

# QUALITY ACCOUNTS

## Bolton Hospice

### 2015 - 2016



**Bolton Hospice**  
caring from the heart

# Chief Executive's Statement



Welcome to our quality account report which is written to provide a focus solely on the quality of the care we provide to our patients and their families and in light of the national drive to recognise the significance and importance of quality, compassionate care.

The reporting period is 2015-16, providing a snap shot of now 2015 and the action planned for continuous improvement going forward into 2016.

Bolton Hospice is an independent charity (registered no 518704) and constituted as a company limited by guarantee (registered no 0211495). The Hospice is governed by a Board of Trustees and run by the Chief Executive and the Senior Management Group (Palliative Care Consultant, Clinical Services Director, Finance & Corporate Services Director and Income Generation & Communications Director).

We provide the following services:

- 16-18 Inpatient beds
  - Outpatient Clinics
  - Day Support Services
  - 24 Hour Advice Line
  - Hospice at Home
  - Lymphoedema Clinic
  - Physiotherapy
  - Occupational Therapy
  - Complementary Therapy
  - Social Work Services
  - Bereavement Support
  - Education and Training
  - Hair and Image Services
  - Chaplaincy and Reflection
  - Creative Therapy
  - Cancer Information and Support Service
- } *Medical  
Direct Clinical  
Nursing  
Care*

All of our services are provided free of charge to patients and their families, we income generate 80% of our £4.1 million total annual running costs through charitable donations, our lottery and retail operation. We receive a contribution of approximately one third towards our direct clinical care costs from the NHS via Bolton Clinical Commissioning Group (CCG). The charity, through its Trustees, are accountable to the Charity Commission, Companies House and its membership, who are drawn from the local community.

We are registered with and inspected by the Care Quality Commission; the CQC are our regulators who obtain information about our services from a number of sources and use these to build a picture of the quality of the care we provide. The CQC inspect our services annually and report on the outcome quotes from which are referenced in the body of this report.

The Trustees, the Senior Management Group, our staff and volunteers are totally committed to the delivery of compassionate, quality care to our patients, their family and friends and we commend this report to you as evidence of just how integral to our culture as a Hospice, quality and compassion is and how it is embedded throughout our purpose, values, strategic aims and objectives.

Our core **purpose** is to enable people with life-limiting illnesses to live well until they die and achieve a good death, by providing compassionate care and support for patients and their families.

### **Our Values are based on:**

- Being inclusive and non-judgemental
- Being open, transparent, accountable and objective
- Giving support to the whole family
- Constantly striving for excellence and continual improvement
- Being committed to embracing, valuing and respecting diversity
- Respecting, supporting and celebrating our volunteers
- Trust, respect, honesty and integrity in all we do
- A compassionate, appropriate and proportionate response to meeting need
- Appreciating the value of every £1 donated to our cause and using it wisely

### **Strategic Aims:**

1. To provide the best possible palliative and end of life care for the people of Bolton and their families
2. To enable people to live well through the course of their illness
3. To help families cope with the impact of end of life
4. To support the people of Bolton in achieving the principles of a good death for all, wherever possible
5. To work with Bolton CCG, Bolton NHS FT and Bolton Council to help deliver their palliative and end of life care strategic objectives too

### **Strategic Objectives:**

1. To remain the number one provider of excellent specialist palliative and end of life care
2. To be financially robust and prudent in all we do
3. To provide a safe, welcoming, inclusive and therapeutic environment
4. To be the recognised hub of specialist knowledge, training, education and community awareness
5. To remain true to our core principles and values
6. To ensure we deliver our vision, mission and purpose



**Dr.h.c. Leigh Vallance**  
**Chief Executive**

# WHAT OUR ORGANISATION IS DOING WELL

## Patient Safety

We strive to treat people in a safe environment and protect them from avoidable harm (NHS Outcome Framework Domain 5 Department of Health 2015/16).

- In August 2013 we had an unannounced Care Quality Commission Inspection and were fully compliant in all Outcomes assessed.



<http://www.cqc.org.uk/directory/1-106965965?referer=widget1>

- We have not had a more recent inspection which will focus on our ability to prove our services are safe, effective, caring, and responsive to people's needs and well-led (Care Quality Commission 2014).
- In preparation for our next inspection, two members of the Board of Trustees met with staff and patients and measured us against the new criteria.

