



**Garden
House
Hospice
Care**

2023/2024 Quality Account



“After about two or three days, the big change came. His face was very fresh, his speech improved and he started walking little by little. The staff really had patience with him and they were kind; nothing was too much and the service was coming from their heart.”

“I can’t explain in words how pleased we are. You gave him his life back again.”

A statement on quality from the Chief Executive

Welcome to our Quality Account 2023/2024. We consider it to be an important publication as it is part of our accountability to the many individuals and groups with a stake in the work of Garden House Hospice Care.

The year as a whole

We are delighted to provide you with this summary of the quality initiatives that we have undertaken throughout the financial year, and to give you a high-level overview of some of our plans for 2024/2025. You are important to us, and we know you want to be assured of our attention to the quality of our services and our efforts to continuously improve wherever we can. Overall, this year we've seen incredible performance across all areas of the organisation. We're extremely proud of our results, our people and our volunteers. We are always delighted and humbled by the positive feedback that we receive from patients and their families across all our services.

This year, we have introduced a new clinical service model as we strive to achieve our vision to support all people in our community living with life-limiting conditions, their families and carers, to live as well as possible and according to their own wishes. Caring today, tomorrow and in the future.

Our new clinical model was designed to expand and grow our services in palliative and end of life and to address the known inequalities in accessing our care for people living with a non-cancer life-limiting conditions.

Working with our strategic partners we identified a cohort of patients living with moderate to severe frailty in our community who have experienced repeated admissions to our local hospitals when their condition caused a health crisis. Evaluating their care needs enabled us to develop a frailty service and implement new pathways between the acute trust and ourselves, preventing these admissions and providing tailored reablement and treatment within our portfolio of services.

I am delighted to say that the changes made in year have resulted in an increase of 100% accessing inpatient care, 200% accessing our community nursing and rehabilitation services and 75% receiving psychological support.

Our patient satisfaction results for 2023/2024 have been exceptional, and you will find some examples of the many accolades we received this year later in this publication.

The Quality Account aims to drive quality improvement within Garden House Hospice Care and our main focus remains to provide safe and effective care and an overall positive experience for our patients and their loved ones. Our approach aims to put quality right at the heart of everything we do in order to deliver our ambition to be an 'outstanding' organisation. It ensures that quality services are delivered in response to the specific requirements of our patients, carers, our staff, the public, our commissioners and regulators.

During the year we launched our 'Good to Great' improvement programme using a quality improvement approach to managing change within the organisation. We invested in our quality

team and embedded PSIRF across the organisation, which forms part of our commitment to developing a just and learning culture, building openness and transparency.

In the coming year we will continue our Quality improvement journey. There is more to do in addressing unmet need and we will learn and adapt as we grow.

We will invest in our staff, our estate, our systems and processes. We will benchmark our delivery using the three healthcare pillars of quality - constantly striving for first class Hospice services for every patient - every time.

In summary, 2023/2024 has been a busy year and one in which we have made great progress in our journey of improvement, innovation and transformation.

We have invested in our staff and our resources, made possible by the generosity of our funders, our supporters and local community. This support for your local hospice is appreciated and it's because of this generosity that we have been able to expand, grow and improve.

Finally, I would like to celebrate the dedication of our staff and volunteer team who go the extra mile every day for our patients.

Lisa Hunt

Chief Executive Officer, Garden House Hospice Care

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About Garden House Hospice Care

Mission statement

Garden House Hospice Care provides compassionate and holistic specialist palliative care to those in our community with life-limiting conditions, to enable them to live as well and as fully as possible. We share our knowledge and expertise to enable wider access to the best end of life care.

Vision

Support all people in our community living with life-limiting conditions and their families and carers, to live as well as possible and according to their own wishes. Caring today, tomorrow and in the future.

- Garden House Hospice Care (GHHC) provides a range of palliative and rehabilitative services within the Hospice Inpatient Unit (IPU), in patients' homes, at the Ernest Gardiner Treatment Centre and in our Community Hubs
- From January 2024 we have commenced provision of reablement service in our IPU and community services to support those identified with moderate /severe frailty with two or more long term conditions who have presented to or have been admitted to Lister Hospital
- Our Family Support Services support patients, families, and carers with pre- and post-bereavement, face-to-face and virtually
- We provide access to a Palliative Care 24/7 Advice Line via our IPU
- We supported the provision of Collaborative Care Home Education end of life programmes
- Recruitment and training of Compassionate Neighbours
- We provide dementia support to those living with dementia at the end of life and their carers through our dedicated “Admiral Nurse” dementia Clinical Nurse Specialist (CNS)
- Medical supervision, advice and guidance is provided to the HCT Specialist Palliative Care CNS team
- Provision of Frailty Clinical Nurse Specialists (CNS) in North Herts nursing and residential homes
- IPU providing admissions for symptom control or last days of life care for patients and support for their families
- Hospice at Home service (H@H)
- Continuing Health Care (CHC) Fast Track 10 bed capacity community service
- Domiciliary and outpatient medical reviews, using a blend of face-to-face and virtual support
- Training placements for GP trainees and Palliative Medicine Specialist Trainees
- Provision of a learning and supportive environment for placements from local Universities providing training for Student Nurses and Allied Health Care professionals as well as placements for Cambridge University Medical Students.

Regulation and inspection

Garden House Hospice Care is regulated by the Care Quality Commission and was last inspected in May 2022, receiving a continued rating of ‘Good’ for all five key lines of enquiry.

Our Strategy



Strategy

2022 → 2025

Vision

Supporting all people in our community living with life-limiting conditions and their families and carers, to live as well as possible and according to their own wishes. Caring today, tomorrow and in the future.

Objectives

OUR COMMUNITY

Sit at the heart of our community and local networks.

WE WILL

- Develop an inclusive network of individuals and organisations, and better engage with those that already exist.
- Expand the reach of our services by improving awareness of the range of our services.
- Grow our volunteer base.
- Learn from our communities.

OUR SERVICES

Provide high quality services that meet the needs of the whole community.

WE WILL

- Be at the forefront of the delivery of exemplary care for people with a life-limiting illness and their loved ones.
- Respond to the varying and changing needs of our community and provide innovative, dynamic care services.
- Work collaboratively with health service providers across our region to reach more people and ensure the best palliative and end-of-life care is available to all who need it.

OUR PEOPLE

Grow a strong, capable, resilient, highly-skilled and motivated organisation.

WE WILL

- Develop an innovative and aspirational environment to attract and retain staff.
- Champion a culture that celebrates learning, productivity, innovation, diversity and equality.
- Embed a core ethos of dignity and respect in all that we do.

OUR FUNDING

Secure the future of the Hospice through sustainable funding.

WE WILL

- Employ new, diverse, innovative and reliable, sustainable funding.
- Spend funding efficiently, maintain prudent reserves while investing in an ambitious growth in services.
- Develop and grow outstanding relationships in our community to drive income and support.
- Be the retailer of choice for sustainable fashion and goods.

Values

- Place the patient at the heart
- Take inspiration from our community
- Deliver a high-quality service
- Continually learn and improve
- Respect everyone
- One team with a shared vision

Garden House Hospice Care’s strategic objectives for 2023/2024

Our community: Sit at the heart of our community and local networks.

How we can demonstrate achievement

GHHC is committed to ensuring that we have the right people, with the right skills, in the right role, at the right time. This will enable GHHC to provide high quality services to our community.

