Quality Account
2018 - 2019
Welcome to our Quality Account for 2018—19

As evidenced in ‘Our Values’, we continue to strive to provide outstanding, high quality, specialist care to North East adults, children and young people with life-limiting conditions.

To ensure we provide a quality service to our patients and their families, we have a range of ‘checking and monitoring’ methods in place. We are regulated by the Care Quality Commission (CQC), Charity Commission and Companies House. In our latest CQC inspection (August and September 2015), we were compliant in all outcomes, with an overall rating of ‘good’ and rated as ‘outstanding’ for our care services.

We are monitored and required to provide evidence of quality service to a variety of external stakeholders including funders, and internally, with our patients, families, staff and volunteers. We encourage all stakeholders to feedback on their experiences. We continue to review and refresh feedback mechanisms to ensure we are getting the most value out of the feedback we receive. As part of our commitment to demonstrate that we act on and listen to feedback, we update a ‘you said, we did’ webpage bi-annually.

Our Clinical Quality Group reviews all issues relating to patient experience and providing a quality service. They take forward any actions needed and continuously update our Compliance Register accordingly. As it’s our primary aim that the best, safest care is delivered to patients and families, we continue to embed the Outcome Assessment and Complexity Collaborative tool (OACC) throughout our services with Views on Care and IPOS now becoming established within adult services.

This year we have further built on developing our services around the changing needs of the community, enabling more people to access our specialist services during the day. This includes piloting a new service for young adults who are transitioning in to adult health services, establishing a befriending service to benefit adult patients and their carers and introducing new sessions to our range of therapeutic activities within our Focus on Living Centre.

We continue to work in partnership with other local and national organisations to provide outstanding care to the people of the North East. Later in the quality account you will read about our highlights over the year including collaboration with a number of partners to progress a Research Institute and a new Admiral Nurse post working in partnership with Dementia UK.

To be awarded North East Charity of the Year in 2018 was another huge highlight and privilege. As a charity that was built by our community, we would be unable to provide our services without their support, and the support of our dedicated staff and volunteers. As always, our vision is to continue developing our services to make everyone in our region gets expert, dignified and compassionate care when they need it. Thank you for your support.

James Ellam, Chief Executive
Who we are

St Oswald’s Hospice provides specialist palliative care to babies, children, young people and adults with life limiting conditions from across the North East of England.

Established in 1986, we have gained a local, national and international reputation for providing first class outstanding quality care.

As a charity, our vision is to provide excellence in care for those with incurable conditions, ensuring everyone in our region gets expert, dignified and compassionate care when they need it. See our Vision Statement and Vision 2025 objectives updates overleaf to find out how we are doing this.

What we do

We offer a range of adult services including an inpatient unit; a Focus on Living Centre which offers day hospice, therapeutic activities and one-to-one sessions; outpatient services; Lymphoedema management and outreach.

We are experts in pain and symptom management and end of life care.

We follow a team approach – including consultants, doctors, nurses, social workers, chaplaincy, bereavement support, physiotherapists, occupational therapists and complementary therapists.

We look after people with a range of incurable conditions, not just cancer. For example, Motor Neurone Disease, Multi System Atrophy and advanced respiratory or cardiac conditions.

We also care for babies, children and young adults with progressive, life shortening and life threatening conditions. We provide specialist short breaks and offer end of life care.

We provide care and support to patients, families and carers, following a holistic approach to our care.
Our Vision statement

Together, we will make the most of time and improve quality of life for everyone in the North East living with an incurable condition, and their families.

Together, with the vital support of our staff, volunteers, donors and supporters, we will continue to develop and grow our services so that everyone in our region gets expert, dignified and compassionate care when they need it.

Our Vision 2025
strategy objectives are:

- To continuously improve the quality and efficiency of the services that we provide to our patients and their families.
- To lead the development of palliative care services within the region by working more closely with other organisations.
- To work with staff and volunteers to deliver excellent services through our commitment to individual development.
- To work flexibly, always seeking to maintain financial stability.
Our Vision 2025 - priorities

Our priorities below underpin our Vision 2025 objectives.

By 2025 we will aim to:

- Develop a family support service for carers and bereaved adults and children.
- Develop a funded, community-based network of Lymphoedema services.
- Lead the development of a North East palliative care education centre.
- Create alliances with other local providers to increase access to palliative care.
- Develop expertise in life-limiting conditions.
- Expand the children’s hospice and facilitate independent living for young adults.
PART 2: Priorities for improvement and required statements

St Oswald’s remains committed to the continuous development of the whole service and through an active approach to patient and stakeholder involvement keeps the service users at the heart of decision making and service improvement.

PRIORITIES FOR IMPROVEMENT—key Priorities for 2018-2019

There were a significant number of objectives for each directorate in 2018-2019, however four objectives were highlighted:

1) To complete our business plan with Newcastle University, Northumbria University, Northumbria Healthcare Trust and Newcastle Upon Tyne Hospitals Trust to create the Great North - Palliative Care Research Institute. The “Phase 1” business plan has been agreed:
   - Four academic clinician posts will be spread across the organisations.
   - The project now includes Marie Curie who have joined the group.
   - National Institute for Health Research (NIHR) are working with us in partnership and have agreed that St Oswald’s will become the Academic Hospice of the region. St Oswald’s aim to be a host for palliative research later in 2019.
   - We are aiming to host a research symposium promoting the partnership later this year.

2) To formalise the legal model for Hospices North East and move towards our soft launch with agreed strategic objectives.
   The other eight independent hospices in the North East have asked St Oswald’s to continue as the lead on this piece of work instead of forming a brand new charity.

3) To begin our focussed approach as to what the future holds with regards to dementia, learning disabilities and increased capacity for our adult’s provision.
   Our Admiral Nurse post, which was introduced in summer 2018, is 100% funded until summer 2022. We are linking in to existing services to understand what palliative services need to look like for these patients with a dementia diagnosis.