### Staff comments made during Trustees' recent assessment:

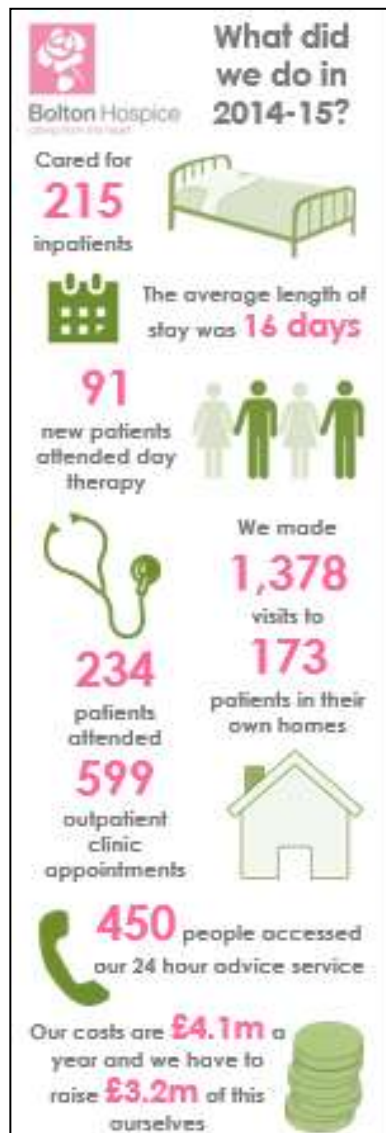
*"It was felt that there is much to learn from the build process, especially at the planning stage".*

*"Staff rotation issues have settled down and teams are more stable".*

*"The good work of the clinical staff ensures that we continue to successfully fundraise".*

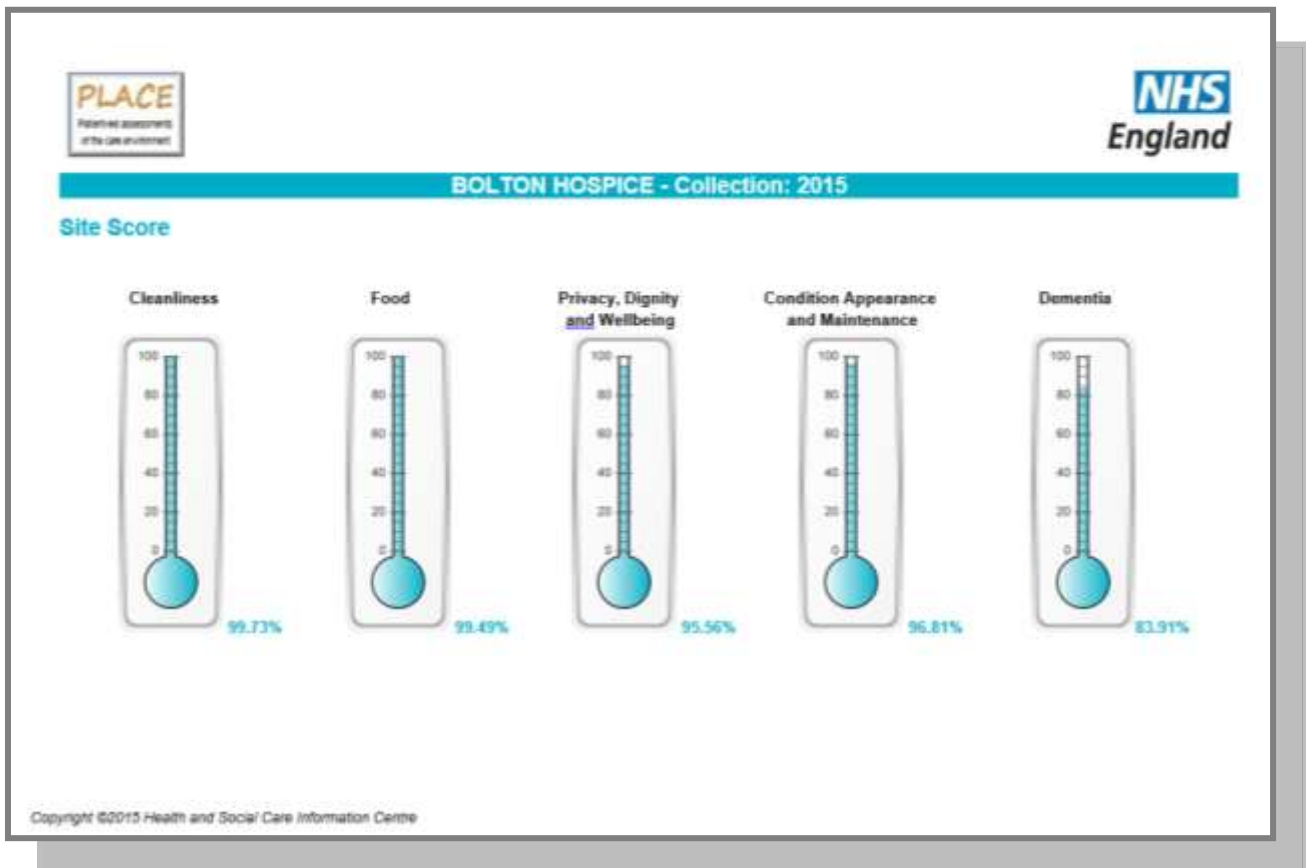
- We continue to submit monthly data for the NHS Safety Thermometer in line with other service providers within the NHS.
- **41** patients experienced a fall this year, **24** resulting in no harm and **17** resulting in low harm, this is a reduction of **17** from the previous year.

