

Macmillan Quality Environment Mark ® (MQEM)

Assessment Report

Reference number N135

Assessment date 18th January 2018

Facility assessed Bolton Hospice

Queens Park Street Off Chorley New Rd

Bolton BL1 4QT

Services Provided In-Patient and Day Patient Services

Introduction

The assessment process has two key parts: local self-assessment followed by external review. First, each organisation assesses its own performance against the Macmillan Quality Environment Mark ® (MQEM). An external review team then further assesses performance, both by considering the self-assessment findings and visiting the organisation to validate this information and discuss related issues.

On receiving the MQEM tool, each organisation assesses its own performance using a framework produced by Macmillan. This framework includes guidance about the type of evidence required to allow a proper assessment of performance against the tool to be made.

The organisation gathers data to support this self-assessment exercise and makes it available to the external review team during their on-site visit.

The external review team visits and speaks with local stakeholders (e.g. staff, volunteers and carers) about the environment and services provided. Review teams include both an experienced assessor and a volunteer assessor who is always a person affected by cancer. All reviewers are trained. Each review team is led by an experienced reviewer, who is responsible for guiding the team in its work and ensuring that team members are in agreement about the assessment reached.

The composition of each team varies, and members have no connection with the organisation they are reviewing. Both of these factors ensure consistency and that each review team assesses performance against the MQEM tool rather than make comparisons between one organisation and another.

At the start of the on-site visit, the assessment team meets key personnel. The assessors then inspect the facility and assess overall performance against the MQEM tool. The visit concludes with the team providing feedback on its findings to the organisation.

The comments and findings of the assessment recorded in this report reflect the opinions of the assessor(s) based on the evidence provided by the organisation in relation to the requirements contained in the relevant Macmillan Quality Environment Mark ® (MQEM) standards. The comments should therefore not be read as approval or comment in any other context. This report presents findings and recommendations pertaining to the physical environment in which people with cancer access information, support and treatment, and does not comment on the quality of service provided, clinical practice or the behaviour of any service provider.

Information about the facility

Bolton Hospice first opened in March 1992 and provides both inpatient and outpatient facilities to people within the borough of Bolton. The hospice building is located about a mile from the centre of Bolton and is well known and supported by the local community.

The inpatient unit includes 18 private en-suite bedrooms, all with direct access to the Garden of Tranquillity. Outpatient facilities are located in the Bolton Hospice Support Services (BHSS) section of the building. This includes a day therapy lounge and dedicated areas for clinic appointments, treatment rooms, complementary therapy rooms, a hairdressing salon and a creative therapy area.

The hospice benefits from a multi-faith centre including ablution rooms and a prayer and reflection room which can be used by patients, visitors and staff.

An in-house catering team prepares and serves traditional home-made food, using good quality fresh ingredients sourced locally.

A consultant-led team of doctors, nurses and other professional staff provide expert care within the hospice itself. There is planned day therapy for patients on four days a week, from Tuesday to Friday and consultant-led outpatient clinics are held at the hospice every week. Day therapy offers a range of services to patients including:

- A period of assessment and therapy provided by the hospice team, which includes giving carers at home some time to themselves.
- The opportunity to meet other people, get to know the hospice team and ask advice.
- Fresh approaches to care and support, for example through complementary therapies.
- An opportunity for patients to talk about their illness and how it is affecting them and their families.
- Weekly nursing review and monitoring of ongoing symptoms

In addition, patients are able to access occupational therapy and physiotherapy services, social services, creative and complementary therapies.

The inpatient unit has a 76% occupancy level and the average length of stay is sixteen days.

Working with district nurses, GPs and Macmillan nurses the hospice also provides a care at home service to help those with specialist palliative and end of life care.

Families and carers are well provided for with the hospice offering 24-hour advice for patients, carers and healthcare professionals on palliative and end of life care issues. Bereavement support is also offered.

In total the hospice employs 132 staff and they are supported by a team of over 700 volunteers providing a range of invaluable services such as help with meals and refreshments, meet and greet, driving, gardening and flower arranging to working in the hospice's network of shops.

The top floor of the hospice building is a dedicated staff area and includes offices, break facilities and an education and training suite. The training suite is used to support others to provide excellent patient centred palliative and end of life care to the people of Bolton and the wider communities. Training courses are designed to meet the needs of a variety of practitioners, and those with a keen interest in palliative and end of life care or bereavement.

Bolton Hospice owns and manages the buildings from which services are provided and has a service level agreement with Bolton NHS Foundation Trust for estates support.

Adjacent to the hospice building is Giles House which is the main administrative hub of the hospice. Also, included within Giles House is a Macmillan Cancer Information and Support

Centre which achieved the MQEM award in 2017. Staff from the Macmillan centre provide information and support for patients, carers and families.