4) To explore the Palliative Care Provider Transformation Programme further.
   The North East has a number of excellent and outstanding palliative care services, and additionally successfully trains and delivers high quality education. There is a sense that more could be achieved by organisations pooling their collective expertise to develop and deliver a more coherent and comprehensive approach. There is a strong desire among palliative care provider organisations to work together. In the first instance this will involve partners forming the ‘Northern Palliative Care Partnership’. Partners include: Gateshead Health NHS Foundation Trust; Marie Curie; Newcastle Hospitals NHS Foundation Trust; Northumbria Healthcare NHS Foundation Trust; St Oswald’s Hospice (incorporating also the Hospices North East Collaborative).

The aim of the Northern Palliative Care Partnership is to deliver the best possible palliative and end of life care for the people of the north east, driving innovation and excellence through:
   - Engagement with the communities and people we serve.
   - High quality research and evaluation.
   - Developing and sharing new service models and best practice.
   - Developing individuals and teams through education and training.
   - Working collaboratively with partners to model integrated care.
PART 2: Priorities for improvement and required statements

REVIEWS OF SERVICES:

During 2018-2019 St Oswald’s Hospice provided and/or sub-contracted two NHS services.

- Outpatient Lymphoedema Service
- Outreach Lymphoedema Service

St Oswald’s Hospice has reviewed all the data available to them on the quality of care in two of these NHS services.

In addition the Hospice has provided the following services through grants & charitable funding:

- Children’s Service
- Young Adults Transition Service
- Focus on Living Centre including day hospice and therapeutic activities
- Outpatient Clinic
- Complementary Therapy
- Physiotherapy
- Occupational Therapy
- Social Work
- Bereavement Support Team
- Chaplaincy

The income generated by the services provided to the NHS in 2018-2019 represents approximately 34% of the cost of running the Hospice. The remaining 66% is raised and provided by the charity each year.
PART 2: Priorities for improvement and required statements

Participation in clinical audits:
During 2018-2019, St Oswald’s took part in a national blood transfusion audit, but no national confidential enquiries covered NHS services that St Oswald’s provided.
St Oswald’s regularly audits various elements of clinical and non-clinical practice both via internal procedures and with the support of internal and external audit partners. The Clinical Audit Group, focus on developing audit within St Oswald’s and continuously improving the quality of care provision, the outcome of all audits can be found on the intranet page for the group. During 2018-2019 St Oswald’s undertook the following audits

- Senior Review Audit
- MCA Audit
- Corticosteroids > VAD audit
- Paracetamol and Ibuprofen prescribing for Children and Young Adults
- Psychology assessments and referrals
- Care After Death Audit
- Infection Control—Handwashing Audit
- Infection control - environment audit
- Children’s Medication Email Audit
- Dementia Care Environment audit
- Care Rounding Audit (Adult Inpatient Unit)
- Clinical Observations
- Medical input in Focus on Living
- Lymphoedema Pathway audit

During the year we continued to meet with a neighbouring hospice and work to carry out joint audits where appropriate.

Participation in Clinical Research:
The number of patients receiving NHS services provided or sub-contracted by St Oswald’s Hospice in 2018-2019 that were recruited during that period to participate in research approved by a research ethics committee was zero.

Use of the CQUIN payment framework:
St Oswald’s Hospice income in 2018-2019 was conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework.

Targets were as follows:
- Continued Implementation of OACC outcome measures within our Inpatient and Focus on Living Services.
- Development of learning materials for Lymphoedema Patients and the development of an accelerated key-worker treatment pathway.
Statements from the Care Quality Commission

St Oswald’s Hospice is required to register with the Care Quality Commission (CQC) and is currently registered to carry out regulated activities:

- Treatment of disease, disorder or injury.
- Diagnostic and screening procedures.
- Transport services, triage, medical advice provided remotely.

St Oswald’s Hospice has the following conditions on registration:

1. The registered provider must ensure that the regulated activities are managed by an individual who is registered as a manager in respect of the activity, as carried on at or from the location St Oswald’s Hospice.

2. This regulated activity may only be carried on at or from the following locations: St Oswald’s Hospice, Regent Avenue, Gosforth, Newcastle Upon Tyne, Tyne & Wear, NE3 1EE.

St. Oswald’s has the following additional conditions:

1. The registered provider may accommodate no more than 19 service users in the adult unit at St Oswald’s Hospice.
2. The registered provider may accommodate no more than 8 service users, aged from birth to 25, in the children and young adults unit at St Oswald’s Hospice.

The CQC has not taken enforcement action against St Oswald’s Hospice during 2018-2019.

St Oswald’s Hospice has not participated in any special reviews or investigations by the CQC during the reporting period.

A series of inspection visits from CQC took place on 11th August, 4th and 7th of September 2015 and a final report was published in January 2016 with an overall rating of Good with Outstanding for Care.

A full copy of the report can be seen on the CQC website. [Click here to access the report.](#)

No formal recommendations for improvements were made within the Report.
PART 2: Priorities for improvement and required statements

Data Quality: St Oswald’s Hospice continually works to improve the quality of information provided. St Oswald’s Hospice did not submit records during 2018-2019 to the Secondary Uses Service for the inclusion in the Hospital Episode Statistics which are included in the latest published data, however St Oswald’s did contribute to a Hospice UK benchmarking project.

Data Security and Protection

St Oswald’s Hospice successfully completed the new Data Security and Protection Toolkit. We completed the Cyber Essentials self assessment and are working towards Cyber Essentials Plus.

The Data Quality and Records Management Group will continue to implement improvements in compliance with GDPR and Data Security and Protection Toolkit requirements.

The Group meets monthly and is responsible for ensuring that policies and procedures in line with national guidance are implemented at St Oswald’s.

Clinical coding error rate:

St Oswald’s Hospice was not subject to the payment by results clinical coding audit during 2018-2019 by the Audit Commission.

Duty of Candour Implementation:

St Oswald’s has a Duty of Candour policy in place and training in the application of the policy now forms part of the rolling education programme. In 2018-2019 three incidents were relevant to the Duty of Candour legislation and related to patient falls.
PART 2: Priorities for improvement and required statements

As in 2018-19, we will continue to work towards our Vision 2025 strategic objectives and related priorities. During 2019-20, however, our highlighted priorities are:

PRIORITIES FOR IMPROVEMENT—key Priorities for 2019-2020

1) To achieve “Outstanding” for care services in our next CQC review, and Outstanding overall. As part of that work, we will develop and implement a “Board Assurance Framework” to cover all our clinical services provision.