We are committed to the upskilling of our community by way of our education programme which visits local schools. We are also committed, by way of our EDI strategy to having our people, supporters and patients reflecting the community that we represent.

- Our Compassionate Neighbours service continues to grow and provide a service and support and companionship to those in our community, receiving 276 new referrals. Of these 47% were self-referrals
- Through this work, a case load of 891 community members were supported in 2023/2024
- We have developed an annual plan for 2024/2025 to enable the service to grow with demand and integrate effectively with the evolving Integrated Neighbourhood Teams
- 175 community members accessing our services were discharged - 17% being supported at the end of life and when required others signposted to other, more suitable services
- Our Community Hubs have continued to grow and provide access to more people in our community working in partnership with our community providers including local churches. Through this we have 9 weekly hubs with 381 regular attendees. We have two weekly hubs in Stevenage, one in Royston and one in Hitchin. We will be opening five additional hub locations in 2024/2025
- Our Dementia CNS has broadened her scope and support service into our hubs model. This is a different model from other GHHC Community Hubs with the benefit of clinician availability. Part of further Community Hub expansion for 2024/2025, includes a programme of support for carers within the hub model
- We have active partnerships with 55 schools in our locality to raise awareness of hospice services with children and young people as well as encourage end of life conversations with young people and their teachers and parents
- In 2023/2024 we engaged with 70 different schools to deliver training and awareness of the range of services and how we support our community. This work involved 3,744 students, 204 teachers/staff and 1,006 parents.

Our services: Provide high quality services that meet the needs of the whole community.

How we can demonstrate achievement

- We have delivered our 2023/2024 Annual Plan and reported progress quarterly to our internal Hospice Management Board and our Board of Trustees
- This year has seen the introduction of a Frailty Service designed to address local health inequalities in accessing palliative care services. Our ambition is to provide support and care for all who need us - increasing care to any adult with a life-limiting illness

- As part of the launch of the service, we appointed a Frailty in-reach nurse to work within East and North Herts NHS Trust, identifying patients with life-limiting illness resulting in moderate to severe frailty early in their admission who would benefit from palliative enablement approach either as an inpatient or within the community. The service is designed to prevent admissions and to support and facilitate earlier discharge
- We achieved our goal and in the first quarter we transferred 93 patients into our palliative care services here at Garden House Hospice Care
- Our IPU increased its bed capacity to 12 beds in January 2024 to ensure we had adequate capacity to be responsive. We integrated our Allied Health Care services to increase our enablement and therapy provision
- Our community team have also supported the identified cohort of patients with frailty who have been discharged home. This has enabled the provision of palliative rehabilitation approach provided by GHHC therapy services at home and the opportunity for patients to be linked into GHHC Community Hubs and Compassionate Neighbours. In total we increased our provision of care in the community by over 200%
- We have reviewed and embedded our social worker support across our clinical areas, to enhance discharge planning
- We have implemented the Patient Safety Incident Reporting framework (PSIRF) in line with national requirements
- We have continued our regular Safeguarding Group throughout the year, extending the membership and training to include non-clinical representatives from across all areas of the Hospice
- We have strengthened our psychological support services resulting in an increase of 75% contacts, introduced a new Spiritual Care model in 2024 with the commencement of a service level agreement with East and North Herts Trust Chaplaincy service. This multifaith team provides support to patients, relatives, carers and staff of all faiths and none
- We have fully implemented and achieved the National Cleaning Standards framework across the organisation, exceeding the national standards in all areas
- Our Annual Infection Prevention Audit and training was completed by East and North Herts Trust in October receiving the following results:
 - Hand Hygiene Observational - 80%
 - IPCT Environment - 100%
 - IPCT Safe Handling and Disposal of Sharps - 100 %
 - IPCT Isolation Precautions audit - 94 %
 - IPCT Urinary Catheter Care audit - 100%
 - Commode Spot Check Audit - 90%
- We have continued to adhere to Covid-19 GOV.UK guidance, updating and sharing our Living with Covid Guidance throughout the year
- The Safeguarding Lead and Nominated Safeguarding Trustee completed a robust Trustee Safeguarding assurance audit in 2023. A clear action plan was created, updated, monitored and delivered providing assurance to the Trustee Board
- We have strengthened our governance through the implementation of new role profiles for Safeguarding link, champion roles, and nominated Trustee roles
- We have strengthened our incident and safety reviews, embedded within our weekly patient safety meetings, to review and agree actions from all reported incidents and ensure feedback is given to teams, taking into consideration the PSIRF

- We have continued to use the Health Information Exchange (HIE) to support the delivery of our clinical care
- A significant increase in referrals to our Family Support Services team of 75% in the year was recorded. In response to this, we have invested in the team for 2024/2025 to ensure our services are able to meet the demand and ensure waiting times for those referred are reduced
- This will also enable the team to provide a range of contact methods, through supportive calls, telephone assessments and face-to-face formal counselling sessions for all
- We have delivered Continuing Health Care support at home/ Hospice at Home in line with the agreed service model
- Provided Medical Specialist Palliative Care support to community patients, working collaboratively with HCT SPC CNS team and the East and North Herts NHS Trust
- Continued provision of Frailty Clinical Nurse Specialist (CNS) support to our nursing and residential homes in North Hertfordshire
- Embedded the Recommended Summary Plan for Emergency Care and Treatment (ReSPECT) document within our practice.

Our people: Grow a strong, capable, resilient, highly skilled and motivated organisation.

How we can demonstrate achievement

- We have invested in the People and Culture team as follows:
- We have increased our Employee Relations support and adopted a business partner model. This has ensured both the clinical and non-clinical cohort receive in the moment ER support. This has been to prevent rather than cure ER issues
- We have increased the Recruitment team to ensure we recruit in a timely and efficient manner
- We have a dedicated payroll officer who also looks after our business intelligence and HRIS
- We appointed an interim People and Culture projects manager to drive our business plan forward thus adding value strategically
- We have appointed a Learning and Development Manager to drive this area forward. The Learning and Development Manager is developing a competency framework that will add value across all areas of our organisation
- We will continue to invest in our people by increasing the Learning and Development team and developing staff competency across all staff groups
- We now monitor and review our EDI intelligence to ensure that we are fair and competitive
- We have invested more in our Employee voice. This includes carrying out employee engagement surveys, exit interviews as well as the newly implemented employee forum
- We continue to review and improve the appraisal process.

Our funding: Secure the future of the Hospice through sustainable funding

How we can demonstrate achievement

Our Fundraising team has continuously developed initiatives, events, and campaigns within the community, resulting in an impressive fundraising total exceeding £3 million. This past year was exceptional for legacy donations, contributing over £1 million to our overall fundraising efforts.

