

FUNDRAISING REPORT

BURY HOSPICE



An Overview for the year
2021-2022



Registered with
**FUNDRAISING
REGULATOR**

Bury Hospice
Rochdale Old Road
Bury BL9 7RG
Registered Charity no. 1136843

Final Version - 25.10.22

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Contents

Page 3 A statement on behalf of the CEO and the Chair of Trustees

Pages 4 - 6 Leadership & Governance

Pages 7 - 16 Our Strategic Plan

- Our Vision
- Our Strategic Goals
- An Overview of Services
- Our Year in Numbers
- Our Challenges
- Financial Summary

Pages 17 - 19 Quality Performance

- Key Clinical Quality Measures
- Key Performance Information 2021-22

Pages 20 - 23 Looking Forward

- Improvements Planned
- Statement of Support



A joint statement on behalf of the CEO and the Chair of Board of Trustees



Helen Lockwood
CEO



Chris Claydon-Butler
Chair of Trustees

The Quality Account for Bury Hospice 2021/2022 is one of the ways we can show to all those people we serve; our patients, their families and carers that quality, compassion and effectiveness is at the heart of all we strive to do here at Bury Hospice

As we reflect on the period of 2021/22, we have survived and thrived through a global pandemic acknowledging that the staff responded magnificently and compassionately to the challenges it faced.

The organisation has undergone significant changes to staff over the last 12 months with a new CEO and appointments to the senior leadership team. We thank the staff that have served the Hospice and welcome our new team who will continue to build on the foundations of quality improvement achieved to date.

This Quality Account aims to demonstrate the extent of the work that has been undertaken during the year and identifies areas where work is continuing to help us move forward with a focus on quality and continued improvement.

Over the next twelve months we will continue to work with our staff and partners in care to ensure our service meets the needs of our population and is safe, effective, caring, responsive and well-led.

We know that everyone's needs are individual and can evolve over the course of time. Therefore, we ensure that our services can adapt to the dynamic changing needs of service users, both onsite and in people's own homes. Our care is truly holistic, encompassing practical, physical, emotional, symptom management and spiritual support

As Chair of the Board of Trustees, I have great pleasure in endorsing the Quality Accounts. On behalf of all the members of the Board and our dedicated and caring staff, we will continue to monitor our achievements, and progress against our ambitions through internal and external reporting mechanisms to ensure that all patients and families in Bury receive compassionate and outstanding care during their palliative and end of life journey

BURY HOSPICE

Leadership & Governance



Our Senior Leadership Team



Helen Lockwood
CEO

Grant Evans
Interim Director of
Finance
& Corporate Services

Jane Banks
Quality, Governance
& Compliance Lead

Lara Partridge
Director of Income
Generation

Sarah Machin
Director of
Clinical Services

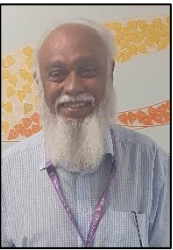
Dr Liz Turley
Hospice GP

Our Board of Trustees



Chris Claydon-Butler
Chair of Trustees

Stuart Page
Vice Chair



Devin Cassidy

Deborah Lisle

Liaqat Ali

Jane Hibbert

Dr Gill Rink

Tom Postlethwaite



Ruth Deakin

Paul Horrocks

Noreen Kershaw

Donna McNicoll

Ruth Robinson

Dr Kevin Jones

Carol Kennett received chemotherapy at our Christie Clinic

We host The Christie clinic in our Living Well Centre twice a week, every Tuesday and Thursday as part of the Systemic Anti Cancer Therapy (SACT) Outreach service bringing treatment closer to home. SACT is the delivery of systemic anti-cancer therapy - this can be chemotherapy, immunotherapy, bisphosphonates or hormone treatment.

Carol Kennett, aged 43 first got breast cancer in 2019. She had surgery and received a course of chemotherapy. On December 23rd 2021, Carol was diagnosed with breast cancer on the opposite side. Both primary cancers were diagnosed as rare triple negative breast cancers. Carol started her chemotherapy at The Christie before being referred to Bury Hospice to continue her treatment.

Carol said: "The Christie Clinic at Bury Hospice has made an enormous difference to me.