2) To implement the Year 1 objectives of creating the North East Palliative Care Research Institute. This will include establishing the posts and infrastructure to begin a co-ordinated research programme.

3) To implement the pilot of our Young Adult Outreach Service. This is part of a national grant programme to develop better transition services across for young adults in the UK. The results will be formally evaluated, and it is hoped will influence national policy. We are liaising with another sister project, based at Sunderland Royal Hospital, to co-ordinate our work in the North East.

4) To establish a comprehensive lymphoedema service in partnership with South Tyneside CCG. This will be planned and implemented in collaboration with the NHS Trust Community Nursing Services. It will also integrated into the CCG’s Primary Care “Health Pathways” system, to provide decision support for potential referrers.
PART 3: Review of performance and user involvement

During 2018 - 2019, 2,318 adult patients, 49 children and 16 young adults benefited from St Oswald’s services including:

- **379** Inpatient referrals, **177** adult inpatient admissions & **178** completed stays.
- **145** new referrals into Day Hospice with 144 patients attending over the course of the year for a total of **1,283** days.
- **928** Lymphoedema referrals.
- **8,340** Lymphoedema outpatient attendances.
- **494** Lymphoedema attendances at our Shiremoor clinic.
- **371** Lymphoedema attendances at our Blaydon clinic.
- **185** Lymphoedema attendances at our Morpeth clinic.
- **905** Lymphoedema attendances at our South Tyneside clinic.
- **935** Complementary Therapy sessions provided to Outpatients, Day Hospice patients, inpatients and carers.
- Children’s & Young Adults recorded an occupancy of **88%** over the year resulting in **1,931** bed days.

We serve adult patients from Northumberland, North Tyneside, Gateshead and Newcastle. In addition, children and young adults from Sunderland, South Tyneside and North Durham can also access our services.

Patients are referred to us by their GP, consultant or specialist palliative care team. Children and young adults are referred to us by health and social care pathway co-ordinators.
Referrals to the hospice... an overview
Inpatient Service

Our 15-bedded inpatient unit caters for patients needing pain and symptom control, emergency respite, and end of life care.

Our multi-disciplinary team work together and strive to address not just a patient’s physical needs, but their emotional and spiritual needs too.

Our aim is to ensure patients with palliative care needs can improve their quality of life; facilitate a safe and timely patient discharge or transfer to a continuing care service, as well as provide a supportive environment at the end of life. We also understand the impact an illness has on the whole family and offer wide ranging support for carers.

This year and in to 2019/20 we are making improvements to our building and gardens on the unit. Recognising the importance of providing spaces families can enjoy together, we have been given planning permissions to build an extension for a ‘family room’. In addition, our patient garden is undergoing a transformation for patients and families to enjoy. These developments have been possible due to the generosity of local people.

Last year...

- There were 177 adult inpatient admissions last year, 70 patient discharges and 108 deaths.

- 4308 bed-days were occupied during the year, with an average occupancy of 84%.

- Patients stayed with us for an average stay of 26 days.

- All families and carers have access to our Family Support Unit including bereavement support.
# Inpatient Service...Discharges Overview

<table>
<thead>
<tr>
<th></th>
<th>2017-2018</th>
<th></th>
<th>2018-2019</th>
<th></th>
<th>Change</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Average</td>
<td>Total</td>
<td>Average</td>
<td>Total</td>
<td></td>
</tr>
<tr>
<td>Admissions</td>
<td>18</td>
<td>211</td>
<td>15</td>
<td>177</td>
<td>-19.2%</td>
</tr>
<tr>
<td>Percentage Occupancy</td>
<td>86%</td>
<td></td>
<td>84%</td>
<td></td>
<td>-2%</td>
</tr>
<tr>
<td>Discharges</td>
<td>6</td>
<td>74</td>
<td>6</td>
<td>70</td>
<td>-5.7%</td>
</tr>
<tr>
<td>Deaths</td>
<td>12</td>
<td>138</td>
<td>9</td>
<td>108</td>
<td>-27.8%</td>
</tr>
<tr>
<td>Finished Admissions</td>
<td>18</td>
<td>212</td>
<td>15</td>
<td>178</td>
<td>-19.1%</td>
</tr>
<tr>
<td>% Deaths</td>
<td>65%</td>
<td></td>
<td>61%</td>
<td></td>
<td>-4%</td>
</tr>
<tr>
<td>Average Age</td>
<td>68 Years</td>
<td></td>
<td>69 Years</td>
<td></td>
<td>+1 Year</td>
</tr>
<tr>
<td>average LOS</td>
<td>23 Days</td>
<td></td>
<td>26 Days</td>
<td></td>
<td>+3 Days</td>
</tr>
<tr>
<td>minimum LOS</td>
<td>2 Days</td>
<td></td>
<td>1 Day</td>
<td></td>
<td>-1 Day</td>
</tr>
<tr>
<td>maximum LOS</td>
<td>71 Days</td>
<td></td>
<td>184 Days</td>
<td></td>
<td>+113 Days</td>
</tr>
<tr>
<td>Median LOS</td>
<td>14.5 Days</td>
<td></td>
<td>16 Days</td>
<td></td>
<td>+1.5 Days</td>
</tr>
<tr>
<td>Average wait</td>
<td>5 Days</td>
<td></td>
<td>6 Days</td>
<td></td>
<td>+1 Day</td>
</tr>
<tr>
<td>Total referrals</td>
<td>29</td>
<td>345</td>
<td>32</td>
<td>379</td>
<td>9.0%</td>
</tr>
</tbody>
</table>

