

Item 6 Tabled – further info from St Joseph’s

Dear Jarlath

I am aware that the councillors will only look at and comment on the quality account I submitted last month. Since then I have feedback from the Quality lead at Newham CCG on behalf of our Commissioners in Newham, Waltham Forrest, City and Hackney and Tower Hamlets requesting more information around our work to improve access for patients from ethnic minorities, more results from ‘I want great care’ and the staff survey. They also suggested the report may be brought to life with more photographs. I have attached the update report.

I am not sure any of this is of any value to you but I just wanted to keep you informed. I hope that we will meet in person on Thursday

Best wishes

Jane

The changes are as follows

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Our ambition over the past few years has been to increase the number of individuals from BAME background, in 2017 we completed some focused work looking at BAME communities understanding and expectations of palliative care and the hospice. Since 2016/17 we have increased the number of BAME individuals accessing hospice services by 13% more than 50% of individuals accessing our community palliative care team and day hospice identify themselves as having a BAME ethnicity.

We are aware that many of our patients have children or grandchildren who are impacted by their illness and while our therapies and counselling team offer support to families and children we are aware that many children cope well when supported by the adults who are familiar to them, however research strongly indicates better outcomes for children who have been able to prepare for the death of a parent or family member. Feedback from our patients and families indicated they struggled to talk with their children about their diagnosis, treatment and preparation for end of life care.

In July 2018, we launched the Elephant Box. This is a pre-bereavement kit, specifically designed in collaboration with the Fruit Fly Collective, to support children, where a family member or other significant person is receiving end of life care at the hospice.

The boxes include information, activities and resources, which enable patients and their families to engage with and speak to their children about their diagnosis, treatment and preparation for end of life at the hospice.

Over the six months, following the launch 21 bespoke, age sensitive boxes have been provided to 34 children aged between 2 and 15. The feedback received from children and their families on the design and usability of the boxes has been universally positive. Further evaluation of the use of the boxes in under way and a “first birthday party”, to promote them further, is being planned for the school holidays.

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There were results to celebrate 93% of respondents are proud to say they work for St. Joseph’s hospice and 89% hope to be working for the hospice in a year’s time. Line managers are regarded as engaging, in that line managers at St Joseph’s are helping to foster engagement amongst their staff:-

- by making clear how their team supports the organisation’s goals and objectives,
- allowing their employees to make their own decisions as far as possible,

- building challenge / stretch into the roles of their employees and
- giving feedback that helps their employees to improve their performance.
- Line managers at St Joseph's also appear to excel at recognising efforts and achievements.
- Changes to the Senior Management Team roles and incumbents do impact this survey with many respondents in workshops considering that the new team is a positive change for the hospice, however staff want to see the new team bed in and continue with their strategic plans.
- Staff have welcomed a new staff handbook and associated policies and procedures. A new appraisal process is being launched which has been welcomed in feedback statements such as *"thanks this is much better for me and my team"* and *"I think this a much better idea. It spaces it out throughout the year and then new starters it is easier to manage going forward in-line with their Anniversary date."* Training to support managers and their staff in conducting appraisals and getting the most out of their appraisal is being promoted.
- New and more rigorous induction programme is in place and monitoring of statutory and mandatory training is carried out by the senior management team as is monitoring of the new training plan and training matrix. There is also a new human resources plan, which helps to identify areas of potential turn over and those for development for promotion.
- Recruitment is being reviewed in all aspects and strategic planning is being undertaken, Turnover is slightly lower than benchmark at 24% and is down from 31% last year.
- Equality and Diversity committee is being relaunched with a new vision. Sponsored by trustees, the committee will be considering equality and diversity both as an employer and as a provider of services in one of the most diverse areas of London. "

We also plan to re vamp our representative staff forum this year to give it a new focus and new work plan.

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In 2018/19, we collected 400 feedback forms from patients and relatives. The overall score was 4.91 out of 5, with anything over 4.9 being deemed exceptional.

In 2019/20, volunteers will assist patients to complete the forms. This will enable more patients to express their opinions and encourage them to be more open with their feedback.