- The fundraising appeal launched to support our new Frailty Service garnered over £300,000, enabling us to initiate and sustain the service from January through to April
- Our Trading team diligently evaluated our retail shops, resulting in the closure of two underperforming locations. Despite this, our shops collectively generated an income of £2.5 million, an increase of 8% in sales income compared to the previous year. Furthermore, an expected profits of £380,000 would be gifted to Garden House Hospice Care
- Garden House Hospice Care's trading division made significant investments in our operations by inaugurating a new Depot. This establishment offers an upgraded workspace for both staff and volunteers, along with enhanced distribution and storage capabilities
- Our website underwent improvements, enhancing our external communications with the local community. This has provided a more user-friendly and accessible platform for updates and garnering support for our services
- Our website has improved our external communications with the local community, offering an easier and more accessible way to be updated and gain support from our services
- Ensured compliance with all relevant legislation, including VAT, Gift Aid, Companies House, Pension Regulators, and Charity Commission
- We upgraded our accounts system from (Sage 200 Standard to Sage 200 Professional) which has improved real-time reporting information and timescales
- The use of resources is limited by the funds available. The use of funds is monitored by the Finance department
- Management and reporting on income and expenditure is shared monthly with the Finance and General Purposes Committee and ultimately with the Board of Trustees on a quarterly basis. This ensures available resources are used effectively, efficiently, and innovatively
- Professional auditors complete independent auditing of the use of funds annually. This provides additional reassurance regarding the expected standards of governance
- Robust annual budgeting and reforecasting process in place
- The income received from the NHS in 2023/2024 represents 33% of the overall running costs of Garden House Hospice Care
- The remainder of running costs are funded through voluntary income generation, donations, legacies, lottery activity, investment income, shop trading.
- Legacies amounted to 29% of total income
- Shop profit equaled 7% of income.

Summary of Priorities 2023/2024

Priority 1:

Increase the reach of all our services into our local neighborhoods and grow by developing innovative models of care for the moderate to severely frail who would benefit from Palliative and end of life care.

During 2023, we worked in partnership across our Integrated Care System, to codesign and develop an innovative new model of care to support those with non-cancer life-limiting conditions and identified as living with moderate to severe frailty. This was to address inequalities in Palliative Care provision identified in our local community by using Public Health information.

Through adherence and quarterly monitoring and reporting of our progress against our Annual Plan, we developed KPIs to monitor the effectiveness of the service.

These KPIs were monitored through monthly reporting to our Hospice Management Board. Quarterly progress assurance was reported to our Clinical Governance Committee.

Priority 2:

Working within our budget allocation, make every penny count and where opportunities exist, increase our NHS contract potential, and reduce the risk of funding care and future service developments.

We reviewed our budget and adhered to monthly reviews, identifying areas for improvement or change. Through this, and a demand and capacity review completed through our transformation programme, we were able to make efficiencies within our 2023/2024 budget allocation, delivering 200% more patient facing activities within budget.

We focussed in all areas of the Hospice on our departmental budgets, reviewing monthly and reporting through our Hospice Management Board and Trustee Board against agreed KPIs.

We delivered on our new model of care with our Frailty Service in Priority 1 within budget.

Priority 3:

Invest in our staff and strengthen our resilience, to enable our organisation to become more agile and responsive to future opportunities.

We set up a work force group across all areas of the Hospice focussing on areas that required strengthening and resilience in their workforces. As part of this, our recruitment and retention models were reviewed alongside recruitment campaigns and benefits of employment. We will be completing a job evaluation in 2024/2025.

We commenced a staff forum because we believe our staff not only can identify risks, issues or concerns but because we empower all to work together to find and implement the solutions.

We have trained two new Freedom to Speak Up Guardians and raised the profile and awareness of this across the organisation.

We reviewed the working environment of all staff on site through a dedicated working group. This enabled our clinical teams to be relocated to work alongside each other and has improved communications and collaborative working. This has enhanced the patient experience through timely support for our patients and carers through informed and seamless transfer of care as required.

Priority 4:

Ensure that Garden House Hospice Care is recognised as an efficient and thriving organisation worthy of future investment and known as 'Great' at what it does.

Through our Transformation Board review of demand and capacity and working practices we were able to increase our productivity and streamline our pathways across our clinical service provision.

We introduced mobile working for our whole community team, investing in the equipment required for them to be able to access and deliver the care in a responsive and agile way, resulting in an increase of 200% patient contacts in the community with reduced waiting times.

Looking Forward 2024/2025: Our strategic objectives 2024/2025

As we continue our Quality improvement journey in the next 12 months we will focus on the three Healthcare Pillars of Quality, using these to underpin our priorities:

- Patient safety
- Clinical effectiveness
- Patient experience

We will continue to work with our Integrated Care Board and be part of the Herts and West Essex Quality Improvement Network to monitor and develop.

Priority 1:

Expand our Compassionate Neighbours and increase Wellbeing Hubs aligned to pathways into and out of clinical services, becoming an integral partner in Integrated Neighbourhood Teams across PLACE.

We will increase and train our number of Compassionate Neighbour volunteers by 100 enabling increased provision for our community members and new referrals to our service in 2024/2025.

We will maintain attendance levels at current hubs and open six new hubs, linked to Neighbourhood Team locations.

This will increase the total number of Hubs to 12 to widen access to those in our community to our services.

Priority 2:

As part of our ongoing provision of care to those with frailty and those in need of palliative symptom control, we will commence ambulatory care services within our Inpatient Unit in partnership with our Community Trust.

We will undertake a scoping exercise to investigate and identify the difference and need of a Hospice ambulatory care service to support our local care provider and patient care. This will ensure equality in access to care and to provide a care setting of patient choice that is appropriate to each individual.

We will complete a Quality Impact Assessment and Equality Impact Assessment to ensure high quality provision.

Within our implementation plan, we will equip our staff with the skills and training to expand and grow the service.

We will evaluate patient pathways and experience and impact of those referred to and accessing the service.

Priority 3:

In our ongoing annual improvement plan, we will invest in our staff in 2024/2025.

We will build resilience and expertise in our teams, investing in training programmes across all levels to enable us to deliver high quality services within our current and future key priorities.

We will value our teams, investing in them and empowering them to be involved in the decisions, direction and implementation of our transformation plans for 2024/2025 as we strive for improvement in our service delivery and staff, patient and carer satisfaction.

Priority 4:

We plan to investigate the development of a response team to provide telephone advice and urgent domiciliary support to palliative patients on the ambulance stack.

We will work with other providers within our Integrated Care Board in the support to development of palliative care support to the Ambulance service to ensure equal access across the Herts and West Essex Integrated Care Board.

We will explore further opportunities for partnership working with other providers across the Integrated Care Board to support the avoidance of unwanted and unnecessary admissions to the acute trust. This will enable patients to remain in their own homes if this is their wish with the appropriate plan of care.

Mandatory statements of assurance

The following are statements that all providers must include in their Quality Accounts. Many of these statements are not directly applicable to specialist palliative care providers. An explanation of these statements and why they do not apply to Garden House Hospice Care has been included, where appropriate.

Review of services

During 2023/2024, Garden House Hospice Care received some NHS funding for its services. The income received from the NHS in 2023/2024 represents 33% of the overall running costs of Garden House Hospice Care.

The remainder of running costs are funded through voluntary income generation, donations, legacies, lottery activity, investment income, shop trading.

Participation in clinical audit

As a provider of specialist palliative care, Garden House Hospice Care was not eligible to participate in any national clinical audits or national confidential enquiries.

Local clinical audits

Garden House Hospice Care has an annual programme of clinical audits.

A summary of audit results and action plans are reported to the Board of Trustees via the Clinical Governance Committee, a sub-committee of the Board of Trustees.

Research

The number of patients receiving NHS services provided or sub-contracted by Garden House Hospice Care in 2023/2024 who were recruited by the Hospice during the period to participate in research approved by a research ethics committee was NIL.

Use of the CQUIN payment framework

A proportion of an organisation's income can be conditional on achieving quality improvement and innovation goals, through the Commissioning for Quality and Innovation (CQUIN) payment framework.