## Diagnosis Group

- Respiratory Diseases: 3.4%
- Other Non-Cancer Diagnosis: 5.6%
- Heart / Circulatory Disease: 2.2%
- Degenerative Nervous System Diseases: 6.2%
- Cancer - Urinary Tract: 2.2%
- Cancer - Respiratory & Intrathoracic: 2.2%
- Cancer - Other Specified Sites: 5.6%
- Cancer - Male Genital Organs: 7.9%
- Cancer - Lymphoid / Haematopoietic: 4.5%
- Cancer - Up, Oral Cavity, & Pharynx: 1.1%
- Cancer - Ill Defined, Unspecified: 1.7%
- Cancer - Female Genital Organs: 8.4%
- Cancer - Eye, Brain & Other CNS: 2.8%
- Cancer - Digestive Organs: 21.3%
- Cancer - Breast: 9.0%

## Age Group

- >84: 11.8%
- 75 - 84: 27.5%
- 65 - 74: 29.8%
- 25 - 64: 30.9%
- 16 - 18: 0%
- Under 16 Years: 0%

## Location Before Admission

- Hospital: 44.4%
- Home: 53.9%
- Hospice: 1.7%
Our Focus on Living Centre offers traditional Day Hospice three days a week (Wednesday-Friday) and therapeutic activities five days a week (Monday-Friday).

Last year we decided to rename the centre, as we feel the name reflects the changing needs of our day patients. We are now offering more therapeutic activities, group sessions, one to one appointments and short courses for people living with progressive life limiting illnesses and their families and carers. This year we’ve further built on providing more tailored groups and courses for the people we care for, including gender and condition specific groups. Find out more about these groups later in the report.

Within Focus on Living Centre, members of our care team informally monitor a patient’s condition throughout their time with us and report any changes or difficulties back to their GP, hospital, or community team. During each visit, patients can benefit from the services of our nursing team, Physio and Occupational therapists, Complementary Therapists, Social Workers, our Chaplaincy Team and Therapeutic Activities Facilitator. Our medical team is also available when necessary, although a patient’s GP retains overall responsibility for their care.

“I first came to St Oswald’s a few months ago during the day on a Friday and it brought me to life. I can’t bring in to words how wonderful the staff are. During my days there I have taken part in activities in their craft room such as painting. I didn’t know places like St Oswald’s existed, I love my days there!”
I come to the Hospice on a Thursday and I forget about my illness. Some people here have the worst illnesses but have a smile on their face. The patients, staff and volunteers here uplift me.
Day Hospice offers patients respite, symptom management and support during the day. Day Hospice facilities are available from Wednesday to Friday, between 10am and 3pm.

A visit to Day Hospice can be as busy or as relaxed as a patient wishes, with each session tailored around their individual needs. Patients can choose to take part in activities throughout the day which are designed to enhance a patient’s feelings of wellbeing and self-esteem (further details about the activities on the ‘therapeutic activities’ page).

All meals and refreshments are provided free of charge and transport can be provided.

**Last year…**

- We received **145** new referrals

- There was an average of **143** Day Hospice places booked each month, which is **73%** of our capacity.

- The Attendance rate was 75%.

- Averaging **8** attendances per day.

“I was getting myself very isolated and wouldn’t leave the house after being diagnosed with Parkinson’s Disease. The hospice gives me a purpose, something to look forward to and the staff here are absolutely lovely. It’s a focus on living, not a focus on dying.”
Our therapeutic activities and short courses provide an opportunity for people living with a life-limiting condition to come together, learn new skills and benefit from peer/social support. Carers can also attend the sessions.

The sessions aim to improve quality of life, and people who have attended sessions tell us the courses have allowed them to share memories, be creative and help to improve wellbeing. The range of courses available continues to develop and diversify based on the feedback from service users. Sessions include:

- Positive Steps*
- Relaxation
- Mindfulness
- Arts and crafts
- Fatigue management
- Men’s group
- Women’s relaxation and tripudio
- Creative writing

*‘Positive Steps’ is a six week programme introducing the range of St Oswald’s services and to dispel myths around hospice care.

Last year...

- 237 sessions throughout the year.
- 1000 individual attendances.
- 22 different activities.
- 59 patients accessed the service.
## Therapeutic activities attendances... an overview

<table>
<thead>
<tr>
<th>Activity</th>
<th>Individual Patients</th>
<th>Sessions</th>
<th>Attendances</th>
</tr>
</thead>
<tbody>
<tr>
<td>Card Making</td>
<td>6</td>
<td>6</td>
<td>24</td>
</tr>
<tr>
<td>Ceramics</td>
<td>11</td>
<td>27</td>
<td>118</td>
</tr>
<tr>
<td>Christmas Crafts</td>
<td>4</td>
<td>6</td>
<td>21</td>
</tr>
<tr>
<td>Creative Writing</td>
<td>7</td>
<td>8</td>
<td>30</td>
</tr>
<tr>
<td>Encaustic Art Workshop</td>
<td>3</td>
<td>5</td>
<td>12</td>
</tr>
<tr>
<td>Fatigue Management</td>
<td>9</td>
<td>12</td>
<td>36</td>
</tr>
<tr>
<td>Felting</td>
<td>8</td>
<td>9</td>
<td>42</td>
</tr>
<tr>
<td>Felting for Beginners</td>
<td>5</td>
<td>4</td>
<td>17</td>
</tr>
<tr>
<td>Jewellery Making</td>
<td>7</td>
<td>6</td>
<td>31</td>
</tr>
<tr>
<td>Managing Breathlessness</td>
<td>5</td>
<td>9</td>
<td>20</td>
</tr>
<tr>
<td>Mens Space</td>
<td>17</td>
<td>48</td>
<td>283</td>
</tr>
<tr>
<td>Mindfulness</td>
<td>4</td>
<td>4</td>
<td>9</td>
</tr>
<tr>
<td>Music therapy</td>
<td>1</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Oils and Acrylics</td>
<td>10</td>
<td>12</td>
<td>53</td>
</tr>
<tr>
<td>Open Art</td>
<td>10</td>
<td>11</td>
<td>29</td>
</tr>
<tr>
<td>Printing and Portfolio</td>
<td>3</td>
<td>6</td>
<td>13</td>
</tr>
<tr>
<td>Proggy</td>
<td>5</td>
<td>3</td>
<td>13</td>
</tr>
<tr>
<td>Silk Painting</td>
<td>8</td>
<td>6</td>
<td>41</td>
</tr>
<tr>
<td>Textile Art Workshop</td>
<td>10</td>
<td>17</td>
<td>65</td>
</tr>
<tr>
<td>Trapunto</td>
<td>6</td>
<td>6</td>
<td>27</td>
</tr>
<tr>
<td>Watercolour</td>
<td>14</td>
<td>13</td>
<td>75</td>
</tr>
<tr>
<td>YOGA</td>
<td>4</td>
<td>18</td>
<td>40</td>
</tr>
<tr>
<td><strong>Totals</strong></td>
<td><strong>59</strong></td>
<td><strong>237</strong></td>
<td><strong>1000</strong></td>
</tr>
</tbody>
</table>
The staff at the Hospice are amazing, they go out of their way to make you feel really lovely about yourself and very comfortable. You’re lit up by staff every time you come in.