- We opened our newly refurbished wing in September 2014 and this is reflected within our annual figures.



- We sourced external professionals to undertake audit on all aspects of Health and Safety and Waste Management which has led to further staff training at IOSH level, improved segregation of clinical waste, risk matrix, policy review and changes within practice.
- In line with the Department of Health (2015) and the CQC stance on candour, Bolton Hospice deals promptly with all incidents and fosters an open culture whereby risk management and incident reporting are encouraged. We promptly dealt with **278** incidents this year and individual, departmental and organisational learning took place.
- We continue to comply with the Information Governance Toolkit.
- We have increased our skill mix on nights to ensure patient safety is not compromised due to the design of the new unit and patients' dependency levels.
- All Controlled Drug errors are reported within 48 hours to NHS England and this is shared openly within the North West Local Intelligent Network.

- Our newly refurbished Pharmacy allows minimal interruption and greater ability to drugs segregate and prepare medications.
- The clinical team achieved 100% compliance in competency based training.
- The Catering Team have worked very hard to comply with the new food allergen regulations.
- In April 2015, we undertook our second PLACE (Patient Led Assessment of the Clinical Environment); we are very proud of our results:-



**Extracts from the summary report completed by Patient Assessors at Bolton Hospice PLACE Inspection - 13<sup>th</sup> April 2015:**

*“The Volunteers’ Inspection Team are very impressed with the state of buildings, services and methods adopted. These points are constantly visible by the Team”.*

*“All areas accessed by patients are safe and well maintained”.*

*“All patient needs are catered for in liaison with staff support”.*

*“All food served to patients is homemade using fresh, local produce. Excellent standards, could not fault. If the patient does not fancy what is on the menu or they do not have an appetite, they can order off menu and the Chef will source the food items. Diabetic homemade cake was lovely”.*



OTHER PATIENTS' SAFETY DATA		
	2014	2015
Total Number of <b>Drug Errors</b> : (this figure is broken down as below):	<b>31</b>	<b>21</b>
<i>Near Misses</i>	5	2
<i>Prescribing Error</i>	5	1
<i>Omissions</i>	5	0
<i>Administration</i>	7	4
<i>Dispensing Error</i>	3	4
<i>Stock Delivery</i>	3	4
<i>Documentation</i>	3	6
Number of <b>Controlled Drug Errors</b> reportable to NHS England 2014-2015	<b>2</b>	<b>6</b>
Number of <b>Pressure Ulcer</b> occurrences: (a reduction of 48% attributed to reduced beds, education and training and safety thermometer)	<b>16</b>	<b>32</b>
<i>Grade 1</i>	3	7
<i>Grade 2</i>	13	21
<i>Grade 3</i>	0	4
Number of patients infected with <b>MRSA</b> whilst on the Inpatient Unit	<b>0</b>	<b>1</b>
Number of patients with <b>Clostridium Difficile</b> whilst on the Inpatient Unit	<b>2</b>	<b>1</b>
Inpatients' assessment for <b>VTE</b>	<b>100%</b>	<b>100%</b>
<b>Sharps</b> Injuries	<b>2</b>	<b>1</b>