In 2023/2024, Garden House Hospice Care has not been subject to payments under the CQUIN payment framework from NHS Hertfordshire or NHS Bedfordshire.

Garden House Hospice Care will not be subject to CQUIN payments in 2024/2025.

Statement from the Care Quality Commission

Garden House Hospice Care is required to register with the Care Quality Commission and its current registration status is unconditional. Garden House Hospice Care has no conditions on registration.

The Care Quality Commission has not taken enforcement action against Garden House Hospice Care in 2023/2024.

Garden House Hospice Care has not participated in any special reviews or investigations by the Care Quality Commission during the reporting period.

Data quality

Garden House Hospice Care did not submit records during 2023/2024 to the Secondary Uses Service for inclusion in the Hospital Episode Statistics which are included in the latest published data. This is because the Hospice is not eligible to participate in this scheme.

Data Security and Protection Toolkit attainment levels

Garden House Hospice Care has the status 'Standards Met' for the Data Security and Protection Toolkit.

Learning from deaths

Providers are expected to report their progress in using learning from deaths to inform their quality improvement plans as part of the Quality Improvement toolkit. Garden House Hospice Care is not subject to the Quality Improvement toolkit.

Review of quality performance

Garden House Hospice Care explanation

During 2023/2024 there has been a formal review of the way that incidents are reported, Risk rated, investigated and reviewed. Part of this process was driven by the introduction of the PSIRF methodology and part by GHHC's desire to continue to improve the way it informs itself of the incidents which form part of daily life within all aspects of the service.

Incident reporting is through a standardised model (Radar) and all staff are trained in how and what to report. We consider an incident is described as anything which could compromise our expectation that our patients, staff, volunteers and visitors are within an environment that is Safe, Secure, Sustainable and Supportive. This message is constantly reinforced through learning and development in each of the departments.

Every incident that is reported is reviewed by a member of the Integrated Governance team on a daily basis for accuracy, risk level and assigning the appropriate level of investigation.

There is a weekly Incident review meeting which all managers attend where each incident, or cluster of incidents, is discussed and remediation plans are constructed and put into place. This may include an extra level of investigation. Feedback from this meeting is the responsibility of the manager to the staff.

Where there is a deeper level of investigation required, the investigator is assisted and supported to carry this out.

There is a monthly review of all incidents reported which is submitted to the Hospice management Board and its members which identifies trends in reporting, risk and incident types this is in Patient Facing, Non-Patient facing and Trading aspects of the organisation.

There are monthly meetings to discuss and analyse specific types of incidents which are more prevalent in our clinical setting. This includes a Falls Committee, A Medication Committee, a Pressure Ulcer Committee and a Risk assessment and management group.

We have introduced a new and active and dynamic corporate risk register which is reviewed, amended and updated daily by the governance team and Risk Owners. This is a comprehensive register and covers Patient Facing, Non-Patient facing and Trading parts of the organisation.

Risks are managed within the organisation, when they arise, by the Governance team and comply with the process and timescales that are expected.

A considerable amount of time has been expended over the last 12 months reviewing the 5 years' worth of data that we hold to ensure that it is accurate and reliable. This will support future participation on Benchmarking.

The organisation now has the ability to identify trends and accurate risk ratings, to support the setting of Key Performance Indicators and control and tolerance levels.

We have appointed a new Data Protection Officer and conducted a full review of our GDPR compliance. To complement our online training, we have introduced mandatory face to face training support for all staff, and training for new champions that will be commencing during 2024/2025.

We are undertaking a full Health and Safety review in 2024/2025 to include additional training and recruitment.

Hospice UK Benchmarking Project

Garden House Hospice Care was not able to participate in the national hospice (Hospice UK) quality benchmark reporting until May 2023.

Garden House Hospice Care activity data

The figures below provide one measure of Garden House Hospice Care's activity during the period 2023/2024.

	2023/2024
Total number of patients, carers and community members cared for across all GHHC services	2,895
Inpatient Unit	
Number of admissions	234
Average length of stay (days)	8.4 days
% of patients discharged to home / care home / hospital	43%
Number of advice line calls	256
Hospice at Home	
Number of referrals	173
Number of visits to patients	1,509
Continuing Health Care Service	
Number of referrals	63
Number of visits to patients	6,977
Rehab & Wellbeing	
Number of referrals	236
Number of activities	2,808
Frailty Team	
Number of referrals	384
Number of patients reviewed & support calls	3,657
Dementia Clinical Nurse Specialist	
Number of referrals	37
Number of interventions	541
Outpatients	
Number of unique patients attending	35
Number of medical appointments	105
Family Support Services	
Number of referrals	444
Pre & Post Bereavement individual counselling sessions	682
Number of interventions	2,819
Compassionate Neighbours	
Number of Community Members Supported	891

Patient Accidents, Incidents and Near Misses

All patient incidents are investigated lessons learnt, and concerns added to the risk register.

Garden House Hospice Care reports incidents quarterly to the East and North Herts Clinical Commissioning Group, BLMK Clinical Commissioning Group and the Care Quality Commission when required.

Serious Incidents Requiring Investigation

In 2023/2024, there were no Serious Incidents Requiring Investigation (SIRI) which Garden House Hospice Care are required to report to the Care Quality Commission and East and North Herts Clinical Commissioning Group.

Duty of Candour

Candour is defined in the Francis Report (2013) as:

“The volunteering of all relevant information to persons who have or may have been harmed by the provision of services, whether or not the information has been requested and whether or not a complaint or a report about that provision has been made.”

Garden House Hospice Care is committed to the Duty of Candour and expects every healthcare professional to be open and honest with all patients and service users and their family and carers. During 2023/2024, there have been no Duty of Candour breaches at Garden House Hospice Care.

All Clinical and non-clinical patient-facing staff and volunteers receive annual mandatory training on safeguarding, mental capacity and deprivation of liberty safeguards.

SAFEGUARDING LEAD: Director of Patient Services

SAFEGUARDING TRUSTEE: Named responsible Trustee

ADULT SAFEGUARDING CHAMPION: Social Worker

Safeguarding adults at risk of abuse or neglect is everybody's business. Garden House Hospice Care's policy is in line with the Hertfordshire Safeguarding Adults Board's multi-agency policy and procedure for working with adults at risk of abuse or neglect. GHHC's Safeguarding of Adults at Risk policy was last updated in April 2024.

The Care Act 2014 and supporting statutory guidance describes safeguarding as protecting an adult's right to live safely, free from abuse and neglect.

When abuse or neglect occurs, or is suspected, it needs to be responded to swiftly, effectively and proportionately to enable the adult in need of safeguarding to remain in control of their life as much as possible.

The Safeguarding information on how to raise a concern is displayed on the Safeguarding information boards and in team areas for hospice team members. Safeguarding posters are displayed, and leaflets are available for patients, family, friends and carers.

19 Adult Safeguarding concerns were raised in 2023/2024.

CHILD SAFEGUARDING CHAMPION: Social Worker

Garden House Hospice Care is committed to protecting and promoting the welfare of children who may come into contact with our services at all times.

The Safeguarding Children policy is to be read in conjunction with the Hertfordshire Safeguarding Children Partnership (HSCP) Manual. Garden House Hospice Care's Safeguarding Children policy was last updated in April 2024.