Assessment judgements

Within the MQEM there are five core principles of quality which are applied to four different domains. Contained within the domains are a number of indicators which facilities are assessed against.

Assessment levels: 5 is Excellent, 4 is Very good, 3 is Reasonable or Average, 2 is Poor, and 1 is Very poor

Level 4 is the level that facilities need to achieve overall to attain the MQEM.

Bolton Hospice has achieved level 5 overall and achieved the levels below in each of the individual domains.

Design and use of space 5
The user's journey 5
Service experience 5
The user's voice 5

Main findings

Bolton Hospice achieved an overall score of 5 (excellent) in this, its first MQEM assessment. Staff are to be congratulated on exceeding the level required to attain the Macmillan Quality Environment Mark ®. This is particularly impressive given that Bolton Hospice is the first hospice in the UK to be assessed against the MQEM standards.

The facility and its staff are to be thanked for participating in the assessment process and for providing the review team with a comprehensive overview of the facility and services provided. A robust and accurate self-assessment had been completed in advance of the visit which was supplemented by a well-constructed evidence portfolio. It was clear from discussions with staff that the facility is committed to providing the highest quality care for its patients within a welcoming and safe environment. This care extends to families and carers and it was clear from the assessment visit that the hospice is providing family centred care in an environment that facilitates this.

Bolton Hospice is located close to Bolton town centre and has good access to roads and public transport networks. The hospice site is easy to find thanks to good signposting within the local area and clear wayfinding guidance on the hospice's dedicated website. Visitors and patients arriving by car have access to a large car park which is located close to the building entrance and drop off zones provides immediate access to the facility's two entrances; one of which serves the inpatient unit and the other the Bolton Hospice Support Services (BHSS) section. Patients have the option of being collected by the hospice's team of volunteer drivers. Once at the entrances to the building automatic doors provide easy access for all.

On arrival patients and visitors receive a warm welcome from volunteers and will be accompanied to the relevant area of the building.

The facility is split into two halves with one side providing inpatient care and the other day patient care. Within the inpatient area staff have gone to great lengths to provide a "home from home" environment and patients are encouraged to bring photographs, etc. from home

to personalise their space. The inpatient rooms provide a calming environment and patients have full control over their lighting and temperature. All rooms have large patio doors which allow patients to enjoy the views over the lovely gardens. The doors enable patients to access the gardens directly from their rooms and are large enough to allow a bed or chair to be wheeled out.

En-suite bathrooms provide patients with privacy and there is ample space to store personal belongings. Patients' relatives have access to overnight facilities and a comfortable lounge. Every need seems to have been considered in designing a space that allows patients and their families to be together during palliative and end of life care.

Furniture throughout the inpatient unit is comfortable and is adjustable by patients. The inpatient environment looked clean, fresh and well maintained throughout.

Patients and visitors also have access to a well thought out multi-faith suite which includes facilities for ablutions. It has a calm and peaceful ambiance and is well used by those visiting and using the hospice. A Spiritual Care team visits the inpatient unit and BHSS regularly, however patients and visitors can also contact the team by asking a nurse or volunteer to arrange a visit, which can also be at home.

A day therapy lounge and outpatient facilities are located in the adjoining BHSS building and this includes dedicated areas for clinic appointments, treatment rooms, complementary therapy rooms, a hairdressing salon and a creative therapy area.

The day patient area also provides a comfortable, homely environment and as with the inpatient area patients has wonderful views of the gardens. Many activities take place within the day lounge and there also bespoke rooms for complementary therapies and physiotherapy and occupational therapy activities.

The hospice has a dedicated Creative Therapist who tailors activities to each individual patient and supports them in expressing themselves through creative therapy. Patients can express their memories and stories in art which has enabled many to create a lasting gift for families and friends. Much of the artwork that is displayed in the hospice was therefore created by patients. This is varied and interesting to look at and as such offers a wonderful distraction; staff reported that they had received positive feedback from patients and visitors alike.

Storage throughout the hospice is good and the dedicated cleaning team ensure that all areas are kept tidy. Privacy and dignity is assured throughout all areas of the hospice.

Staff accommodation has been well considered and occupies the top floor of the building. Staff have access to an education suite as well as an impressive amount of administrative space. A large multidisciplinary team supported by volunteers ensures that the needs of patients and their relatives are met. Staff work hard to raise awareness of the hospice in the local community and aim to provide the best possible service for their patients, relatives and carers.

A comfortable environment has been created throughout Bolton Hospice and staff were able to provide anecdotal feedback from patients evidencing the value they place on the environment. This was supported by more formal feedback including surveys, thank you cards and compliments.

