aim is to stabilise existing wounds, prevent new wounds (where possible) and manage any symptoms to improve patient comfort, wellbeing 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 two years.

	2021/2022		2022/2023		2023/2024	
	Present on admission	Hospice acquired	Present on admission	Hospice acquired	Present on admission	Hospice acquired
Number of pressure ulcers	99	37	56	42	90	38
Hospice acquired grade 2 or above	20		21		25	



## 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 2023 to 31 March 2024 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 Measures

Name	Type	Purpose	Frequency	Governance
Clinical Quality and Performance reports	Report	Quality assurance, compliance and review against various measures across clinical services	Quarterly	Clinical Quality and Performance Committee (Trustee attendance)
Clinical record keeping audit	Audit	Compliance against policy/ minimum standards and best practice	Monthly	Team Meetings, Clinical Leaders Meeting
Complaints compliance audit	Audit	Compliance against policy	Quarterly	Heads of Department Meetings (if applicable), Clinical Quality and Performance Committee
Consent	Audit	Compliance against policy/best practice/legislation	Quarterly	Team Meetings, Safeguarding Assurance Tool, Safeguarding Report
Data sets	Report	Key performance indicators measurement (KPIs)	Reported quarterly, reviewed monthly	All Clinical Commissioning Groups, Clinical Quality and Performance Committee
Data quality audit	Audit	Compliance against minimum data sets (policy)	Monthly	Team Meetings, Clinical Leaders Meeting
Dietary Record	Audit	Compliance against policy/best practice guidance	Quarterly	Nutritional Steering Group, Clinical Practice Meetings
Hand hygiene and bare below elbow audit	Audit	Assurance compliance with best practice and infection prevention control policies and demonstrates meeting SLA with MFT	Monthly	Infection Prevention Control Meeting, Clinical Leaders Meeting
Health and Safety walk around	Inspection	Assurance/compliance with best practice and legislation	Monthly/ Quarterly	Heads of Departments Meeting, Safety Assurance Group Meeting
Incident reporting	Review/ analysis/ mini reports	Thematic trend analysis/ identification of areas for improvement/areas of good practice	Monthly/ Quarterly	All relevant meetings
Information Governance walk around	Audit	Assurance/compliance against policy, best practice and legislation	Monthly	Team Meetings, Information Governance Committee



Name	Type	Purpose	Frequency	Governance
Local Intelligence Network (LIN) reports	Report	Safe use of controlled drugs in line with legislation	Quarterly	Local Intelligence Network, Clinical Quality and Performance Committee
Lone Worker	Audit	Compliance against policy/device requirements	Monthly	By exception
Medicines Administration	Audit	Mini administration audit, compliance against policy	Ad-Hoc / Quarterly	Clinical Practice Meetings, Team Meetings
Medicines Antimicrobial	Audit	Compliance against policy/legislation/best practice	Quarterly	Team meetings, Pharmacy Meeting, Clinical Practice Meeting
Medicines Controlled drugs pharmacy audit	Audit	Assurance/compliance against policy & legislation	Quarterly	Pharmacy Meeting Clinical Practice Meeting
Medicines Prescribing	Audit	Compliance against policy/legislation/best practice	Ad-Hoc	Pharmacy Meeting, Huddles
Medicines Safe and Secure Storage	Audit	Compliance against policy/legislation/best practice	Quarterly	Team meetings, Pharmacy Meeting, Clinical Practice Meeting
Medicines Single Nurse Administration	Audit	Compliance against policy/legislation/best practice	Bi-annual	Clinical Practice, Team meetings
Mental Capacity and Best Interests	Audit	Compliance against policy/best practice/legislation	Quarterly	Team Meetings, Safeguarding Assurance Tool, Safeguarding Report
Mental Capacity Assessment	Audit	Compliance against policy/best practice/legislation	Quarterly	Team Meetings, Safeguarding Assurance Tool, Safeguarding Report
Nutritional Risk Screening	Audit	Compliance against policy/best practice guidance	Quarterly	Nutritional Steering Group, Clinical Practice Meetings
Patient & Family Experience Interview	Report/ Newsletter	Assurance/highlight areas for improvement	Annual	Team Meetings (newsletters), Clinical Quality and Performance Committee (reports), Directors Support Services Meeting (reports)
Quality Account	Published report	Legislative report detailing the quality of clinical services over the past 12 months	Annual	Lead Clinical Commissioning Group, Executive Leadership Team, Healthwatch Board of Trustees,
Safeguarding assurance tool	Report	Assurance/compliance with legislation and statutory guidance	Annual	Lead Clinical Commissioning Group
Safeguarding report	Report	Review of the effectiveness of safeguarding arrangements	Quarterly	Lead Clinical Commissioning group, Clinical Quality and Performance Committee
Weight audit	Audit	Assurance/compliance with weighing standards on admission (best practice)	Monthly	Team Meetings, Clinical Practice Meeting, Clinical Leaders Meeting