The Safeguarding information on how to raise a concern is displayed on the Safeguarding information boards and in team areas for hospice team members. Safeguarding posters are displayed, and leaflets are available for patients, family, friends and carers.

No children Safeguarding concerns were raised in 2023/2024.

MENTAL CAPACITY CHAMPION: Practice Development Lead

Garden House Hospice Care is committed to protecting and promoting the welfare of adults at risk who come into contact with our services at all times. The Mental Capacity Act and Deprivation of Liberty Safeguards Policy underpins Garden House Hospice Care's statutory requirements in terms of The Mental Capacity Act (2005) and should be read in conjunction with the Mental Capacity Act Code of Practice.

The Mental Capacity Act 2005 (MCA) applies to the care, treatment and support of people in England and Wales aged 16 years and over who are unable to make some or all decisions for themselves. Staff working with people who lack capacity must have regard to the Mental Capacity Act. The Act is accompanied by a statutory Code of Practice which explains how the MCA will work on a day-to-day basis and provides guidance to all those working with, or caring for, people who lack capacity. As the Code has statutory force, all staff who are employed in health and social care are legally required to 'have regard' to the MCA Code of Practice.

GHHC's Mental Capacity Act and Deprivation of Liberty Safeguards Policy was last updated June 2022. and is next due for review in June 2025

- The Mental Capacity (Amendment) Bill received Royal Assent on 16 May 2019 and sets out the measures the government will take to replace the Deprivation of Liberty Safeguards (DoLS) scheme in the Mental Capacity Act 2005. This is a process that authorises deprivations of liberty for the care and treatment of those who lack capacity.

The new Liberty Protection Safeguards (LPS) was due to be implemented by April 2022 but has been delayed indefinitely. The department of Health and social care announced in April 2023 that Government has taken the decision to delay the implementation of the Liberty Protection Safeguards beyond the life of this Parliament.

Nine Deprivation of Liberty Safeguards applications was made in 2023/2024.

FAMCARE

FAMCARE is a service evaluation of bereaved relatives' satisfaction with palliative care services, carried out by the Association of Palliative Medicine of Great Britain and Ireland (APM).

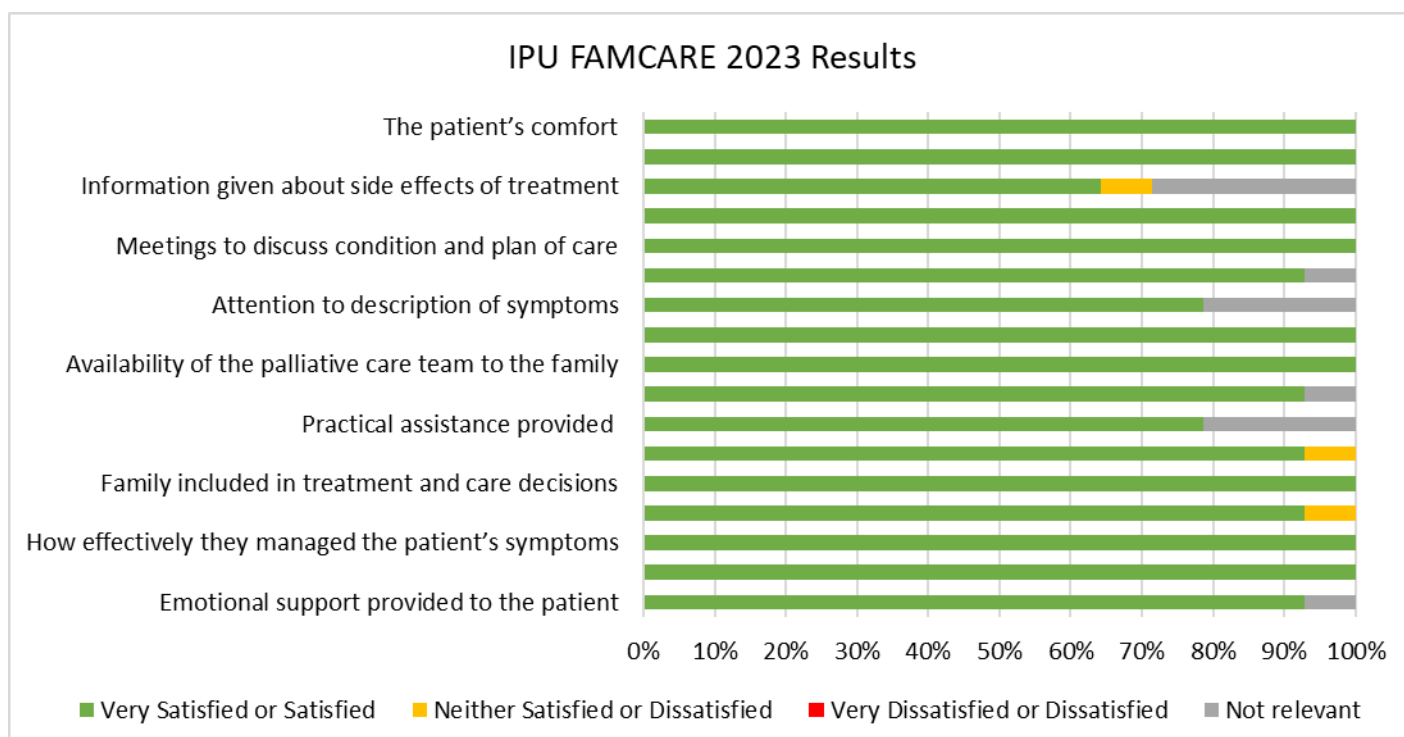
Garden House Hospice Care took part in the national FAMCARE audit for the first time in 2018 for both the Inpatient Unit (IPU) and Hospice at Home (HH)/ Continuing Health Care (CHC) services. GHHC took part again in 2023. Nationally, specialist palliative care team participation in 2023 was as follows:

Location	No. of Teams Participating	No. of Questionnaires Returned
Hospice Inpatient Units	27	483
Home Care Teams	26	573
Hospital Support Teams	5	73