"Previously, I had to travel between 45 minutes and 1.5 hours, depending on the traffic to have my treatment at The Christie. Now it only takes me 10 minutes. It is not as stressful as having to travel to The Christie. It saves me a lot of time. I'm not panicking about having to get home for childcare and my energy levels are higher. It is also less stressful for my family members so I have more people to support me.

"It is a friendly environment in the Living Well Centre and I speak to the nurses and other patients when I'm having my treatment."

We care for cancer patients every day and see first-hand the strain that travelling to The Christie has. It's great to be able to offer our facilities to help cancer patients throughout the Bury area.



The Christie
Charitable Fund 

BURY HOSPICE

Our Strategic Plan



Our Vision

At Bury Hospice, our aim is to become a Centre of excellence for palliative and end of life care in Bury and in doing so make every day the best it can be for people in Bury living with life limiting illnesses.

In this document we set out the goals we believe are needed to extend the reach of our care across the community and importantly one that allows us to be ready to meet the needs and demands for palliative and end of life care that will increase over the forthcoming years. 2022/2023 will be focused on delivery against these long term goals.

We want to be part of an integrated team that will ensure care is available to all and that this is built on solid foundations that are sustainable.

Who is Bury Hospice?

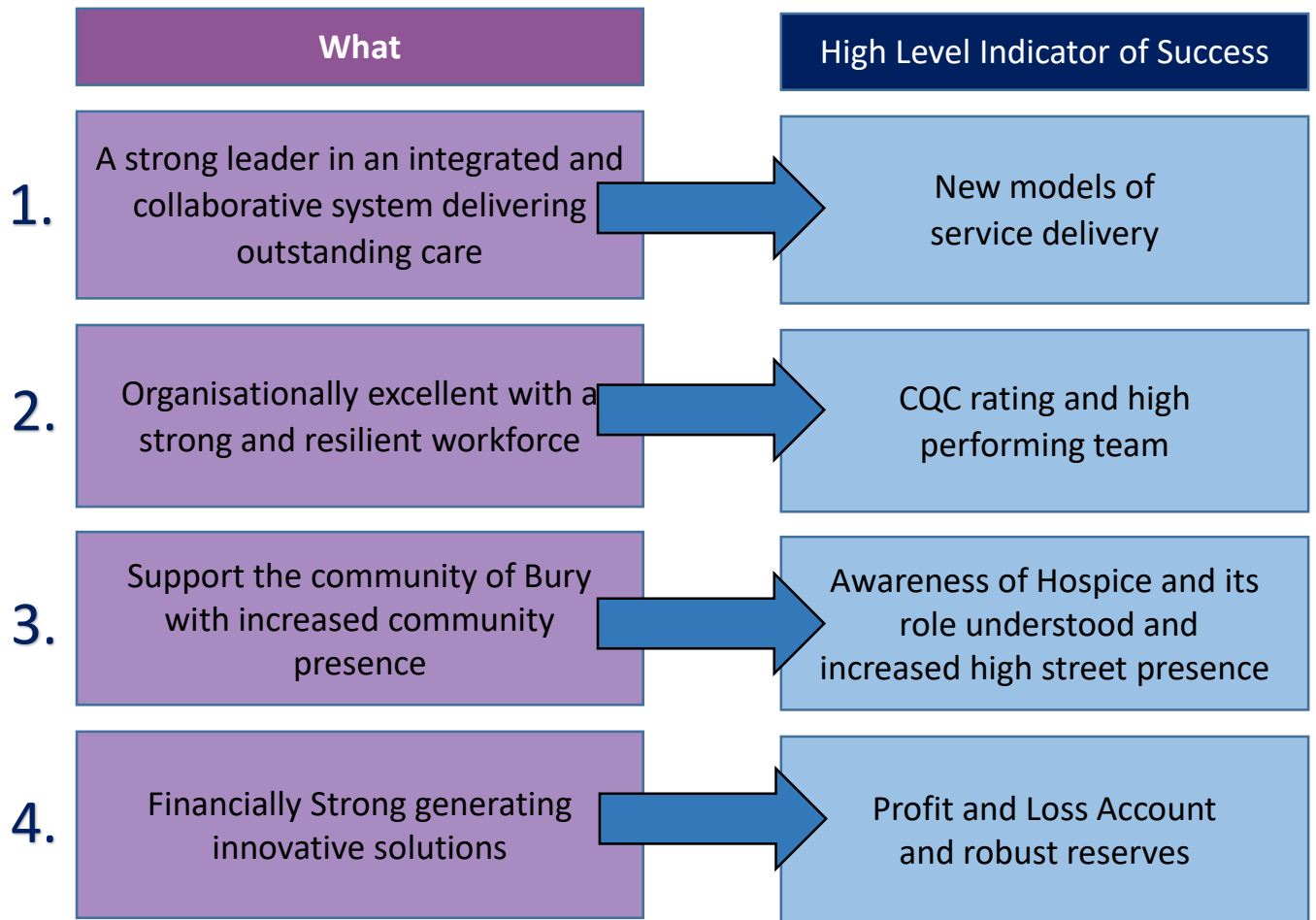
Our specialist and dedicated services include a 6 bedded Inpatient Unit (IPU) with the capacity to increase in size if required, community outreach and bereavement/holistic support services.