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 2023/2024 and meetings which took place on an ad-hoc basis (based on requirement) are listed below:

- Audit Committee
- Board of Trustees Meetings
- Clinical Leaders Meetings
- Clinical Practice Meetings
- Clinical Quality and Performance Committee (Trustee attendance)
- Consultants Meetings
- Executive Leadership Meetings
- Heads of Departments Meetings
- Incident Review Meetings
- Infection Prevention and Control Committee (external attendance)
- Information Assurance Board Meetings
- Patient Safety Meetings
- Pharmacy Meetings (external attendance)
- Quality Improvement Group Meetings
- Safe, Associate Specialist and Speciality Meetings
- Safeguarding Assurance Meetings (external attendance)
- Safety Assurance Group Meetings
- Senior Clinical Leaders Meetings
- Team Meetings

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, governance management system dashboards, risk register reviews, and benchmarking against national standards (Hospice UK).

## Quality Improvement Projects

St Ann's has remained focused on quality improvement within our clinical services during 2023/2024. Our Quality Improvement Group approve, monitor and support all quality improvement projects across our clinical services. We have continued to review and evaluate our meetings, looking at how to improve and how we can best evidence our amazing teams and the quality improvement work they undertake.

In June 2023, we held our first Audit and Quality Improvement Seminar at our Heald Green site to showcase the project work our teams carried out over the previous 12 months. There were five presentations and 12 posters which were judged by a panel made up of our Medical Director, our Heald Green Ward Manager and one of our Trustee's.

The winners of the 'Best Poster' were members of the Rehabilitation team for their poster 'How a rehabilitative approach helped us to transform patient outcomes and our hospice culture.'

The winner of the 'Best Oral Presentation' was one of our medics for a presentation on 'Using simulation training to improve management of opioid induced respiratory depression in the hospice setting: a quality improvement project'.

Feedback after the event was very positive with one attendee saying: "Really motivating and inspiring to see what has been done." Other feedback praised the session for being "educational and forward thinking."

During 2023/2024, we have carried out the following quality improvement projects:

- North West Audit Group (NWAG) regional audits
- Audit of compliance against remote prescribing SOP
- Audit of oxygen prescribing and monitoring
- Community Specialist Palliative Care Team patient IPOS implementation project
- Audit of the assessment and documentation of pressure ulcers
- Exploring the views of bereaved people on using the guide to Deathbed Etiquette in end-of-life care
- Audit of driving advice provided to patients taking prescribed opioids
- Safe prescribing audit

- Improving discussions about organ and tissue donation with patients on the Inpatient Unit
- Homeless/inequality awareness campaign
- IPOS contextualisation project
- EMIS admission assessment documentation project
- Ashton's e-Prescribing project

Over the last year St Ann's Hospice has initiated a bi-monthly journal club for hospice medical staff, including those involved in our on-call system (palliative care physicians from Salford Royal NHS Foundation Trust, Stockport NHS Foundation Trust and University Hospital South Manchester). At each session a pre-agreed speaker presents a recently published journal article which we then discuss. The aim of journal club is to keep ourselves up-to-date on current research, learn from the paper and each other and have a lively discussion about how the findings may be relevant to our clinical practice. To date the journal club has been well received and we hope to extend it out to the wider multi-disciplinary team in the coming year.



## Training and education

Further to an organisational change clinical training and education is now coordinated and facilitated by our People & Culture department along with non-clinical training which covers the whole organisation. Throughout 2023/2024, learning and education has remained a priority for our workforce.

During 2023/2024, we have maintained our mandatory training programme. We have successfully achieved 81% compliance rate at the end of the reporting period.

Our mandatory training includes modules for safeguarding, information governance, incident reporting and health and safety. This year we have introduced mandatory training on Oliver McGowan, training on LD & Autism and Patient Safety. Our People & Culture department in collaboration with subject matter experts annually reviewed our mandatory training requirements, ensuring that training gaps were identified and bridged to support our staff and volunteers.