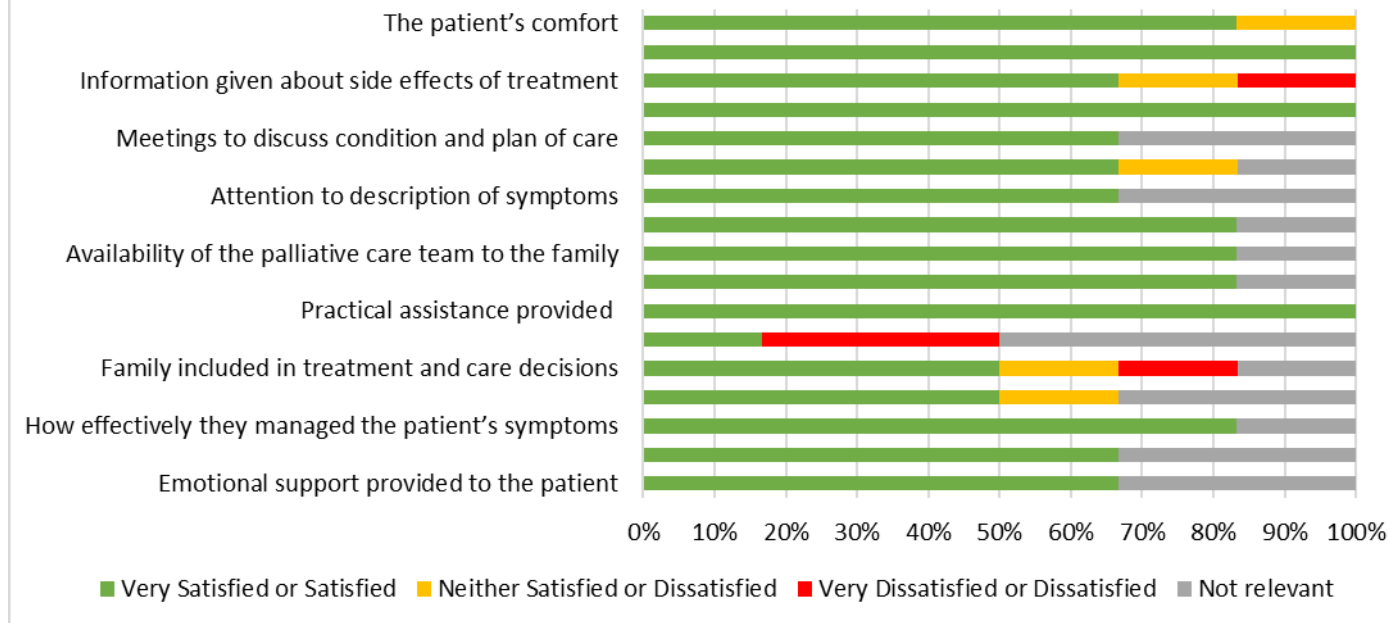
The service evaluation questionnaire was sent to the next of kin of patients who died between 1st June and 30th August 2023, with a prepaid envelope for completed forms to be returned directly to the APM.

Garden House Hospice Care sent out 42 questionnaires; 14 IPU surveys and 6 HH/CHC surveys were returned. There was a 45% return rate.

The APM collated the results and provided each participating specialist palliative care team with graphs comparing their results with the national results for equivalent services.



HH/CHC FAMCARE 2023 Results



Results were shared with all team managers. Feedback from one response (Practical assistance provided) was poor. It was noted in review that this included feedback regarding external organisation and not exclusively for HH/CHC.

NHS Protect Medicines Security Self-Assessment

This audit is undertaken twice a year, scoring 100% in April 2023 and 100% in December 2023 (86% and 95% in 2022/2023).

Hospice UK Audits

Controlled Drugs

GHHC undertakes the Hospice UK Controlled Drugs audit biannually. In 2023/2024 compliance was 93% (96% in 2022/2023).

Medical Gases

GHHC undertakes the Hospice UK Medical Gases audit annually. In 2023/2024 compliance was 96% (89% in 2022/2023).

Pressure Ulcers

GHHC undertakes the Hospice UK Pressure Ulcers audit biannually. In 2023/2024 compliance was 98% (98% in 2022/2023).

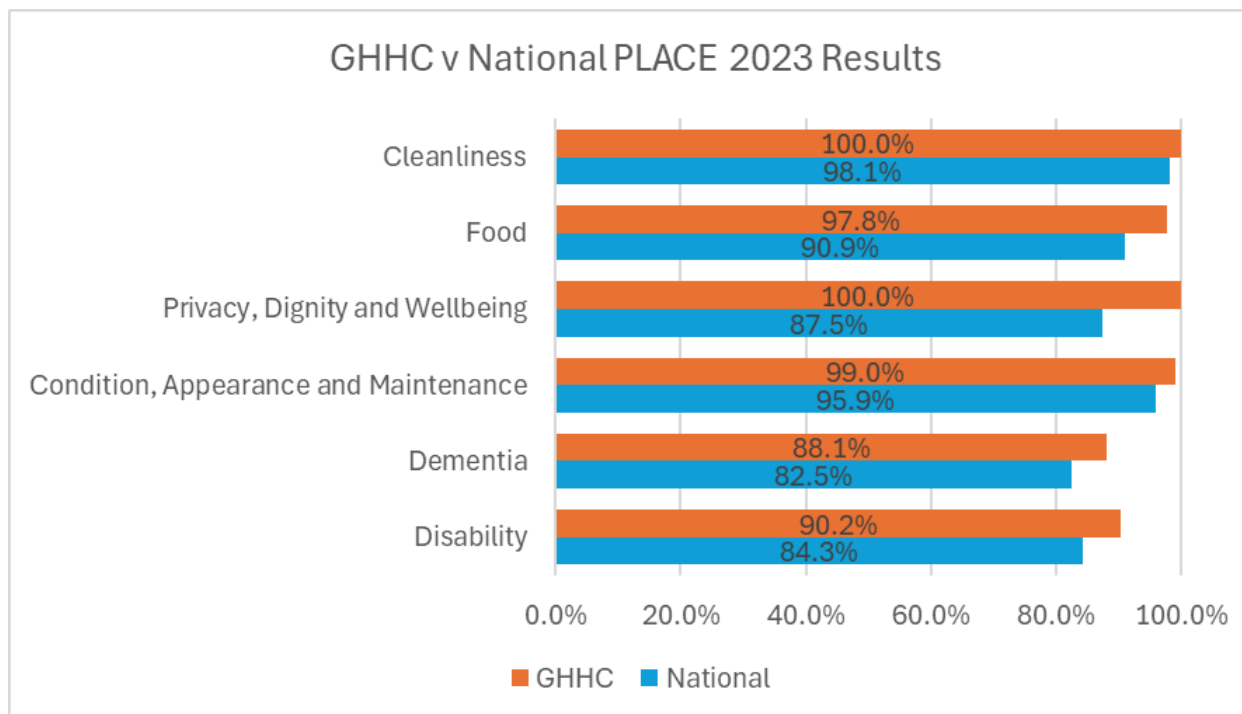
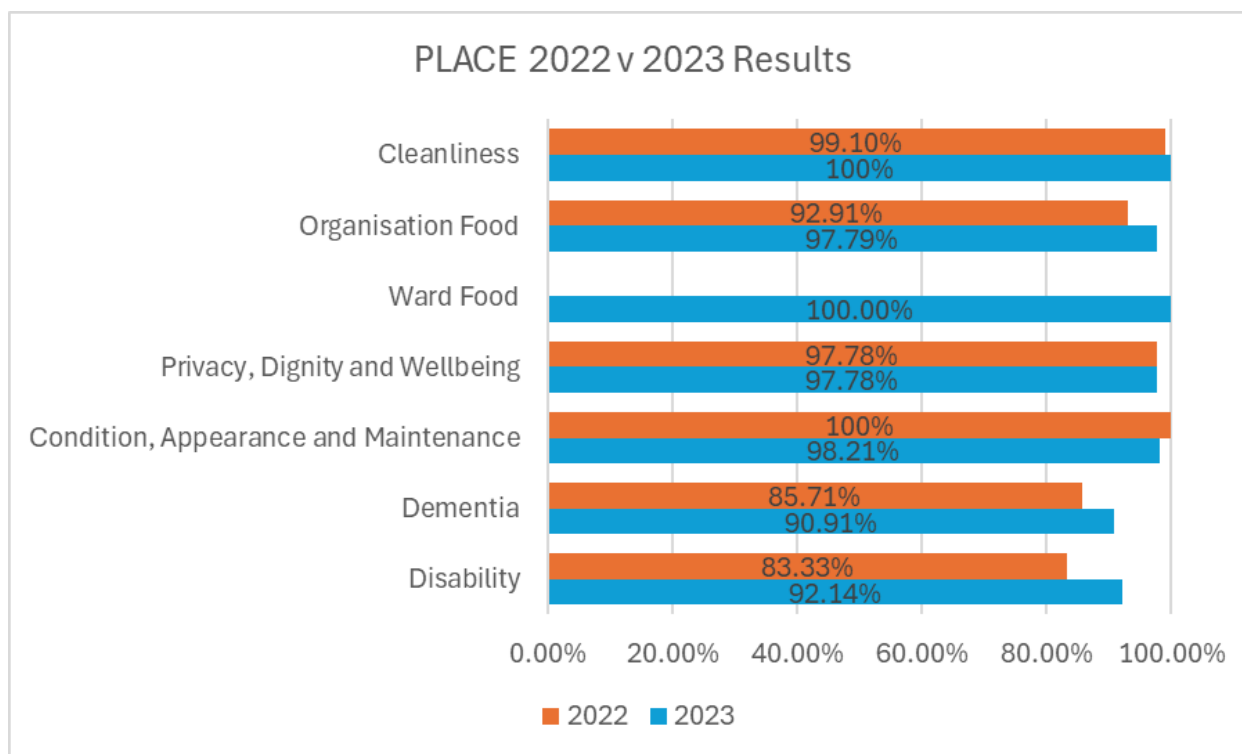
General Medicines