## Clinical Effectiveness

- Currently recruiting for Consultants in Specialist Palliative Care.
- Pilot site for the implementation of individualised care plans to support care in the last days of life.
- We have provided 24 Hour Telephone Advice to **230** Professionals and **220** Patients and Carers, which demonstrates consistent usage.
- Accepted the unified Do Not Attempt Cardio/Pulmonary Resuscitation (DNACPR) Policy.
- The Macmillan Cancer Information and Support Services is now open in Giles House.
- Adopted the Metastatic Spinal Cord Compression (MSCC) Pathway to ensure prompt diagnosis and treatment.
- New facilities are more spacious and offer en-suite bathrooms and a family room.
- Patient literature improved and will be made available in other languages if required.
- Bereavement support is available to all patients' families known to us.
- We continue to work in partnership with District Nurses and Hospice at Home and received **173 referrals** compared with **154** in the previous year allowing **99%** of patients to die at home.






### Extracts from Hospice at Home Relatives' Survey of the care their family members and themselves received at the end of their life:

*"The Hospice at Home nurses were great, nothing was too much for them. I can't praise them enough. They made my husband's last day so very calm and comfortable and they supported me and my family with the same care and kindness. I can't praise them enough".*

*"You guys have been wonderful. No words can express the care and compassion received. Continue the excellent work".*

## Audit and Quality

- We have undertaken **49 audits** and **22** patient and staff satisfaction **surveys** using both internal and external audit tools.
- Examples of changes to practice are evident with the development of Standard Operating Procedures for general medicines, change to tiger bags and increased signage in waste bin area. New furniture in Outpatients to be sourced, infectious status to be included on transfer of deceased documentation, pager system purchased to improve response to nurse call and patient safety issues, increased notices that CCTV is in use, laminated cards to be made available to nurses to aid grading of pressure ulcers, team reflection following an informal complaint and more staff involvement on final phase of Inpatient Unit.
- We take part in the **Specialist Palliative Care North West Audit Group**, which allows us to benchmark our practices with other local Hospices against national guidance. This year we have participated in management of steroids and DNR/CPR.
- We have not participated in **research** into this year.
- Bolton Hospice submitted Audit Data (*see links below*) to the National Minimum Data Set for Specialist Palliative Care which is under review.

 Bereavement 2014-15 - May 2015.:	 Day Therapy 2014-15 - May 2015.:	 HaH 2014-15 - May 2015.xlsx	 IPU 2014-15 - May 2015.xlsx	 OP 2014-15 - May 2015.xlsx
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## Education and Training

- Our Clinical Learning Profile for all staff demonstrates the Specialist Palliative and EoLC within Bolton Hospice's workforce.
- We are working in partnership with the University of Bolton to develop and strengthen the provision of Palliative and End of Life Care education and training to Healthcare professionals.
- Delivered Dementia training to professionals and carers.
- We achieved 100% compliance with mandatory and competency based training in 2014, which is an excellent achievement.
- All staff have attended Inclusion, Equality and Diversity training.
- Senior staff have had access to Leadership and Management training including appraisal training, managing poor performance and managing change.
- We have delivered Childhood Bereavement sessions for staff working within health, social care and education, highlighting the awareness of death, dying and bereavement in Society.  
<http://dyingmatters.org/>

### Extracts from attendees' evaluation forms:

*"Fabulous day, thank you so much for a well organised and enjoyable informative day".*

*"A real eye opener, food for thought. Staff were so knowledgeable, professional and understanding".*

*"I felt that this training session has been a great service to my personal development both within voluntary work and my personal life. It was certainly well worth attending – very educational".*

*"I found it to be both enjoyable and enlightening, a day I will remember for some time".*

<http://www.boltonhospice.org.uk/training>



## Patients' and Families' Experience 2015-2016

Bolton Hospice strives to ensure that people have a positive experience of our care (NHS Outcome Framework Domain 4 Department of Health 2015/16)

We have collated real-time feedback from patients and families this year which has allowed us to address issues as they have occurred, allowing for continuous service improvement. These are some of our results:-

**100% of Inpatients** stated they had confidence in the staff who are caring for them. However, only **93% of staff** introduced themselves - *all staff have been reminded of the importance of this.*

**99% of Day Therapy patients** feel they were involved as much as they wanted to be in decision making about their care and felt their privacy, dignity and compassion were always upheld.