It costs us £3.5m to run our services with a 18% contribution from the NHS. The remainder is raised via charitable income generation and a retail offer that spans across the Borough.

We recognise and value the important role volunteers play in enabling a thriving and successful hospice and we are proud of the fact we are supported by over 450 registered volunteers.



Our Strategic Goals for 2022 onwards



What we do

By providing support and specialist services be that in someone’s home, care home or in the hospice itself we work hard to enable patients and families to share precious moments when they are most needed.

Last year we supported **139** in our Inpatient Unit and **561** were helped by our outreach team.

Over **313** families and children received support from our Bereavement and Family Support service

Complementary Therapy started in July 2021 and has provided over **179** treatments

We are proud of the service we provide and we know it is a valued and much needed service to those in need.

Our Values – Bury Hospice

To be successful and improve on our already strong foundations, we need to live our values and ensure they are reflected in all we do:

Learn

- Challenge
- Improve
- Lead

“We make sure we do things right”

Inspire

- Communicate
- Recognise
- Inclusive

“We encourage Anybody and everybody”

Care

- Listen
- Support
- Empathise

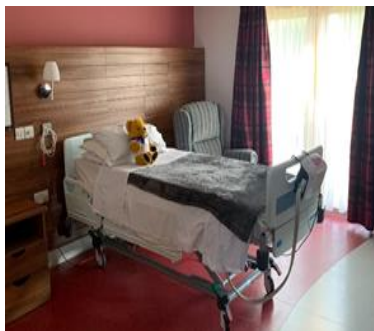
“We go the extra mile”

Respect

- Connect
- Create
- Champion

“We give the Community a voice”





Inpatient Admissions – **139** - an average of **11.5** days per admission



Average days waiting for admission – **1.6** days



561 patients seen by Outreach Team with **2103** visits



604 people supported with **551** face to face contacts

Our Volunteers



**450+
Volunteers**

**90+ volunteers
recruited in
2021/22**

**The impact of
Volunteering**



**£400,000+
annual
organisational
cost saving**

**40,000
volunteering
hours annually**



Our Walk & Talk Group

Several bereavement services are available at Bury Hospice to help and support people to cope with the loss of their loved ones. Our dedicated Bereavement Support Team at Bury Hospice, offer bereavement and grief counselling support and emotional care to patients and their families within the borough of Bury.

One of our services is our Walk & Talk Group

Aim

To provide an opportunity for those going through bereavement to enjoy the company and support of others, in a relaxed and rural setting.



Activity

We run a weekly walking group, which meets at the Hospice reception on Rochdale Old Road every Tuesday at 10.30am. The walk lasts for approximately 90 minutes

The walk is led by fully trained and friendly volunteers and the group is open to everyone. Refreshments and a space for a chat are available at the end of the walk at the Hospice.



Feedback

- Meeting with people each week has given a purpose to focus on each week
- Meeting other people in the same situation has helped people along their own journey
- It's a great way to increase exercise and meet new people

Our Challenges

In considering our actions and approach for the next three to five years it is important to reflect and consider the challenges facing Bury Hospice and the wider borough.