GHHC undertakes the Hospice UK General Medicines audit annually. In 2023/2024 compliance was 97% (88% in 2022/2023).

PLACE is an assessment programme run by NHS Digital on behalf of NHS England (NHSE) which should be completed within all qualifying inpatient premises on an annual basis.

It is about the non-clinical environment covering food, cleanliness, privacy, dignity and wellbeing, condition, appearance and maintenance and how well the organisation supports patients with dementia and disabilities.

Garden House Hospice Care took part in the national PLACE audit in Autumn 2023 and patient auditors were recruited, trained and supported to carry out the audit.

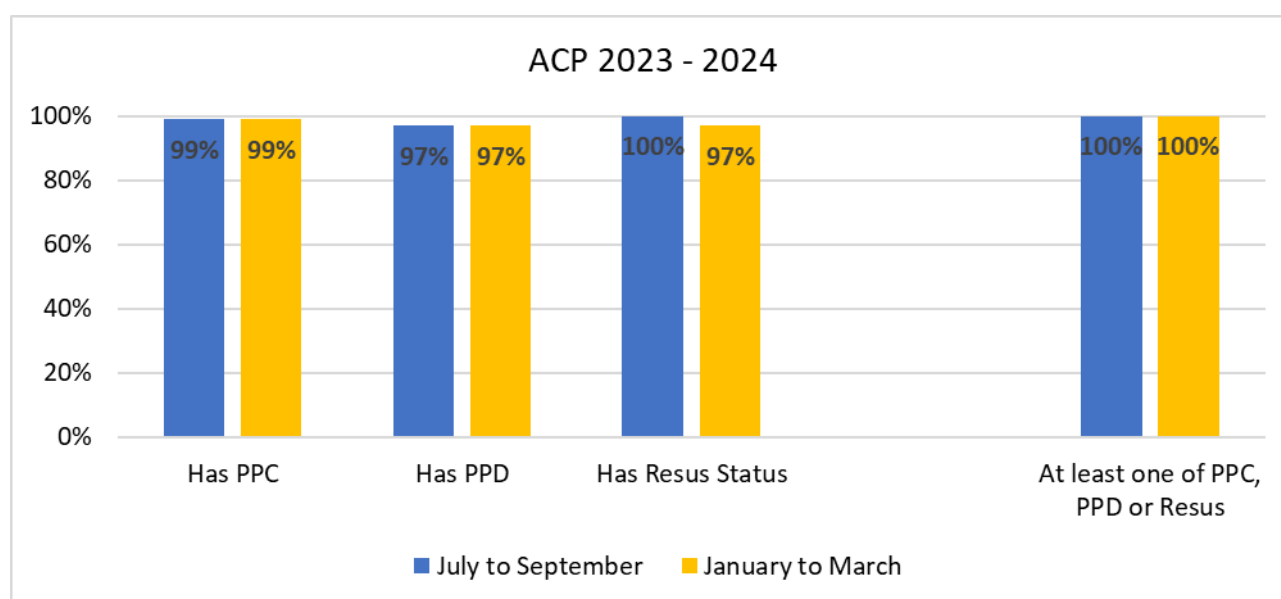


Following improvements made after the 2022 audit, the overall score for PLACE increased from 93% in 2022 to 97% in 2023.

Advance care planning (ACP) is a voluntary process of discussion about future care between an individual and their care providers, irrespective of discipline. It is recommended that with the individual’s agreement this discussion is documented, regularly reviewed, and communicated to key persons involved in their care. An ACP discussion might include:

- the individual’s concerns and wishes
- their important values or personal goals for care
- their understanding about their illness and prognosis
- their preferences and wishes for types of care or treatment.

This audit is undertaken every six months to provide assurance that ACPs are offered for patients using Garden House Hospice Care (GHHC) Hospice at Home, Continuing Health Care and Inpatient Unit services. For the purposes of this audit, an individual is considered to have undergone ACP discussions if they have any of the following three things documented on their patient record: Preferred place of care, Preferred place of death and/or Resuscitation status.



Nursing care plans are designed to support patients identify and manage their problems. They should ensure that patients get the same care regardless of what staff are on duty and ensure that care is recorded.

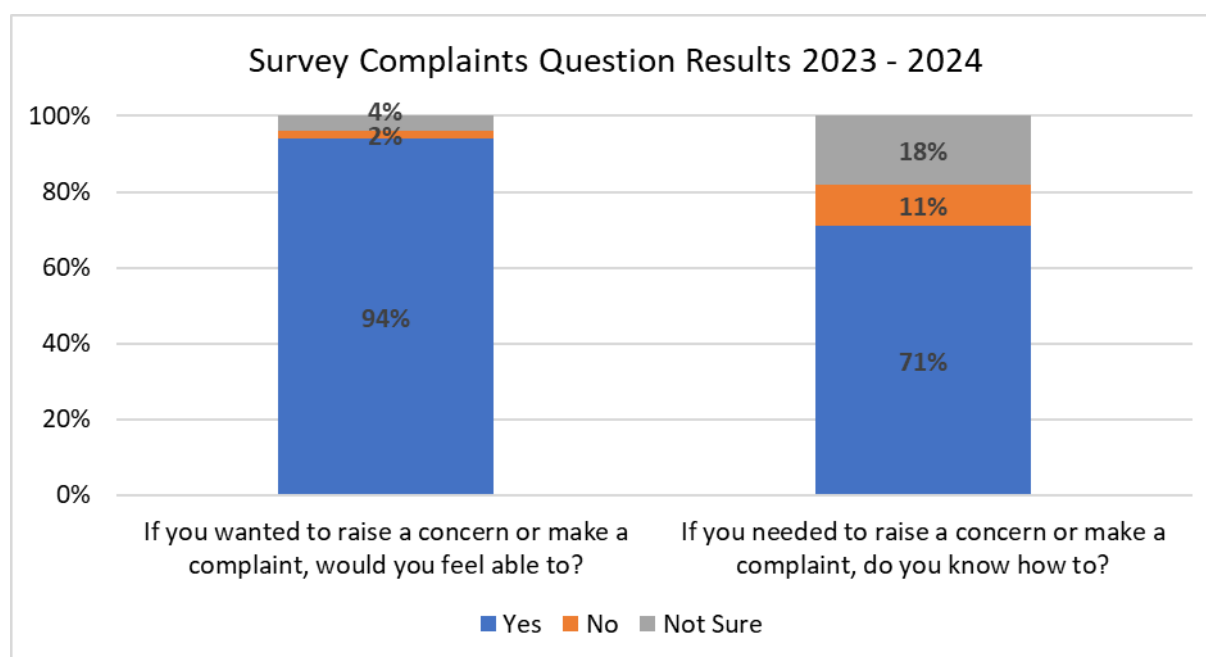
Services should ensure that a person’s care plan fully reflects their physical, mental, emotional and social needs. (CQC, 2019)

An audit of care planning with the Inpatient Unit (IPU) at Garden House Hospice Care was developed and undertaken. Criteria was developed using guidance from the RCN (Royal College of Nursing) and CQC (Care Quality Commission).