**80% of Outpatients** attending for the first time were anxious but experienced reduced anxiety levels on subsequent appointments.

**98% of Hospice at Home patients' relatives** were very satisfied or satisfied that pain and symptoms were well controlled with the care their loved one received; however, for one family they would have preferred more information about what to do after the death of their relative.

**100% of bereaved relatives** felt the Hospice had adequate facilities for their bereavement support. **95%** of those bereaved felt safe to talk about their feelings.

**100% of patients and carers** surveyed felt complementary therapies helped them cope with the symptoms associated with their illness or carer's role.

**100% of Inpatients' relatives** who were surveyed following the death of a loved one felt very satisfied with the practical support in the days before death. However, two families felt more emotional support should be available for family members.

We surveyed patients' and families' experiences of the care they received at Bolton Hospice. These are some of their responses:

*"All staff are first class. I cannot praise them highly enough, thank you".*

*"The Hospice is a wonderful place, staffed by amazing, caring people. Thank you".*

*"Everyone was so professional at the same time as being very caring and compassionate".*

*"All the family want to thank each and every one at the Hospice, we couldn't have coped at this time without the very special care you gave. Thank you very much for everything".*

*"I think Bolton Hospice did everything for me and I am so pleased and thankful. Everyone was so caring and kind. Just to say thank you – we are so lucky to have Bolton Hospice".*

*"The bereavement service is excellent because sometimes you don't want to burden your friends talking about your feelings".*

**We take all comments and feedback seriously and record any concerns raised about care as a clinical incident. We received 0 formal complaints and 9 informal complaints about care during 2014-2015:**

No.	Informal Complaint Received	Action
1.	Patient felt separate vegetarian menu should be available.	Apology given and vegetarian menu developed.
2.	Family highlighted their need for more emotional support following the death of their mum.	Written apology to family - clinical team reflection – use of different room following bereavement support.
3.	Patient's wife upset with explanation of patient's deteriorating condition.	Verbal apology given and reflection undertaken by Practitioner.
4.	Wife of a patient felt she did not receive enough information about benefits.	Apology given along with supportive information.
5.	Family member was not contacted when a fall occurred overnight.	Now written in Falls Protocol and apology given.
6.	Son was angry with attitude of a member of the nursing staff.	Full investigation took place and verbal apology given for any unintentional distress caused.
7.	Family member expressed concern about not being able to speak to a member of the medical team when visiting.	Meeting arranged and clearer concise handover developed to clearer express carers' needs.
8.	Patient's family member was distressed to learn that a member of the Mental Health Team had spoken to his father without a family member present.	Verbal and written apology given to the family member. Seen by Hospice Consultant. Contact made with the Mental Health Team. Improved signing in and escorting of external professionals.
9.	Relatives raised concerns about events before time of death.	Senior staff met with bereaved relative. Clinical Team reflection took place. Improved documentation on all events leading up to death.

### ***Comments received from Relatives:***

*"I couldn't have got more help and support. They made my husband dying more acceptable for me with their compassion and understanding. I can't thank them enough".*

*"The care you gave my husband was excellent. Thank you. I was also made to feel better. The team gave me more confidence when my esteem was low, especially towards the end when pressures were increasing. The nurses were always friendly and caring".*

*"When my husband came home from hospital, I didn't realise how imminent death was and I wish I had known".*

*"I wish there had been improved communication with our GP".*

# WHERE IMPROVEMENTS IN SERVICE QUALITY ARE REQUIRED 2015-2016

Bolton Hospice is a strategic service provider for Specialist Palliative and End of Life Care within Bolton. We are accountable to our patients and those close to them, to our Commissioners, regulatory bodies, other professionals and most importantly to those who raise funds and volunteer for us. The quality of the care we deliver is central to all we do. We must continually remind ourselves that we are only “as good as the last patient and their family’s experiences”. For it is those who we touch for whatever reason that continue to support us as a vital service within their community. It is through kind donations, legacies, fundraising activities, Hospice retail shops, positive patient and family feedback that allows us to maintain our services whilst continually striving for service improvements.