Our medical team has 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.

Clinical education has continued on a rolling programme throughout the year and includes training covering multiple topics; for example, moving and handling, medicines management, basic life support, tracheostomy care, catheterisation and intravenous (IV) skills.

We have continued with our Inspire Leadership Development Programme throughout the reporting period 2023/2024 and in this time 12 leaders have successfully completed the course.

We have worked with the Ruth Strauss Foundation to deliver communication on cancer training, with a particular focus on explaining terminal illness to children, to 15 staff members of patient facing roles. Training for all registered nurses on the PARE system has taken place, as well as training on being a supervisor/ assessor for students via the Practice Educator Facilitator team.



## 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 and Support Services including Catering, Maintenance, Housekeeping and IT
- Fundraising
- People and Culture
- Finance
- Marketing and Communications
- Training Company
- Volunteers

All teams have delivered services throughout 2023/2024 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.

### Facilities and support services:

- Onsite PAT testing of all electronic devices (including devices brought in by patients) to ensure electrical safety.
- Water sampling testing to check temperatures and to ensure the risk of legionella is reduced thus maintaining patient safety.

### Trading Company:

- Supported the re-opening of the Heald Green café by facilitating the recording of all café sales through our Trading Company EPOS system.
- Completed a lighting survey across all Trading Company sites and identified savings of £16k per year.
- Covered the rear yard at our Edgeley shop to increase storage space to continue the shop's income growth.

### Fundraising:

- Following feedback from supporters we have reimagined our Midnight Walk into an evening walk with two walk lengths to increase accessibility.

- We have worked closely with the Marketing and Communications team to increase the efficiency and appropriateness of supporter communications including the integration of our CRM and mailing software client.

### Marketing and Communications:

- Enhanced internal communications with staff and volunteers to improve engagement. The changes began with a staff survey to gather opinion, and changes have included a new Team St Ann's Quarterly meeting with key updates on organisational vision, and a monthly briefing to team leaders.
- Formed the new North West Hospice Communications Consortium to share best practice, enhance ways of working together and developing ways to promote the hospice sector at a regional and national level.

## Volunteers

The hospice has around 400 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.



## Patient and carer feedback

Patients, relatives and care givers can provide feedback to us in many ways; for example, comment cards, verbally, through patient interviews, in writing or via our website.

### Patient interviews

Our bi-annual patient interviews are a valuable and rich source of information which enables us to 'hear' the patient voice and provides insight into what we do well and also where we can make improvements. The results for the reporting period 2023/2024 are detailed in the table below along with a selection of comments received during the last 12 months.

Area	Summary Results (overall positive responses)
Communication	93%
Beliefs, values and religious needs	79%
Consent	92%
Pain Management	91%
Emotional support	83%
Nutrition and hydration	98%
Privacy and dignity	98%
Person centred care	92%
Complaints	64%
Access and referral	85%

"I am cared for very well; it's like being cared for at the Savoy. The care I am getting is very good. I tell you now I wish I had supported St Ann's Hospice and the hospice movement before. I know I am on my death bed but I wish I had done more. Thank God it is here. If I had been cared for at home it would be people coming and going and it would have been very difficult for me."

"The doctor says this is what they want to do and I can then say what I think. They always answer if you have any problems and if I feel anxious, they ask if they can help or if they cannot they find someone who can."

"They come and ask what would like for lunch and evening meal. You can have anything you like. There are options. And three courses. It's like dining at the Ritz."

"I don't feel lonely or isolated. The staff are always popping in to come and see me."

"I have experienced the most wonderful care. I have had a total body wash and a shave and the nurse played music I wanted. Nobody has done it better. They put cream on my legs to soothe them and that means a lot to me."



## 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 anonymous 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 2023/2024 are detailed in the table below:

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

	IPU	Outpatients	Community
Very Good	111	99	149
Good	8	4	7
Neither good nor poor	0	0	0
Poor	0	0	0
Very poor	0	0	0
Total completed	119	103	157

## 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 media.

"My mum spent her last few months in St Ann's and she had her last birthday in there too. They were amazing. They had made her an incredible birthday cake. They allowed us precious extra time with her and making more memories to treasure."



"Thanks to all at St Ann's Hospice Heald Green for not only making a special Christmas Day but for all the care during our mum's stay. Truly amazing!!"



"They are such wonderful people. They are so caring and dedicated. The care and love that my mum received was excellent. Thank you to each and every one of you."