- The UK population is growing in this is reflected in the wider population for Bury.
- The percentage of the population that is 65 years or older is growing and expected to increase significantly alongside complexity of need. It is predicted by 2050 one in three people will die with dementia and many will be living with multiple illnesses with the prevalence of cancer and other life limiting diseases increasing.
- We know that in Bury approximately 44% of people die in hospital, 23% in care homes, 7% hospice and 2% other and yet we know that over 82% of people would wish to die in their own home.
- Linked to this is the Bury system wide work on End of Life and Palliative Care that has recognised that change is needed to ensure people are receiving the right care in the right place and delivered by the right person in order to help change the current way we do thing.
- A scarce workforce from which to recruit.
- Continued budgetary pressures across health and social care including Increasing costs for utilities, living wage and national insurance.
- Potential fatigue towards charity giving and an increased focus from national charities.

Our opportunity now is to deliver a three year plan to ensure:

- ✓ We have the capacity and correct model of care to meet demand.
- ✓ Right mix of skills and talent.
- ✓ Create an environment that reflects the needs of patients and employees.
- ✓ Strong partnership with health and social care colleagues.
- ✓ Embrace Technology.
- ✓ Diversify and grow income to fund services and build financial resilience.
- ✓ Be part of an integrated team delivering End of Life and Palliative Care.
- ✓ To be a Centre of excellence and lead partner for specialised care.

David Berry's story...

David Berry's wife, Lillian was supported throughout her illness by Bury Hospice where she was cared for by the Outreach Team before she died in June 2021.

David has been receiving support from our Bereavement Support Team and attends the weekly Walk & Talk Group and Bereavement Café.

David said: "I have experienced the care first-hand and the support is immeasurable - not just for the patient but for the family too. Lillian received the best care and the Hospice provides me with emotional support, empathy and respect.

"I will always be grateful to the nurses for their kindness they gave to Lillian and I would like to give a special thank you to Amy, as we saw her every week leading up to Lillian's death.

"I cannot thank the nursing team enough for what they did for Lillian and the bereavement team for the ongoing support they give me."

Inspired by the care Lillian received from our Outreach service and the support David still receives from the Bereavement Support Team, David wanted to give something back so decided to fundraise for the Hospice. David Berry, aged 82 signed up to take part in the Bury Hospice Abseil along with a group of 53 participants.

David abseiled down Peel Tower on the top of Holcombe Hill on Saturday, July 16th alongside his son, Duncan.

Peel Tower is perhaps Bury's most famous landmark. Built as a monument to the town's most famous son, Sir Robert Peel, the iconic structure can be seen for miles around. At a height of 335 metres above sea level, it affords stunning views of Greater Manchester, Cheshire and even North Wales on a clear day.



David and Lillian's son Duncan, who also made his way down the iconic 128ft landmark, said: "It's Bury Hospice who organised the event and my dad goes every Tuesday to a walking club. He spends quite a bit of his social time up there as a thank you for the support they've given him when we lost my mum. It was advertised on one of the notice boards in Bury Hospice and he said 'I fancy having a go at that' and we all looked at him strangely. Anyway he filled in the forms and asked who was going to do it with him. So, I stepped forward so he wasn't doing it on his own but there was around 50 participants doing it so it was quite a big thing.

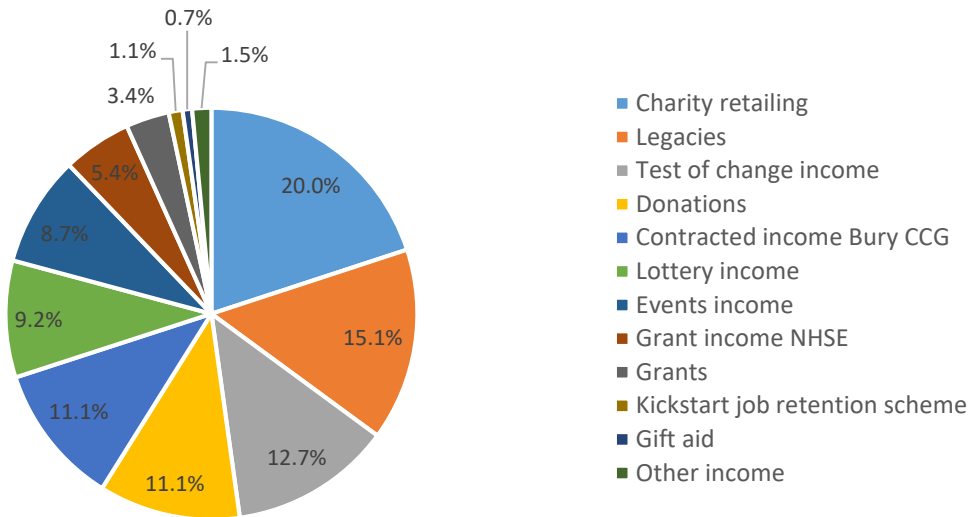
"It's my Dad's way of supporting the Hospice really and giving a bit back. I don't think there are many 82-year-olds who would abseil 128ft down Peel Tower!"