Recommendations have been made within the body of this report which highlight those areas in which the hospice can make improvements. These are very minor and the main recommendation arising from the assessment is that staff and volunteers should continue in their efforts to provide a range of innovative and excellent services. This should be done with on-going user consultation and feedback particularly when service or environmental changes are being considered.

The facility is to be congratulated on achieving the Macmillan Quality Environment Mark.

Comments and recommendations for future improvements

Domain one (Design and Use of Space) relates to the design and use of space in the facility, and considers how far it underpins the principles outlined in the Quality Environment Mark.

1	Design and use of space			
1.3	Comfort & well-being	Scoring Indicator	Score	Comments
1.3.7	Artwork is used in the facility, including treatment areas.	Artwork is used throughout the facility and selected with the comfort of users in mind. Artwork, rather than medical/information posters are the main visual focus.	4	Artwork is displayed throughout the facility and much of this was created by patients. The approach to artwork within the facility is impressive and sessions led by a Creative Therapist are regularly held for patients, families and carers, allowing them to create their own pieces. Participants have responded positively to these sessions with family members in particular appreciating the lasting memories that are created.
				As discussed at assessment staff may wish to consider ceiling art (e.g. picture light boxes) in some of the inpatient bedrooms. The assessment team had seen these at a palliative care unit in the North of Scotland and they had been very well received by patients.
1.3.9	People using the facility have access to attractive and well-maintained outdoor, natural spaces, which contribute to their sense of comfort and well-being.	The facility has dedicated, natural, outdoor space, which has been designed with input from users and which promotes their comfort and well-being. This space is attractive and well-maintained, and can be used throughout the year.	5	Given its location in a built up area of Bolton it was both surprising and pleasing to find that the hospice benefits from its own dedicated gardens. These can be accessed directly from inpatient rooms and from the BHSS section of the hospice. The gardens have been sensitively designed and large patio doors in the inpatient bedrooms allow beds to be moved outside. The gardens can be used year round and are well maintained. Given the time of year that the assessors visited patio slabs looked a little green. Staff would be advised to consider the frequency at which these are cleaned to ensure that there are no slipping hazards at any time of the year.
1.4	Choice & control	Scoring Indicator	Score	Comments
1.4.4	Inpatients can personalise some aspect of the area around their bed.		4	All inpatients are invited to personalise their bedrooms and each room includes a noticeboard to post photographs, cards, pictures, etc. Patients are generally advised on admission that they can personalise their rooms and consideration could be given to including information on this in the preadmission pack or on the hospice website.

				The assessment team had recently visited a palliative care unit that had created an art wall in the patient lounge. This contained a range of donated pieces as well as art created by patients and family. Patients were able to select pieces from the wall to display in their own room. This could be considered by the hospice.
1.4.6	to secure storage for	All in-patients have access to secure storage, which is more than sufficient for their needs.	5	All inpatient rooms have access to secure storage. The assessors noted that in the recently refurbished rooms there were no wardrobes. Whilst there were coat hooks these may not provide sufficient hanging space for clothes. Staff would be advised to consult with patients on whether they would welcome the inclusion of wardrobes in these rooms.

Domain two (The User's Journey) relates to the design and use of space in the facility, and considers how far it underpins the principles outlined in the Quality Environment Mark.

2	The user's journey			
2.1	Accessibility	Scoring Indicator	Score	Comments
2.1.7	It is easy for users to find their way around the facility themselves.	Decisions about signposting have been made with input from users. There may be some use of floor markings. Signage is not overused, and does not rely on words, so it is not difficult for people with literacy difficulties or English for Speakers of Other Languages (ESOL) to use.	5	Signposting throughout the hospice is good and does not rely solely on the written word. As discussed at assessment the signposting within the BHSS section of the building is quite functional and is somewhat at odds with the homely nature of the rest of the building. Staff may wish consider the signs could be made by patients in art therapy sessions.

Domain three (Service Experience) relates to how far the services delivered in the facility reflect the key principles which underpin the Macmillan Quality Environment Mark.

3	The service experience	The service experience			
3.1	Accessibility	Scoring Indicator	Score	Comments	
3.1.1	Users know how they can contact the service and/or make contact with staff.	written information about how	5	The centre has developed a bespoke information pack including information on services provided, contact information, etc. This is currently provided in English only however staff reported that it could be translated into other languages on request. Staff may wish to include a brief statement within the information pack in the relevant local minority languages to advise that information can be provided in other languages. As patients are involved in the developing the information pack this is something that they could be usefully consulted on.	

Domain four (The User's Voice) considers how far the facility in question has sound processes in place for listening to user voices, and uses these to inform the design and management of their facility as part of a process of continuing improvement.

There are no recommendation arising for Domain 4.