Outpatient Service

Our Outpatient Services for patients and their carers include:

**Complementary Therapy Service**
We offer a range of complementary therapies to patients and carers, on an outpatient basis, including: Massage, Aromatherapy, Indian Head Massage, Reflexology and Reiki.

Treatments are offered alongside conventional medical care and aim to help patients feel better physically, emotionally and psychologically.

**Hypnotherapy**
Clinical Hypnosis can help patients feel more in control, reduce their anxiety, raise self esteem and build confidence. Sessions are provided by Lisa Cairns, who is qualified in Clinical Hypnosis and has undertaken pioneering work with Northumbria University to develop the use of hypnosis in palliative care settings.

**Acupuncture**
Our team of physiotherapists offer acupuncture to St Oswald’s patients. Acupuncture can be used to relieve pain, aid relaxation, reduce muscle tension and help manage tension and sweats.

**Cognitive Behavioural Therapy**
We offer Cognitive Behavioural Therapy (CBT) to patients who have ongoing feelings of anxiety, low mood, anger or panic as a result of their life limiting condition.

CBT helps our patients to change the way they think about themselves, their situation and the future. It is designed to help patients learn effective ways of dealing with difficulties relating to their condition, and can help when adjusting to and coping with pain and symptoms. Sessions are provided to patients by one of our Consultants.
Outpatient activity last year...an overview

<table>
<thead>
<tr>
<th>CCG</th>
<th>Medical OP Attendances</th>
<th>Complementary Therapy OP Attendances</th>
<th>Complementary Therapy As Part Of Other Services</th>
<th>Complementary Therapy For Carers</th>
<th>CBT Attendances</th>
<th>Acupuncture</th>
<th>Hypnotherapy</th>
<th>Positive Steps</th>
<th>Focus On Living</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS North Tyneside CCG</td>
<td>1</td>
<td>31</td>
<td>120</td>
<td>17</td>
<td>14</td>
<td>37</td>
<td>0</td>
<td>1</td>
<td>142</td>
<td>363</td>
</tr>
<tr>
<td>NHS Northumberland CCG</td>
<td>1</td>
<td>29</td>
<td>274</td>
<td>38</td>
<td>18</td>
<td>13</td>
<td>2</td>
<td>0</td>
<td>325</td>
<td>700</td>
</tr>
<tr>
<td>NHS South Tyneside CCG</td>
<td>0</td>
<td>0</td>
<td>5</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>6</td>
</tr>
<tr>
<td>NHS Newcastle Gateshead CCG</td>
<td>2</td>
<td>96</td>
<td>251</td>
<td>58</td>
<td>12</td>
<td>59</td>
<td>0</td>
<td>1</td>
<td>533</td>
<td>1012</td>
</tr>
<tr>
<td>NHS Sunderland CCG</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Other CCG</td>
<td>0</td>
<td>1</td>
<td>14</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>17</td>
</tr>
<tr>
<td>Total</td>
<td>4</td>
<td>157</td>
<td>664</td>
<td>114</td>
<td>44</td>
<td>109</td>
<td>4</td>
<td>2</td>
<td>2</td>
<td>1000</td>
</tr>
</tbody>
</table>

![Outpatient Appointments (Service) Pie Chart](image)
Recognised as a national centre of excellence in Lymphoedema management, St Oswald’s is the largest specialist Lymphoedema service provider in the North East.

As we’ve provided Lymphoedema care consistently for 30 years, we are specialists in our field and we regularly treat the most complex, severe cases.

Our senior Lymphoedema practitioners also play a leading role in clinical education in the North East. We work in partnership with Northumbria University to develop accredited training modules in assessment and management of Lymphoedema.

We treat patients with cancer-related Lymphoedema, those with oedema as a symptom of their progressive disease and patients with non-cancer related Lymphoedema.

A large number of patients have complicated Lymphoedema, requiring intensive treatment, symptomatic of the specialist service we provide.

We have Keyworkers trained in-house to care for more routine cases, through to specialist nurses for the most complex care. We also have specialist medical input available.

All patients are cared for on a pathway approach, covering assessment, treatment and planned review and discharge. Our pathways mirror the International Lymphoedema Framework Best Practice Consensus Document (2006).

Over recent years we have developed a hub and spoke model of care, where patients with mild and uncomplicated Lymphoedema from Gateshead and North Tyneside are treated in their locality, whilst patients requiring specialist care receive treatment on site at the Hospice. Following on from a one year pilot in South Tyneside in 17-18, a contract has been agreed for two years with South Tyneside CCG, to provide a specialist Lymphoedema service. There is an outreach clinic based in South Shields.
Working in conjunction with Marie Curie Cancer Care, we run Hospadvice, an out of hours telephone advice service available for health and social care professionals caring for adult patients from Northumberland, North of Tyne and Gateshead with palliative care needs.

Calls are answered by one of the doctors or qualified nurses on our inpatient unit. Hospadvice offers access to advice on medical, clinical and signposting options.

Last year, 209 phone calls were received by St Oswald’s from health care professionals to our adult services palliative care advice line, with a further 74 follow on calls completed.

We also offer a paediatric palliative advice line, for health care professionals in the region caring for children and young people with advanced, deteriorating or progressing conditions or are in need end of life care.