## Patient Safety

- To train staff to utilise the electronic incident reporting and risk management register system.
- To continue to report the 4 harms through the NHS Safety Thermometer.
- To comply with PLACE recommendations on the dementia friendly environment.
- To continue to promote the benefits of effective patient handover and communication.
- Implement the role of Fire Warden within all areas.
- All clinical staff to undertake ‘Log Rolling’ training for patients with Metastatic Spinal Cord Compression.
- To have clinical staff trained at IOSH level and promote the importance of risk assessments.
- Involve the clinical team within the planning and design of the final phase of the Inpatient Unit.

## Clinical Effectiveness

- With the University of Bolton, develop education and training modules on all aspects of palliative and end of life care.
- Audit the usage and effectiveness of the individualised care plans for patients at the end of their life.
- Implement and provide training on the Do Not Attempt Cardiopulmonary Resuscitation.
- Work towards the NICE Guidance for End of Life for Adults Quality Standards.
- Need to invest in Information Technology and training to ensure we can provide the data required for MDS and Commissioners.
- To evaluate the effectiveness of our Lymphoedema Service.

## Patients’ and Families’ Experiences

- Actively listen to the experiences of our patients and explore improved ways of gaining real time feedback.
- Improve facilities on the Inpatient Unit for families.
- Increase our psychological and bereavement support services for families.
- Increase the support and education available to carers.
- Explore the concept of survivorship and how we contribute to this through supportive services.

## OUR PRIORITIES FOR 2015-2016

- Our reputation for quality care is essential to our existence and how we demonstrate this comes in a variety of ways. Our quest to meet statutory requirements allows us to benchmark ourselves against other providers. However, much of our reputation is built on trust, individuals' experiences, word of mouth and a willingness from the people of Bolton to support and value the work of the Hospice in providing Specialist and End of Life Care for patients and families.
- We will monitor our achievements in respect of the following priorities by internal and external reporting mechanisms which include Bolton Hospice Quality and Standards Group, Clinical Governance Group, Audit and Quality Group, Bolton CCG, Care Quality Commission, Cancer Network and ultimately through Bolton Hospice Board of Trustees.

### Patient Safety

Priorities	<i>Monitored By</i>
Successfully recruit 2 substantive Palliative Care Consultants within Bolton	Bolton FT/ Hospice Board of Trustees
We will strive to minimise all patient harms	NHS Safety Thermometer/PLACE/Clinical Governance Group/Audit & Quality Group
To continue to meet Care Quality Commission Outcomes for Quality and Safety	CQC/Quality & Standards Group
Ensure we are open and transparent and make all relevant reports available to the public <a href="http://www.boltonhospice.org.uk">www.boltonhospice.org.uk</a>	CQC/Communication Strategy Group/Quality & Standards Group
With support from the CCG, open 4 extra beds on the Inpatient Unit and ensure safe skill mix by October 2015	Bolton CCG/Clinical Governance Group
Develop a Workforce Strategy for the next 5 years	Board of Trustees/Quality & Standards Group
Recruit an additional, jointly funded, Lecturer/Practitioner to deliver End of Life Care education and training across Bolton - October 2015	University of Bolton/Bolton Hospice Education Strategy Group/Board of Trustees/Quality & Standards Group
Undertake a dementia audit of the clinical environment and implement changes	Board of Trustees/Quality and Standards Group/PLACE
Undertake refurbishment on Wing B in Spring 2016 with minimal disruption to services	Building Committee/Board of Trustees

## Clinical Effectiveness

<b>Priorities</b>	<b>Monitored By</b>
Work collaboratively with our partners to help prevent unnecessary deaths in hospital	Bolton CCG /Bolton Hospice Audit Group/ Bolton Palliative Care Strategy Group/NHS Transforming EoLC in Acute Hospitals programme
Work with Bolton Clinical Commissioning Group to implement Bolton's End of Life Care Strategy	Bolton CCG/Quality & Standards Group/Clinical Governance Group
Ensure we meet the needs of ethnic minority groups within Bolton	Clinical Governance Group/Quality & Standards Group/Bolton CCG
Ensure the Macmillan Cancer Information & Support Centre in Giles House is operational by June 2015	Quality and Standards Group/Bolton CCG
Recruit an Information Technology Project Lead to move all aspects of data collection forward within the Hospice	Informatics Group/Clinical Governance Group
Provide training for staff on the benefits of lean processes	Education & Training Strategy/Finance Committee
Work with the CCG to implement EPaCCS across Bolton	Bolton CCG/Clinical Governance Group/ Quality & Standards Group
Ensure all Registered Nurses are prepared for revalidation in April 2016	Education & Training Department
All staff to undertake Childhood Bereavement course	Education & Training Department