A small example of our positive quotes

Namaste

- *'I was really impressed in the change over the sessions. Before Namaste she did not interact much but she became more interested and responded better to other people. A really wonderful service.'*

Complementary therapy

- *'Has taken my pain in the arm away. Wow! Very good. I can move my arm without pain. Thanks.'*

Physio/OT

- *'The care is fantastic and has made a real difference to my quality of life.'*

Lourdes ward

- *'The staff were attentive, informative and kind and showed my mum a lot of care. I felt safe leaving my mum here. I cannot fault anything.'*

St. Michael's ward

· *'The receptionist was absolutely fantastic. The staff from Admin, HCA, nurses, doctors, cleaners were absolutely wonderful. They showed compassion – caring, kind. You are all doing a fantastic job!'*
CPCT, Tower Hamlets

· *'Very understanding very helpful. Explained everything very good. I don't think there is anything to be improved. I was very happy with my first time nurse. She was very helpful.'*

And less positive

Lourdes ward

· 'There should be mirrors in the bathrooms and bed rooms'

Our response – when we refurbish Lourdes ward we made a decision not to put fixed mirrors in the patient rooms, many of our patients are distressed by their altered body image, portable mirrors are available. We have added information about this to our frequently asked questions booklet

St. Michael's ward

· 'It's sad the TV can only get a few channels'

Our response- we are aware that the televisions on ST Michael's ward are becoming obsolete and need replaces we have been able to purchase 6 new televisions and will replace them all when this ward is refurbished.

' There is no meal provision for families in the evening and weekends when the Restaurant is closed'

Our response- There was not enough customer to justify having the restaurant open in the evening or weekends, it was making a significant loss. We are fortunate that there is a wide range of restaurants and cafes directly across the road from the hospice, many of them will deliver and a supermarket less than 5 minute walk away, there is a microwave in the relatives kitchen so they can heat ready meals . We have added information about this to our frequently asked questions booklet.

In addition to this, Matron now does a monthly ward round on each ward. The purpose rounds is to focus is on safety and quality.

The areas examined include;

· Ward environment - bedrooms are observed for any hazards, evidence of any patient identifiable information apparent and general safety and security on the wards.

· Patient experience – matron speaks to a minimum of five patients and their families, seeking feedback on care, food, cleanliness, communication and if their information needs have been met.

· Quality and timeliness of patient assessments and care planning.

· Completion of the following infection prevention and control audits including hand hygiene, intravenous devices and urethral catheter management.

· A monthly report is produced with an Action Plan this is shared with the ward managers and teams and followed up the next month.

Summary of findings

Ward Environment

The wards were, on each occasion, found to be hazard free, tidy, clean and uncluttered. Matron has fed back to the Housekeeping teams if there is an individual issue and this is dealt with immediately. A report is filed; the team is responsive.

Documentation/Risk Assessments

The documentation and risk assessments for 5 identified patients.

For any patients who have acquired a new pressure ulcer in the hospice, care plans and assessments are reviewed and are discussed with the nurse caring for the patient on that day; any gaps are addressed at the time.

The documentation is of a high standard and has improved with the wound champions.

A 'deep dive' revealed that care plans, including the wound care plan, are closed at end of life, sometimes without all documentation being completed. A reminder has been added to the 'care' part of the EOL plan, to prompt staff to document wound care. The teams were reminded that all assessments must remain open and wound assessments be completed.

GDPR

All computers on the wards are checked to see if they have been logged off appropriately. If staff have remained logged on they are spoken to at the time. During the rounds no patient identifiable information has been found on screens. Reminders to log off have been added to the computers and discussed at team, ward managers and charge nurse meetings.

Doctors were found to leave MAR charts in the nurses station - these are now placed in a secure area.

Quality of care and patient experience

The quality of care and feedback from patients is consistently positive. Any issues that arise are feedback to individual teams, for example one patient stated the food was cold at breakfast. Hot trollies are now in use at this time and there has been no further concerns. Noise on the wards has been a concern early in the morning. This has been monitored this and reminded staff. Door closures have been slowed down to stop doors banging. One patient was disturbed by small children visiting late at night – visiting arrangements have been reviewed and new arrangements put in place. The night managers have been asked to support the ward nurses in speaking to any visitors who may be disturbing patients.

One patient on STM ward stated "*I can't put into words the difference this has made to me and my family incredible*". another on Lourdes Ward stated "*I cannot thank the teams for all they have done for A and our family. I am going to lose my daughter in a matter of hours and this is the darkest time of my life but everyone has been so kind and supportive. I have seen things a mother should never see but I will remember the kindness for always.*"

The monthly round also enables Matron to work closer with the teams, act as a role model and coach, build relationships, support staff, be more aware of the issues on the ward and the complexities of the patients; in all, be a presence on the wards leading to enhanced quality of patient care.

We continue to carry out in-depth questionnaires quarterly on specific issues such as food and ward cleanliness and staff attitudes.

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