This is supported by some of our senior Palliative Care medical team in collaboration with a Consultant Paediatrician at the Great North Children’s Hospital.
Children and Young Adults Service

We provide specialist short breaks and palliative care to babies, children and young adults, aged from 0 to 25, with progressive, life-shortening conditions. We also provide end-of-life care. Specialist, medically-supported care is provided, 24 hours a day, seven days a week.

Our team of skilled staff provide residential short breaks to children and young adults from across the region.

Up to six children and young adults can stay at any one time in our relaxed, home-from-home environment.

Children and young adults from Northumberland, Newcastle, Gateshead, North Tyneside, South Tyneside, Sunderland or Durham City, Chester-le-Street and Derwentside can benefit from short breaks at St Oswald’s.

There is an assessment and referral pathway that has been agreed with health and, social care colleagues and ourselves within each area.

We work closely with colleagues at the Great North Children’s Hospital.

Caring for children

Children staying with us can enjoy a range of activities such as: sensory play, music therapy, arts and crafts, baking, bowling and the cinema. Teenagers benefit from their own living area – complete with games consoles, wide screen TV and PC’s.

“St Oswald’s is our lifeline and the staff are the only people we trust to look after our son. He has such complex needs it’s not possible for us to just ask a grandparent or friend to step in, so over the last year and a half, it’s only when he is at St Oswald’s that our family gets a break.”
Young adults
As well as offering residential short breaks to young adults, our Young Adults Social Group remains popular, which offers a range of empowering activities and a chance to socialise. Young adults staying at St Oswald’s tell us how much they value independence and the chance to spend time with peers.

This year we received funding from Together for Short Lives to pilot a new outpatient service for young adults, in partnership with NHS NewcastleGateshead CCG. The new annual outpatient clinic is part of a national scheme to improve transitions for young people moving from children’s to adult health services.

Family support in our Children and Young Adults Service
At St Oswald’s we are committed to providing services for the whole family. Our care team offer confidential 1-1 support to parents and we strive to bring families together.

To support families to benefit from peer support we facilitate a ‘parents group’ who meet regularly at the Hospice. The sessions give parents of a young person we care for an opportunity to talk in a safe environment with people who share similar experiences.

For families wishing to stay with us, we offer four en-suite bedrooms, a bathroom and a lounge area with kitchenette. Parents can also benefit from our free complementary therapy service.

As we know that brothers and sisters of children with chronic conditions can feel forgotten, we offer dedicated support for siblings too. Each year we run two ‘Sibz Days’ for brothers and sisters of children who stay with us for short breaks. Sibz Days involve sharing feelings and experiences and expressing them in different ways – including art, crafts and music. Children get the chance to have fun, make new friends and even play with medical equipment that their brother or sister may use, in a safe environment.

If a child dies at St Oswald’s, their own home or in hospital, we are also here to provide ongoing, bereavement support to families.

“What makes the hospice is their staff – every time I come in they are hyper, full of beans, playful and they give everything a try! Coming to St Oswald’s is life-changing and my Mam would say the same.”
Last year...

- **59** children and their families benefited from our Children’s Service.
- A further **16** young adults were cared for at St Oswald’s.
- **12%** of children staying were aged between 0-3 years old, **16%** 4-6 Years Old, **41%** 7-9 Years Old, **16%** 10-12 Years Old, **12%** 13-15 Years Old and **2%** 16-18 years Old.
- **639** admissions, **1,931** bed days were occupied with a **88%** occupancy rate.
- The average length of stay is **3** nights per visit for Children & **4** nights for Young Adults.

“As a couple we never thought we would have to deal with what we have faced over the last year but St Oswald's have been there every step of the way.”
I found it very difficult to come to terms with what was happening to my husband and I am certain that I would have struggled even more without the support I had, and continue to have from St Oswald’s.

Carer and Bereavement Support

- Our services to carers include complementary therapy, carers drop-in sessions, group sessions and one-to-one support.
- We also offer a range of support services to bereaved individuals and families on a one-to-one basis and in groups.
- Our one-to-one service is available onsite, over the telephone or can be held in the comfort of a patient or carer’s home.
- Group sessions are usually held at St Oswald’s, where you have the chance to share feelings and experiences in a warm and welcoming setting – with others who understand.
- We also hold ‘Ozzy Days’ for bereaved children aged from 5 to 15 whose parent, sibling or other loved one has received care from St Oswald’s.
- The Bereavement Team also provide training to health professionals and teachers to enable them to support individuals more effectively where this is more appropriate.
- BBC Children in Need has funded a Children’s Lead in our Bereavement and Family Support Team. This is a three year post to support children facing the serious illness and death of a close family member. The post will also extend the reach of the Family Support Service in order to benefit children who have no prior association with the Hospice.

Activity 2018-2019

- 31 Referrals.
- 96 individual client registered with service throughout year.
- 271 Face to face contacts
- 15 Telephone contacts.

“I found it very difficult to come to terms with what was happening to my husband and I am certain that I would have struggled even more without the support I had, and continue to have from St Oswald’s”
In 2017 we made the decision to stop sending out clinical postal surveys in favour of a simple feedback form including the NHS friends and family test, which is available around the Hospice and can be completed online. This decision was made to receive more relevant feedback from service users.

In addition, we will continue to use focus groups more routinely to gather more qualitative information in a more specific way when considering service developments or redesign.

Feedback forms give service users the option to: comment on any good experience/what could be improved; have their say on whether they would recommend us to family and friends (in line with the NHS friends and family test); and rate the care provided at St Oswald’s.

There are ‘feedback boxes’ in the Hospice so that people can submit their feedback using these forms anonymously.
### Patient Feedback...an overview

#### You said, we did

Here’s some suggested improvements and feedback that we have received this year.