Financial Summary

The financial year 2021/22 was a very successful year financially for the Hospice.

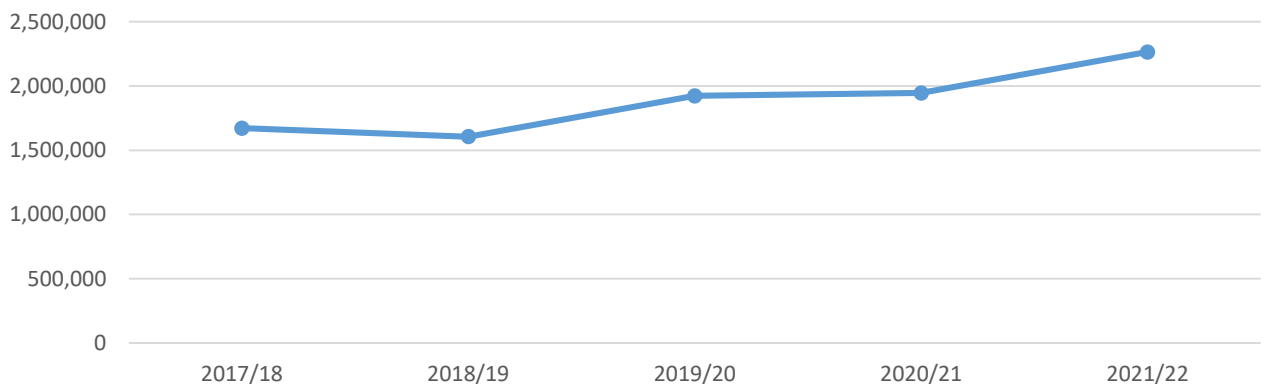
The Hospices services are offered free of charge to all. The Hospices annual running costs for 2021/22 were £3,388,695. 18% of this is provided by contracted NHS income via Bury CCG. In order to ensure these costs are covered the Hospice raises money via charitable donations, our lottery and retail operation.

Hospice income sources



Bury Hospice charitable costs have risen by almost £600,000 or 35% in the last five years. It is only the generosity of our supporters that allows the Hospice to continue to provide this vital service.

Bury Hospice Charitable Activities Expenditure



BURY HOSPICE

Quality Performance



Quality measured, reported on and scrutinised - internally and externally:

To assure the public, patients and families, Trustees, the NHS, the regulators and ourselves, a suite of quality metrics is systematically recorded and reported monthly to Committees, quarterly to the Board of Trustees, the NHS and regulators. Annually we share key metrics in this report and in our audit of accounts.

Patient and relative feedback is sought continuously in 'real-time' and also after care. All incidents, both clinical and non-clinical are reported, investigated, logged on a central register and reported in the same way.

We record compliments, concerns and complaints to ensure we learn quickly and directly where patients or families tell us their experience was not what they expected and where they want to highlight what was excellent. Concerns or complaints are logged, investigated, and reported on and remedial actions agreed and documented to demonstrate related service improvements. Our compliments are shared with the relevant teams and within the Hospice as appropriate and are recorded to help demonstrate the satisfaction of our service users.

Case reflections, which are open to all clinical staff take place for shared learning. The discussions are documented and any actions, which may be agreed are shared reported on and implemented. This might mean a new audit or new training, refresher training or evidence to help us make a new business case to develop services.

Bury Hospice is also a member of the Hospice UK 'Inpatient Unit Quality Metrics' national benchmarking project. We contribute information for benchmarking against the Inpatient Units of other similar sized hospices on three key quality measures – patient falls, pressure ulcers and medication incidents. We submit our data quarterly to Hospice UK and receive feedback reports from them showing how we compare with other hospices on a quarterly and annual basis.