"So grateful for the care you gave to my husband Martyn while he was at Little Hulton."

"Such an incredible place to look after our loved ones."

"This amazing nurse looked after my mum in the hospice in 2015/16. We are eternally grateful. Thanks."



## 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 for the reporting period and the previous two years.

	2021/2022	2022/2023	2023/2024
Formal complaints	4	3	3
Informal complaints	6	17	26

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



## 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.

During 2023/2024 communication and engagement with staff has remained a priority, the list below details the methods of engaging and communicating with staff.

- Mentoring and coaching programmes to support staff development.
- Clinical Leaders Away Day, facilitated externally with a focus on team building, leadership and vision setting.
- Healthcare Assistant Away Day, facilitated by Advanced Clinical Practitioners, with a focus on reflection, continuous development and learning.
- Schwartz Rounds.
- The Chief Executive Brief, published on a weekly basis.
- Director drop-ins.
- The Involve Group meets on a quarterly basis, representing the views of staff from across the hospice.
- The hospice's Wellbeing Week, which was held on a hybrid approach of online and face-to-face sessions in 2023/2024. Both staff and volunteers are encouraged to participate in the events.
- Chair Awards & Long Service Awards for Staff and Volunteers to celebrate achievements.
- Open-door policy for staff to raise concerns or suggestions to senior management.

- The Equality, Diversity and Inclusion group with representatives from across the hospice, meet on a quarterly basis.
- Keep in Touch (KIT) Meetings.
- Leadership Exchange Network to promote collaborative working, sharing experiences and focus on development for leaders.
- Mental Health First Aiders continue to support staff across the hospice.
- Our Wellbeing newsletter, continues on a quarterly basis, promoting health and wellbeing hints, tips and links for further support.
- Staff relaxation sessions.
- Care First, the Employee Assistance Programme is still in place and available to all staff.
- Greater Manchester Resilience Hub is still available for all staff.

In addition, engagement with staff takes place through various meetings; for example, performance, development and review meetings, 1:1 meetings, clinical teams daily huddles, departmental meetings and team meetings.

### Staff survey

Our employee check in questionnaire was completed in 2023/2024. 122 employees completed the questionnaire which is similar to when the survey has been carried out in previous years.

Our highest responses included: 91% of our people say their work is interesting and 84% of our people understand what this charity wants to achieve as an organisation.



## 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:

**Having worked closely with St Ann's over a number of years, I am always impressed by their commitment to excellent quality care for all their service users, despite the challenges of the current financial climate. Over the past year, they have worked tirelessly to reduce some of the barriers to accessing their support faced by some minority groups, in an effort to ensure equitable access to all those in need - working particularly with homeless people and those from LGBTQ+ communities.**

**It is evident from these accounts that St Ann's is an exemplar for innovation, leading the way in defining "best practice" palliative care, whilst working collaboratively with other hospices to share this learning and work towards a sustainable future.**

**Over the coming year, it will be exciting to see the progress on the new build and I look forward to seeing how this will further shape the future of palliative care provision for years to come.**

Dr Karen McEwan  
Clinical Lead for Cancer, EOL and Palliative Care,  
Stockport Locality  
Manchester Integrated Care Partnership



**We welcome the opportunity to comment on the Quality Account for 2023/2024 from St Ann's Hospice. We are pleased to review the high-quality care maintained over the past twelve months, despite the financial and recruitment challenges faced across all areas of healthcare. It is lovely to see St Ann's has been recognised for their collaborative approach to end-of-life care at the Market 3rd Sector Awards, highlighting the importance of this work.**

**The report clearly shows that St Ann's has been dedicated to developing opportunities that support their strategic aims and core values, as well as being more proactive in their collaborative partnerships which will undoubtedly enhance the effectiveness of their services. The commitment of the clinical, medical, and support teams to meeting the needs of each individual patient is a credit to everyone involved. It is reassuring to see the use of quality assurance tools to ensure the best possible care for patients.**

**Amid the staffing challenges faced by hospices nationwide, the leadership team at St Ann's has worked proactively to develop models of care that meet patient needs while also engaging with staff to ensure they feel valued and fulfilled in their roles.**

**We are delighted to see the progress on the new Heald Green Hospice project and look forward to following its development in the coming months. The new hospice will greatly enhance your capacity to improve the experiences of patients, families, and carers further.**

On behalf of Healthwatch Stockport Membership

## Contact details

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