<table>
<thead>
<tr>
<th>Feedback</th>
<th>Action/Comment</th>
</tr>
</thead>
<tbody>
<tr>
<td>You said... It would be nice to have a distraction in the Outpatient Suite waiting area while waiting for an appointment.</td>
<td>We did... We have installed a TV with a rolling presentation in the waiting area, which includes details about our services and other relevant information for patients.</td>
</tr>
<tr>
<td>You said... As a GP, the lymphoedema service referral process was excellent.</td>
<td>We did... We passed on your feedback to our Lymphoedema Team. Thank you!</td>
</tr>
<tr>
<td>You said... The painting workshop that was run by members of the Re-styled online shop team was really enjoyable.</td>
<td>We did... We have arranged more courses for more people to enjoy! Visit our website to find out more details of our upcoming courses.</td>
</tr>
<tr>
<td>You said... It would be useful to have postcodes on appointment letters, especially when appointments are at outreach clinics.</td>
<td>We did... We now include full addresses including postcodes on all appointment letters.</td>
</tr>
<tr>
<td>You said... All Hospice staff are professional, kind and caring. I’d like to see more beds open at the Hospice so that more patients and families can benefit from adult inpatient care at St Oswald’s</td>
<td>We did... As part of our Vision 2025 10 year strategy, we have plans to open all our 19 adult inpatient beds (currently 15 are open) so that more families can benefit from our care.</td>
</tr>
</tbody>
</table>
Patient Feedback...an overview

The patients gave very positive comments, for example:

“The Hospice is an amazing place with wonderful employees and volunteers. They look after the whole family and make difficult times manageable. I will be forever grateful for the kindness and dignity provided when my mum passed there 10 years ago.”

“I just want to say how very pleased I am that I saw [name] in the lymphoedema clinic, to thank her for her care and for the information, exercise guidance, compression sleeves and gel. Today, having started putting it all in to practice I feel confident about the future.”

“For the brief time my daughter needed to use the service they were all fantastic from start to finish. All I can say to you all is keep up your great work that you do to help the families who need that extra help and encouragement.”

Feedback Bank

Since the launch of the feedback bank there have been 507 posts onto the Feedback Bank, which includes any feedback received through social media, suggestions boxes and comments books. A summary of the type of feedback is shown below, and as can be seen the vast majority is a thank you or positive comments (61%).

Where negative comments are made, the information is forwarded immediately to the department manager and a response requested, which is updated on the feedback survey should the individual choose to go back and look.

<table>
<thead>
<tr>
<th>Type Of feedback</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
<th>2016</th>
<th>2017</th>
<th>2018</th>
<th>2019</th>
<th>Grand total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constructive criticism</td>
<td>9</td>
<td>11</td>
<td>7</td>
<td>5</td>
<td>8</td>
<td>1</td>
<td>40</td>
<td></td>
</tr>
<tr>
<td>Negative feedback</td>
<td>3</td>
<td>25</td>
<td>20</td>
<td>9</td>
<td>4</td>
<td>6</td>
<td>8</td>
<td>67</td>
</tr>
<tr>
<td>Neutral</td>
<td>2</td>
<td>3</td>
<td>3</td>
<td>3</td>
<td>8</td>
<td>4</td>
<td>19</td>
<td></td>
</tr>
<tr>
<td>Positive feedback</td>
<td>18</td>
<td>54</td>
<td>37</td>
<td>11</td>
<td>17</td>
<td>54</td>
<td>32</td>
<td>191</td>
</tr>
<tr>
<td>Suggestion</td>
<td>17</td>
<td>15</td>
<td>6</td>
<td>4</td>
<td>17</td>
<td>12</td>
<td>59</td>
<td></td>
</tr>
<tr>
<td>Thank you</td>
<td>5</td>
<td>15</td>
<td>13</td>
<td>6</td>
<td>12</td>
<td>13</td>
<td>10</td>
<td>64</td>
</tr>
<tr>
<td>Grand Total</td>
<td>28</td>
<td>120</td>
<td>99</td>
<td>42</td>
<td>45</td>
<td>106</td>
<td>67</td>
<td>507</td>
</tr>
</tbody>
</table>
Staff and Volunteer Feedback

We believe that our workforce are able to be at their best when they know their duties, obligations and rights, and have opportunities to make their views known to St Oswald’s on issues that affect them, including quality of care, patient safety or bullying and harassment. We’re committed to being open and honest and encourage staff to speak up and to raise any concern they have at an early stage and in the right way.

The views of staff and volunteers are actively sought via line managers, the feedback bank, special briefings, ad-hoc focus groups when needed, departmental visits from the Hospice Management Team and Trustees and surveys. Staff surveys include the Workforce Equality Survey (WES) and St Oswald’s rolling programme of staff surveys, which are circulated bi-annually on a rolling programme of four themes with a different focus each time. In 2018 the focus was ‘My Manager’ and ‘Leadership’.

St Oswald’s operates a formal policy for staff and volunteers to raise issues of concern at work (whistleblowing). A Whistleblowing Policy exists to help staff raise these concerns as soon as possible and in an appropriate way. Whilst St Oswald’s cannot guarantee that it will respond to all matters as a member of staff may wish, St Oswald’s will strive to handle the matter fairly and properly. Any matter raised under this procedure will be investigated thoroughly, promptly and confidentially, and the outcome of the investigation reported back to the member of staff who raised the issue. No member of staff will be victimised for raising a matter under this procedure.

In addition, St Oswald’s has a Respect at Work Policy which sets out how staff and volunteers can address concerns or complaints of bullying and/or harassment. Staff and volunteers have an option to discuss their concerns with St Oswald’s Bullying and Harassment Officer in the first instance who will provide guidance on the policy.

A grievance procedure also exists to set out how staff can raise issues in relation to their concerns, problems or complaints with regard terms and conditions, how staff are managed, the working environment, Health & Safety Issues, work relations, new working practices, the working environment, organisational change and equal opportunities. It is not an exhaustive list and a member of staff may raise a grievance about any issue.

To ensure staff and volunteers are listened to and fed back to appropriately organisation-wide, a standard item has been added to the agenda of our ‘Risk Management Group’, which meets bi-monthly. Any issues that need to be discussed with Line Managers will be raised at Management Forum or within Management Briefing. If possible feedback will be given direct to the person who submitted feedback.