Risk Assessment and Controls

The Board of Trustees is responsible for ensuring there are effective risk management controls in place.

- Risks are identified in daily practice, scored and recorded with mitigation on our operational risk register.
- Where a risk is identified as significant, it is escalated and an action plan is designed to mitigate and manage the risk.
- The Hospice Senior Leadership Team reviews all risks and action plans.
- The Board of Trustees reviews the most significant or strategic risks quarterly.
- Formal project groups are set up for major projects, to ensure they are properly planned, managed and implemented.

Key Performance Information 2021-22

Inpatient occupancy	76%
Inpatient referrals	18 per month
Length of stay	11.5 days per month
Number of formal complaints	1
Number of compliments	95
Safeguarding alerts	0
Number of Pressure Ulcers (Hospice)	17
Families & children supported by bereavement	313

BURY HOSPICE

Looking Forward



Corporate

- **Monitoring that all quality improvement actions are completed:** Organisational monitoring plan implemented to ensure actions are completed in a timely manner to expected standard
- **Implement organisational audit schedule:** Allocate audits to relevant governance committees and ensure monitoring of all arising actions through to completion
- **Enhance reporting of Workforce and HR key performance indicators**
- **Improving and maintaining compliance with mandatory training**
- **Implement departmental risk assessments and enhance organizational risk assessments**
- **Commission education in line with TNA:** Training Needs Analysis reflects requirements to enhance compliance and commissioning of additional education is planned
- **Improve recording and reporting of all Education ;** both formal and informal via Blue Stream system and report to managers and via governance structure
- **Introducing access to Freedom to Speak up Guardian**
- **Include progress against strategic objectives in Board reports going forward**
- **Developing and strengthening our income generation approach to support our goal of financial stability**

Clinical

- **Undertake test of change projects:** expand access to outreach and pilot night sitting
- **Move towards electronic records for all services**
- **Support implementing HSCN cable connectivity to ensure access to wider NHS systems**
- **Enhance medicines management:** review pharmacy SLA, refurbishment and relocation of CD room, continue learning from incidents to improve practice
- **Clinical Supervision:** improve access and reporting
- **Enhance reporting of patient experience:** increase response and expand the breadth and depth of service user feedback through service specific surveys and capturing patient stories
- Implement Case reviews and reflective practice relating to complex cases
- **Continue to develop relationships with our community ;** with particular emphasis on seldom heard groups such as people from a BAME background, people with dementia, mental health problems, learning disability, sensory impairment and Traveller communities

Quality Governance and Compliance

- **Monitor progress of policy reviews** and report via governance structure
- **Complete external audit** : Health and safety and Information governance reporting on actions and monitoring to completion via the governance structure
- **Enhance organisational Audit**: sourcing and developing appropriate audit tools, conducting audits with key staff, presenting results and action plan to relevant SLT and governance Committees
- **Enhance internal safeguarding incident reporting** via new vantage forms
- **Enhance use of the Vantage System**: Implement measures to improve data inputting, investigation and reporting



Bury

Clinical Commissioning Group

Will Blandamer
Executive Director for
Strategic Commissioning

Over the last 12 months and during the pandemic, closer collaborative working has developed between GM ICS Bury Locality (formally Bury CCG) and Bury Hospice, which has seen the Hospice develop further as a strategic system partner.

Strengthening the working relationships has resulted in regular communication and sharing of information e.g. the CEO attending daily system sitrep meetings. The hospice services have become more aligned to the locality objectives, which for Specialist Palliative Care services is integral to achieving daily management of patients and ensuring Right care, Right time, Right place.

Individuals have worked together to produce robust timely and meaningful data which has facilitated richer quality discussions, enhancing/informing service developments and provision of care.

The system benefits have been evident in the reach of Specialist Palliative Care services across Community Services and into Care Homes especially during the pandemic. The benefits have also resulted in successful orchestration of joint pilot projects for small tests of change which ultimately may improve overall service provision and patient and families experiences.

GM ICS Bury Locality looks forward to the continued seamless approach to developments across Hospice and Specialist Palliative Care services and partnership working.

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Version 2: 22.11.22



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