## Patients' and Families' Experiences

<b>Priorities</b>	<b>Monitored By</b>
Implement "Great Care" patient satisfaction survey and show results on our website <a href="http://www.boltonhospice.org.uk">www.boltonhospice.org.uk</a>	CQC/Bolton CCG/Audit & Quality Group/ Quality & Standards Group
Ensure our branding and key messages are consistent on all our literature and promotional materials	Communication Strategy Group
Continue to hold regular Carers' days within all departments	Clinical Care Quality Steering Group
Provide robust evidence of learning taking place following concerns raised	Clinical Governance Group/CQC/ Bolton CCG
Promote and record patients' Advance Care Planning and share this information with other professionals	Clinical Governance Group
To work with families to ensure their pre and post bereavement needs are acknowledged and addressed	Bereavement Support Strategy/ Clinical Governance Group
To continue to utilise and build on our volunteering workforce	Clinical Governance Group/Quality & Standards Group

## Extracts from letters and cards received 2014-2015:

*"I can't thank you enough for the care you gave my gorgeous wife during her two stays with you. It broke my heart to see her deteriorate as she did but it made it a little bit easier knowing she was under your care. I know she was a stubborn mare but I also know she wanted to be there and spent her final days feeling safe. Thank you also for all you did on our special wedding day and organising it. I know it was our happiest day of our lives and I will hold that in my heart forever. You are all superstars and I can't praise you enough".*

*"Everybody and everything has gone way beyond being helpful or being professional. The amount of care lavished on me (and all my visitors and carer), left me in a dilemma - to stay here at the Hospice or go home. This is not usually a problem but here it was. To say this, to me, is the highest compliment that I can pay you".*

*"Your kindness was much appreciated and please note that I won't be an in-patient anywhere else".*

*"Thank you all, you are simply the best".*



**We provide specialist care for the people of Bolton who have life-limiting illnesses and support their families. We're a charity and our services are free.**

**Help us to keep caring...donate, fundraise, volunteer.**

## Chairman's Statement

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The Quality Accounts for Bolton Hospice 2015/2016 once again show to all those people we serve; our patients, their families and carers that quality and effectiveness is at the heart of all we strive to do here at Bolton Hospice.



We are committed on a daily basis to ensure that we deliver, at all times, the highest possible standard of palliative care to all those people who access our services, be that as an Outpatient, an Inpatient or Hospice at Home.

This commitment also encompasses Corporate and Clinical Governance in all we do.

In Corporate Governance, the board seeks to ensure that we have systems and processes in place to maintain our growth as a viable organisation, ensuring that as a minimum we maintain our income and wherever possible develop it even further so our income generation grows to a greater level as without these funds we could not continue to deliver the level of care needed to ensure our quality service.

We anticipate being able to fully open our four additional beds on the Inpatient unit with ensuite facilities and shows once again how we add to the quality of service we provide but also places upon us the need for creative and effective management of our resources to ensure those facilities can be fully utilised for the people of Bolton when needed.

Clinical Governance is critical to the smooth running of all our services to ensure that we deliver to the highest possible standard at all times and whilst clinical targets are an important element, once again, it is the human touch which is such an integral part of our mission, particularly in ensuring that patients are treated with respect, compassion and dignity at all times.

The Quality Accounts contain extracts from letters we have received from families and patients. These are a small sample of the many letters we receive and are the best testament to what we do here at Bolton Hospice and as Chairman of the Board of Trustees, I have great pleasure in endorsing the Quality Accounts and on behalf of all the members of the Board and our dedicated and caring staff, pledge our commitment to continue to build upon our existing strengths to improve quality wherever possible.

A handwritten signature in black ink, appearing to read 'Judith Bromley'.

**Judith Bromley**  
**Chairman**