If staff would like to discuss any personal or work concerns or worries in confidence, they can access our confidential listening service.
We educate

We are a leading provider of specialist palliative care education in the North East. We have been providing first class quality care for almost thirty years and are renowned locally, regionally and nationally for our expertise. Our role as an educator includes:

Medical Specialty Training

We offer postgraduate training for Specialty Registrars. Dr Andrew Hughes, Consultant in Specialist Palliative Medicine oversees our doctors training programme.

Northern GP training programme

We lead the palliative care sessions Northern Deanery GP training programme. These take place twice a month at Coach Lane campus at Northumbria University and are led by our consultants and specialty doctors. GP colleagues from Teesside also visit St Oswald’s for a week each Autumn to gain an overview and update in specialist palliative care.

Student placements

Fourth year medical students undertake a six week placement twice a year, supervised by one of our consultants.

Third year LTC students (Long term Conditions) attend teaching sessions at the Hospice for two and a half days a week, every month from January to June each year. Placements are also provided for paramedic and nursing students across services.
Corroborative statement from Newcastle Gateshead, Northumberland and North Tyneside Clinical Commissioning Groups (CCGs) for St Oswald’s Hospice Quality Accounts 2018/19

Newcastle Gateshead, Northumberland and North Tyneside Clinical Commissioning Groups (CCGs) welcome the opportunity to comment on the Annual Quality Account for St Oswald’s Hospice for 2018/19 and would like to offer the following commentary:

As commissioners, Newcastle Gateshead, Northumberland and North Tyneside Clinical CCGs are committed to commissioning high quality services from St Oswald’s Hospice and take seriously their responsibility to ensure that patients’ needs are met by the provision of safe, high quality services and that the views and expectations of patients and the public are listened to and acted upon.

The CCGs can confirm to their best knowledge that the information provided within the Annual Quality Account is an accurate and fair reflection of St Oswald’s Hospice performance for 2018/19. It is clearly presented in the format required and the information it contains accurately represents St Oswald’s Hospice’s quality profile. Overall, the CCGs felt that the report was presented in a meaningful way for both stakeholders and patients.

The CCGs continue to hold regular quality review group meetings with St Oswald’s Hospice which provides positive engagement for the monitoring, review and discussion of issues relating to the quality of patient care.

The CCGs would like to congratulate St Oswald’s Hospice on completing ‘phase one’ of their business plan with key partners to create the Great North Palliative Care Research Institute. The CCGs note that St Oswald’s Hospice is working in partnership with the National Institute for Health Research to become the regional Academic Hospice. The CCGs fully support that this continues to be a key priority for 2019/20.

The CCGs acknowledge the work that has been undertaken to formalise the legal model for Hospices North East and the move towards the soft launch with agreed strategic objectives. It is noted that St Oswald’s Hospice has been asked by the other eight independent hospices to continue as the lead organisation on this key priority.

The CCGs note the progress made in relation to the priority ‘to begin a focussed approach as to what the future holds with regards to dementia, learning disabilities and increased capacity for adult’s provision’. It is pleasing to note that an admiral nurse was introduced in the summer 2018 working in partnership with Dementia UK, which is fully funded for three years. The CCGs fully support St Oswald’s Hospice continuing its links with existing services to understand what palliative care services need to look like for patients with a dementia diagnosis.

The CCGs recognise the work St Oswald’s Hospice has undertaken in exploring the Palliative Care Provider Transformation Programme further. It is noted that there is a strong desire among palliative care providers to work together to develop and deliver a more coherent and comprehensive approach. This approach will involve key partners forming the ‘Northern Palliative Care Partnership’ whose aim will be to deliver the best possible palliative and end of life care for the people of the North East. The CCGs note that St Oswald’s Hospice will continue to work towards this priority as part of their ‘Vision 2025’ strategic objectives.
Corroborative statement from Newcastle Gateshead, Northumberland and North Tyneside Clinical Commissioning Groups (CCGs) for St Oswald’s Hospice Quality Accounts 2018/19 (continued)

St Oswald’s Hospice has demonstrated its commitment to participating in a number of externally validated clinical audits and additionally has participated in the national blood transfusion audit. It is also pleasing to note that St Oswald’s Hospice continues to meet with a neighbouring hospice to carry out joint audits, where appropriate.

The CCGs note that St Oswald’s Hospice has successfully completed the new Data Security and Protection Toolkit and are working towards Cyber Essentials Plus. The CCGs acknowledge that the hospice will continue to implement improvements in compliance with the General Data Protection Regulation (GDPR) and the Data Security and Protection Toolkit requirements.

The CCGs note that St Oswald’s Hospice is making improvements to the building and gardens, and has been given planning permission to build an extension for a family room in 2019/20. These improvements have been made possible due to the generosity of local people. It is evident that St Oswald’s Hospice is an integral part of the local community and the services provided are valued and well respected by patients and their families.

The CCGs recognise the excellent work undertaken by St Oswald’s Hospice in continuing to develop the ‘Focus on Living Centre’, including providing more tailored groups and courses.

Patient and public opinion of St Oswald’s Hospice is clearly very high as evidenced by the positive comments and feedback included within the report, for which St Oswald’s Hospice should be extremely proud. The ‘You Said, We Did’ and ‘Feedback Bank’ of patient comments indicates high levels of user satisfaction and also demonstrates a willingness to act and make improvements, where suggested.

It is assuring to note the achievement of the 2018/19 Commissioning for Quality and Innovation Schemes (CQUIN).

The CCGs would like to congratulate St Oswald’s Hospice and the staff for the excellent achievement of being awarded the North East Charity of the Year in 2018.

The CCGs welcome the specific priorities for 2019/20, which are highlighted within the report, and consider that these are appropriate areas to target for continued improvement. The CCGs look forward to continuing to work in partnership with the hospice to assure the quality of services commissioned in 2019/20.

Chris Piercy
Executive Director of Nursing,
Patient Safety & Quality

Dr Dominic Slowie
Medical Director

For and on behalf of NHS Newcastle Gateshead Clinical Commissioning Group
NHS Northumberland Clinical Commissioning Group
NHS North Tyneside Clinical Commissioning Group