



Mission Statement

Bolton Hospice is a centre of excellence, working in collaboration with others, to provide specialist palliative care to patients with progressive disease in Bolton.

Chief Executive's Statement

These Accounts are prepared to report on the qualitative aspects of the services and care delivered by Bolton Hospice in compliance with the Health Act 2009.

The Hospice is an independent charity (registered number 518704) and is constituted as a company limited by guarantee (registered number 02114925). The charity is run by a Board of Trustees. The Trustees are Directors of the Company.

Bolton Hospice makes no charge to its patients or their families and carers. 34% of the £3m needed to run the charity is provided by the Bolton Primary Care Trust, the remaining 66% is provided through fundraising, a lottery, a retail operation and through voluntary donations from individual members of the public and local businesses. The charity, through its Trustees, is directly answerable to its membership, who are members of the local community we serve.

The Hospice is also answerable to the public as, if they find fault or are not satisfied with the services we deliver or the actions we take, they are under no obligation to continue to fund the Hospice.

It is a fundamental tenet of the provision of Hospice care that the services are delivered to a high standard. The public, as the main contributors of funds, do so in the expectation that those members of their community who require the Hospice's services will receive high quality care.

The Trustees and Managers of Bolton Hospice believe that the quality of our services is not an adjunct to the delivery of these services; it is an integral part of the work of all our staff and volunteers. Ensuring the quality of our work should be part of the ethos of all staff and volunteers. It is not a top down, imposed management programme. However, this does not mean that there is no room for improvement, nor does it negate the requirement of Hospices to be open and transparent about all aspects of the charity's work and this includes qualitative assessment of performance.

The quality of services delivered by Bolton Hospice is considered by the Trustees and Managers to be safe and delivered to a high standard but improving delivery of care is as much a matter for front line staff as it is for the Senior Managers' Group and the Board of Trustees. Trustees and Managers therefore foster a culture of staff and volunteers taking ownership of the services they provide.

The challenge in presenting Quality Accounts is to prove the quality of our services, to describe the ongoing measures we are taking to further improve what we do and to identify some specific measures against which we have set targets and which we can measure year on year. However, the qualitative elements of the service are not easy to separate into easily measurable units. The measures chosen therefore are limited in describing and assessing the quality of our service. The Hospice will continue to develop systems to capture qualitative information which will support future Quality Accounts and will not divert resources away from the delivery of care to the collection of data.

The Board of Trustees and the Senior Managers' Group are committed to the delivery of a high quality service to our patients and their families and friends. We also believe that there is always room for improvement. We must never become complacent.

These accounts will identify measureable areas of quality, which are essential to the provision of a high standard of care. They will evolve rapidly over the ensuing years.

Margaret Evans
Chief Executive

WHAT OUR ORGANISATION IS DOING WELL

Patient Safety

- ✱ Of the 5441 bed days and attendances across In-Patients and Bolton Hospice Support Services there were 40 incidents of falls during 2010-2011 of which, 31 suffered no injury, 9 resulted in a minor injury and we had no serious injuries. These results prompted a review of our Falls Assessment Tool, the purchase of 4 beds that can be lowered to the floor and provision of pressure sensor pads.
- ✱ Our multi-professional Nutritional Group have implemented a Nutritional Assessment Tool for all patients, improved recording of nutrition and hydration intake and introduced protected meal times and the role of the Meal Co-ordinator.
- ✱ Our Pharmacy area has been fully fitted with lockable metal cupboards and we now have increased space to store and prepare medication.
- ✱ We report risks and incidents within a no blame culture and have recently re-designed our reporting form to allow us to identify trends electronically, making it more efficient and effective.
- ✱ In response to a National Patient Safety Alert we changed over to McKinley T34 Syringe Drivers.

Clinical Effectiveness

- ✱ The majority of our clinical staff are trained in Enhanced Communication Skills, Advanced Care Planning and the use of the Liverpool Care Pathway for the Dying.
- ✱ We now provide a nurse led Lymphoedema Service for palliative care patients in Bolton, who are known to the Hospice.
- ✱ Implementation of the Grief and Wellbeing forms allow us to address patients' and carer's spirituality and bereavement needs.
- ✱ The Liverpool Care Pathway for the dying was implemented on 97% of patients receiving EoLC within the In-patient unit. All Clinical Staff have received training in this Pathway.
- ✱ Hospice at Home working collaboratively with District Nurses allowing patients to die in their preferred place of care.

Audit & Quality

- ✱ We undertook 22 audit projects and 11 surveys in 2010-2011, using both internal and external tools, allowing us to benchmark ourselves against other Hospices nationally. These audits and surveys explored a wide range of topics from infection control, management of medicines, satisfaction surveys, pressure ulcer occurrence to our documentation and clinical practices.
- ✱ Bolton Hospice submitted audit data to the National Minimum Data Set for specialist palliative care. Results are available publically from the National Council for Palliative Care; <http://www.ncpc.org.uk/publication/index.html>.

OTHER PATIENTS' SAFETY DATA

Total Number of Drug Errors <i>(this figure is broken down as below)</i>	20
- Near Misses	7
- Prescribing Error	4
- Omissions	3
- Administration	1
- Dispensing Error	2
- Stock Delivery	3
Number of controlled drug errors	3
Number of pressure ulcer occurrence	18
Number of complaints	1
Number of patients infected with MRSA whilst on the Inpatient Unit	0
Number of patients C.Difficile whilst on the Inpatient Unit	0

Letter received from a relative following an Inpatient Stay – July 2011

I have been inspired by this exemplary care. May I thank everyone for their kindness and compassion. I know my whole family have been quite humbled by the experience.