Criteria	Result
Patient/ Carer involved in development of care plan	100%
Care plans were personalised	88%
3 main problems reflected in care plan	88%
Mental capacity was considered	88%
Care plans showed description of action taken and by whom	100%
Support / encouragement to self care included where appropriate	100%
Care plans were reviewed	100%
Evidence of triangulation with pressure area, hydration/ nutrition and mobility care plans where appropriate	100%
If identified as being in the 'Dying ' phase, commenced on Pathway for Care of the Dying Patient	100%

Results were shared with the Inpatient team so improvement could be made to care plans writing.

During the period, April 2023 - March 2024 four complaints were received.



94% of survey responders felt able to raise a concern or make a complaint if needed. 71% of survey responders knew how to raise a concern or make a complaint if needed. GHHC provides information on raising concerns and making complaints through an information leaflet that is provided to all service users upon entering the service. These leaflets are included in patient admission packs and there is information regarding raising concerns and making complaints distributed throughout the Hospice. Garden House Hospice Care encourages feedback both negative and positive from our service users with the aim of improving the service we provide.



“The Hospice has been an absolute saviour. I never actually thought I'd do any harm to myself, but I just went as down as you can get really.

“But I'm a million dollars better than I was just a few months ago. I can't get over how I feel about this place - it's just saved me, I know it has.”

Feedback from patients and families on services

Patient and family feedback is very important to Garden House Hospice Care. Feedback is received via surveys, comment cards, emails, letters, cards and social media posts and logged to enable teams to learn from service users' experiences. Below are some examples of feedback received during 2023/2024.

Medical attention and support. A chance to talk about concerns and worries with experienced staff. Equipment suitable for easy access.

Access to professional help is very good so I always felt the support was there when I needed it.

The flexible time-table - no rush atmosphere. The relaxed comfortable ambience, approachability and friendliness of staff. Of particular benefit - having all staff under one roof - able to access medical/OT/ Physio etc.

There has always been a member of staff to talk to if I needed to. They always make themselves available, despite being busy. I have never felt rushed. This includes all staff including the Volunteers.

Just having the time with the counsellor when I could discuss and problems and issues, whether during childhood or more recent, has proved very beneficial for me.

The most positive thing with counselling was and still is dealing with life and learning to live and do things different now and to enjoy living. I am very grateful for the help I have received, after the death of my husband.

Have found the place and staff exceptional. Nothing was too much for staff and has made my stay very good.

Being able to talk to someone about all my problems and receiving useful answers. In particular spending time with Rehab & Wellbeing has been very useful and she was very understanding. The information sessions were also very useful. The exercises were an appropriate level for me.

Very limited food items in the vending machine at weekends.

Some background music perhaps as it is very quiet.

More rooms with en-suite maybe

In April 2020, NHS England changed the Friends and Family Test question. Garden House Hospice Care amended all surveys and comment cards to reflect this change. The following table is a collation of all surveys and comment cards received during 2023/2024 containing this question:

Thinking about Garden House Hospice Care, overall how was your experience of the service?

	2022/2023	2023/2024
Very Good	89.5%	91.2%
Good	9.6%	8.8%
Neither Good nor Poor	0.9%	0%
Poor	0%	0%
Very Poor	0%	0%
Don't know	0%	0%

2023/2024 percentages calculated from 148 responses to the Friends and Family Test question on real time patient surveys, Family Support surveys, comment cards and the Family, Friends and Carers Questionnaire.

External statements

Hertfordshire and West Essex Integrated Care Board



NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) response to the Quality Account of Garden House Hospice Care for 2023/2024.

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) welcomes the opportunity to provide this statement on the Garden House Hospice Care's Quality Account for 2023/24. The ICB would like to thank Garden House Hospice Care for preparing this Quality Account, developing future quality priorities, and acknowledging the importance of quality at a time when they continue to deliver services during ongoing challenging periods. We recognise the dedication, commitment and resilience of staff, and we would like to thank them for this.

HWE ICB is responsible for the commissioning of health services from Garden House Hospice Care. During the year the ICB has been working closely with Garden House Hospice Care in gaining assurance on the quality of care provided to ensure it is safe, effective, and delivers a positive patient experience. In line with the NHS (Quality Accounts) Regulations 2011 and the Amended Regulations 2017, the information contained within the Quality Account has been reviewed and checked against data sources, where this is available, and confirm this to be accurate and fairly interpreted to the best of our knowledge.

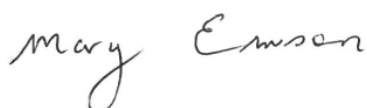
When reviewing the progress highlighted against priorities that were set out for 2023/24 clear improvements are evidenced, notably the introduction of a Frailty Service and the development of a new care model to address health inequalities in accessing palliative care services and providing support to people with non-cancer life-limiting conditions. The ICB acknowledges the significant increase in patient contacts within the community and reduced waiting times, resulting from the provision of essential equipment and introduction of mobile working for the community team. The review of demand and capacity, including the improvement of working practices to boost productivity and streamline clinical service pathways is commended.

The ICB is pleased to note the establishment of a work force group across all areas and the focus on reviewing recruitment and retention models to strengthen resilience. The ICB commends the establishment of a staff forum to empower and encourage collaborative working, along with providing training for Freedom to Speak Up Guardians (FTSU) to raise awareness across the organisation.

The ICB would like to recognise Garden House Hospice Care for their ongoing work related to the implementation of the Patient Safety Incident Response Framework (PSIRF) which sets out how the NHS responds to patient safety incidents for the purpose of learning, improving patient

safety and outcomes for our population. The ICB looks forward to working in partnership and across the system as we collectively take forward PSIRF in 2024/25.

During the year the ICB have been working closely with Garden House Hospice Care gaining regular assurance on the quality and safety of provision to ensure a positive patient experience. Looking forward to 2024/25, the ICB supports Garden House Hospice Care's quality priorities, and we look forward to a continued collaborative working relationship, including through building on existing successes and collectively taking forward needed improvements to deliver high-quality services for this year and thereafter.



Mary Emson
Deputy Director of Nursing

Dr Jane Halpin, Chief Executive Rt.

Hon. Paul Burstow, Chair



Healthwatch Hertfordshire



Healthwatch Hertfordshire values the relationship it has with Garden House Hospice Care and supports the quality priorities to improve services for patients outlined in this Quality Account.



Neil Tester, Chair Healthwatch Hertfordshire, June 2024

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