Patients' and Family Experience

- ✿ We undertake a yearly patient satisfaction survey for all Hospice services.
- ✿ We survey the bereaved about the care that was given to them and their relative at the end of life.

Extracts from letters received

You covered every aspect of care, not only to our loved one, you gave such kindness and care to us, the relatives.

As a family, none of us have anything but praise for everyone who was concerned with our mum's care.

We felt very special and you always had time for us.

We were very impressed with the standard of care we received. My dad was made comfortable and the support both he and I received was immense.

He had 12 days with you and I am so glad he had his final days with you. You were all just fantastic. He passed with his family around and I will remember his final days with fondness.

My heartfelt thanks for all the medical attention, care and love shown to my daughter-in-law. Words cannot express how much we appreciate all you did for her. Thank you again.

It is with great gratitude that we would like to give a sincere thank you for all the care given. Also the support received from staff who always had a smile and a kind word when they knew we were struggling with the situation.

He and his family knew that he was in safe hands and getting the best possible care. Thanks very much for all your help – it's very much appreciated.

From start to finish, it was 100%.

Everyone at the Hospice showed human kindness, which is so very rare these days.

WHERE IMPROVEMENTS IN SERVICE QUALITY ARE REQUIRED

Bolton Hospice is registered with the Care Quality Commission and can be inspected at any time. Two Provider Visits also take place within the year, undertaken by members of the Board of Trustees and an Action Plan formulated. We continually forward evidence of compliance with the Essential Standards of Quality and Safety to our Inspector and this is placed on Bolton Hospice's Quality and Risk Profile (QRP).

Management and staff have been instrumental in reviewing all the data available to them on the quality of care provided in its services and it intends to pursue the following key findings to further enhance the quality of our services:

Patient Safety

- ✱ Due to the increase in use of intravenous therapies, all infusions should be given via an electronic pump.
- ✱ Implementation of hourly rounding will enhance patient observation and is proven to reduce falls and pressure ulcer occurrence.
- ✱ All staff will undertake training in Information Governance.

Clinical Effectiveness

- ✱ Following a complaint, privacy, dignity and compassion is now included within induction programmes.
- ✱ As a result of audits which have been undertaken this year, we are looking to improve the recording of patients' wishes regarding their preferred place of care.
- ✱ We need to ensure we have a workforce skilled in the care of patients with non-malignant disease.
- ✱ We shall continue to promote professional and public awareness of all Bolton Hospice Support Services.

Patients' and Families Experience

- ✱ Following feedback from Day Therapy patients, a 'drop-in' day was introduced, which offers a more flexible approach.
- ✱ New patient's guides have been produced for each service, which include information about how to make a complaint.
- ✱ Following feedback from bereaved relatives, we have conducted a noise survey on the In-patient unit.
- ✱ We continue to conduct an annual Patient Satisfaction Survey

OUR PRIORITIES FOR 2011-2012

We have an ongoing commitment to prioritise patient safety, clinical effectiveness and enhance patients' experiences over the next year. In this section we will describe the key developments we intend to work towards.

We will monitor our achievements in respect of the following priorities by reporting progress through the Quality and Standards Group, Clinical Governance, Audit and Quality and ultimately through the Board of Trustees.

Patient Safety

Quality Measurement

Benchmark percentage of falls, pressure ulcer occurrence and medication incidents with other Hospices to identify learning and share best practices.

Data collected quarterly

Increase out of hours security and caretaking cover to 24/7 52 weeks a year.

Re-survey staff

All intravenous fluids will be administered via electronic pump

Pumps purchased and all staff trained

Clinical Effectiveness

Quality Measurement

Conduct a review of where we are in relation to our 5 year Strategic Plan

Produce report for Board of Trustees

Increase number of patients referred to services with non-malignant disease

% of people referred

Work collaboratively with District Nurses, General Practitioners and Allied Health Professionals to allow patients to die in their place of choice

Collate data on PPC and place of death. Referral patterns to Hospice at Home Services.

Ensure patients and those significant to them have their spiritual and bereavement needs met.

Audit use of grief and well being forms and feedback from End of Life Care Survey. Utilise Quality Markers for End of Life Care

Patients' and Families' Experience

Quality Measurement

To develop a focus group to explore how we can engage with patients and their families, staff and the public when further developing our services.

Establishment of Group.

To promote our concerns, compliments and suggestions leaflets to all service users

Patient Satisfaction Survey

Chairman's Statement

I have great pleasure to endorse the Quality Accounts for Bolton Hospice for 2011/2012. It will be evident to all our patients, their families and carers that Quality is at the centre of everything that we do and the Board of Trustees has a commitment to ensure that the highest standard of palliative care is delivered to those in need of our services.

This commitment encompasses Corporate and Clinical Governance.


In Corporate Governance, the Board ensure that systems and processes are in place to maintain our growth as a viable organisation and that our income streams are assured because without these funds, we could not continue with the level of care required by our patients. Clinical Governance is critical to ensure that our services are of the highest possible standard as confirmed in our Mission Statement.

Whilst Clinical targets are an important element in the service we provide, it is the human service that is such an integral part of our mission, particularly ensuring that patients are treated with respect, compassion and dignity. During 2011 we refurbished the Day Therapy Unit to bring it up to a very high standard and renamed it Bolton Hospice Support Services to more accurately reflect the services we intend to supply.

Elsewhere in the Quality Accounts are extracts from the letters we have received from patients and families. These are typical testaments to what we do at Bolton Hospice and as Chairman of the Board of Trustees, I pledge our commitment to continue to build improved quality based on the feedback we receive from patients, families and carers.

Graham Yardley
Chairman

Letter from a daughter following an inpatient stay



Thank you so much for looking after my mum so well. I would like to thank all the staff for their incredible kindness and patients. Nothing ever seemed to be too much trouble.