



**Weston
Hospicecare**

End of year report 2022

Jackson-Barstow House, 28 Thornbury Road, Uphill, BS23 4YQ
westonhospicecare.org.uk
Registered Charity No. 900328



Hospice overview

For more than 30 years Weston Hospicecare has provided palliative care for individuals with life-limiting conditions. Our multi-disciplinary team provides physical, emotional and spiritual support to our patients, as well as their families and loved ones. We deliver treatment for not only patients with cancer but those with other conditions such as motor neurone disease, Parkinson's disease and all other life-limiting illnesses. Care is tailored to individual needs and can be delivered within the Hospice or the comfort of a patient's own home.

Our In-patient Unit consists of 10 beds and caters for patients with more complex care needs or at the end of their lives. Community nurse specialists provide care within our community, whilst working in tandem with our clinical team, general practitioners, consultants and other medical professionals to provide the most appropriate and efficient quality of care. Our Family Support Team support patients and their families through pre-bereavement and bereavement counselling, as well as a chaplaincy service for spiritual needs. Complementary Therapists within our well-being centre offer holistic therapies which work alongside traditional medical treatments to ease symptoms, stress and anxiety. Treatments are available to both patients and their families.

Community Nursing	2022	2021
Number of patients	737	909
Discharges	76	65
Deaths	345	333
% Patients who died in preferred place of care	88%	87%

Day Hospice	2022	2021
Number of patients	84	34
Attendance sessions	617	257
Complimentary therapy treatments	1141	535

Chaplaincy	2022	2021
Face to face contacts	1072	644
Total number of patients	185	197

Bereavement service	2022	2021
Face to face contacts	641	370
Total number of clients	274	201
Volunteer contacts	551	N/A

Companion services	2022	2021
New referrals	40	34
Volunteer contacts	953	774

In-Patient Unit	2022	2021
Admissions	144	175
Discharges	26	31
Deaths	107	125
Average length of stay in days	15.7	12.3
Average bed occupancy	67%	67%

HEADLINE IMPROVEMENTS 21/22

- Expand the service delivery of our young person's bereavement counselling via recruitment to a new post.
- Recruit a clinical educator onto our team to enhance the personal and professional development of our clinical staff.
- Enhance the inter-system connectivity of our patient management system.
- Undertook several quality improvement projects.
- Commenced the scoping of further clinical service delivery expansion.
- Upgraded some of our facilities for clinical staff, patients and their loved ones.

Our reach in the community



"It's really nice to be able to relax, and talk to others in the same boat, as friends and family don't always know how to talk to you, so to be able to relax etc and go home stress free is brilliant. Thank you all. Fab as always. Be lost without this service."

New members of the team 2022



Dr Adam Baker - Specialist Palliative Doctor

Adam has over 7 years clinical experience in A & E medicine at various sites including Exeter, Plymouth and New Zealand. His role incorporates time on the In-patient Unit; sharing ward rounds with our palliative consultant to speak with patients on a one-to-one basis. This enables continuity of care for our patients and the ability for them to develop a close relationship with their doctor. Adam also liaises weekly with Hospitals, Community Nurses and our multi-disciplinary team (our clinical teams) to discuss patients' frequently changing needs and medical requirements.

Adam will lead the progression of 3 key projects:

1. Ultrasound scanner – Adam will train and use the ultrasound scanner we are currently seeking funding for
2. Incorporating Pleural drains (surgical drain inserted through the chest wall and into pleural space to remove clinically undesired substances such as air, excess fluid and blood) and Ascetic drains (removes excess fluid from the tummy/abdomen) within the Hospice, eliminating the need for Hospital referral
3. Somerset End Of Life Clinical Trial – researching over a 2-year period whether patients should be hydrated or not at the end of their lives. The Hospice has never before had capacity to participate



Ruth Palmer - Complementary Therapist

Ruth qualified as a therapist 20 years ago and has 12 years experience as a complementary therapist working in palliative care. The main therapies she provides are: Reflexology, Aromatherapy massage, Indian head massage, facial treatments and manicure. Ruth provides vital complementary therapy to patients who are unable to attend the Hospice due to ill health, lack of transport or those concerned with Covid-19 transmission due to their reduced immune system, within the comfort of their own home. A 66% increase in complementary therapy treatments was evidenced within Ruth's first month at the Hospice.

"The Wellbeing is a lifeline. Had my nails done which may seem a small thing but to me it is everything a big thank you."



Clare Waddy – Clinical Educator

Registered general nurse (RGN) since 1998. Teaching qualification held since 2011. Worked in a variety of settings from NHS to private sector, clinical research trials, commercial medical device companies specialising in vascular access and infection control. She has been a clinical educator/clinical specialist for the past 10 years, covering hospitals in the South West and Wales, teaching 1000's of clinical staff. Clare:

- Attends external meetings and groups for collaboration, education and hospice representation. Groups include: North Somerset Healthy Workplace Initiative, Somerset End of Life Care Education Group, South West Palliative Education Group, Bristol, North Somerset and South Gloucestershire Integrated Care Board and Dorothy House Hospice
- She has enhanced internal and external training such as; reviewing and updating syringe pump presentation, competency framework and practice documents, to be in line with new Somerset Foundation Trust documentation
- Organises weekly HELP sessions. External speakers include: Sirona Respiratory Lead, Benefits Advisor from Macmillan and Lone Worker Safety Training.
- Will be supporting our Hospice consultant with Chelsea II research study (Somerset End of Life Clinical Trial) and ensuring all staff complete training with the National Institute for Health and Care Research



Kirsty Radstock - Children and Young Persons Counselling Co-ordinator

In May 2022, Kirsty Radstock joined the Family Services Team at Weston Hospice Care as a P/T (16 hours per week) Children and Young Persons Counselling Co-ordinator. Kirsty is superbly qualified to provide children and young persons counselling having attained a BSc and FdSc in counselling and counselling/psychotherapy, respectively. Kirsty has:

- Delivered 39 counselling hours to 9 children, which averages approx. 4 hours each, within the first 5 months
- Developed a bereavement training package to be delivered to schools, education groups, youth organisations & other local charities working with young children.
- Created a draft youth transition pathway in partnership with Children's Hospice South West (CHSW). At present, 38 children and young people could benefit from this service; enabling children with life limiting conditions to transition from CHSW to Weston Hospicecare (an adult setting)

Bereavement counselling units



Our new counselling units are nearing completion with the flooring going down in December and will be operational in January 2023.

OUTCOMES:

- Provide a safe, secure, confidential, and non-judgemental counselling environment
- A much larger physical space facilitating family or group counselling and support
- Additional capacity and operational resilience to provide more counselling and spiritual support sessions, unencumbered by restrictions or usage by other departments
- Provision to offer remote counselling online
- A better and more tranquil setting for a counselling room than the existing facility
- Landscaped space which incorporates activities suitable for specialised bereavement counselling for children and younger individuals which we cannot provide at present
- Increase in capacity of 15%-30% of people we can support through new facilities

The independent unit will also provide hub resources, supporting the roll out of new community services in 2023 which include:

- ✓ Supporting bereaved children throughout North Somerset via school & training
- ✓ Young people beginning the transitional journey from Children's Hospice South West to our adult setting hospice
- ✓ Clinical palliative education services in North Somerset to care homes, GP's, Community Nurses etc

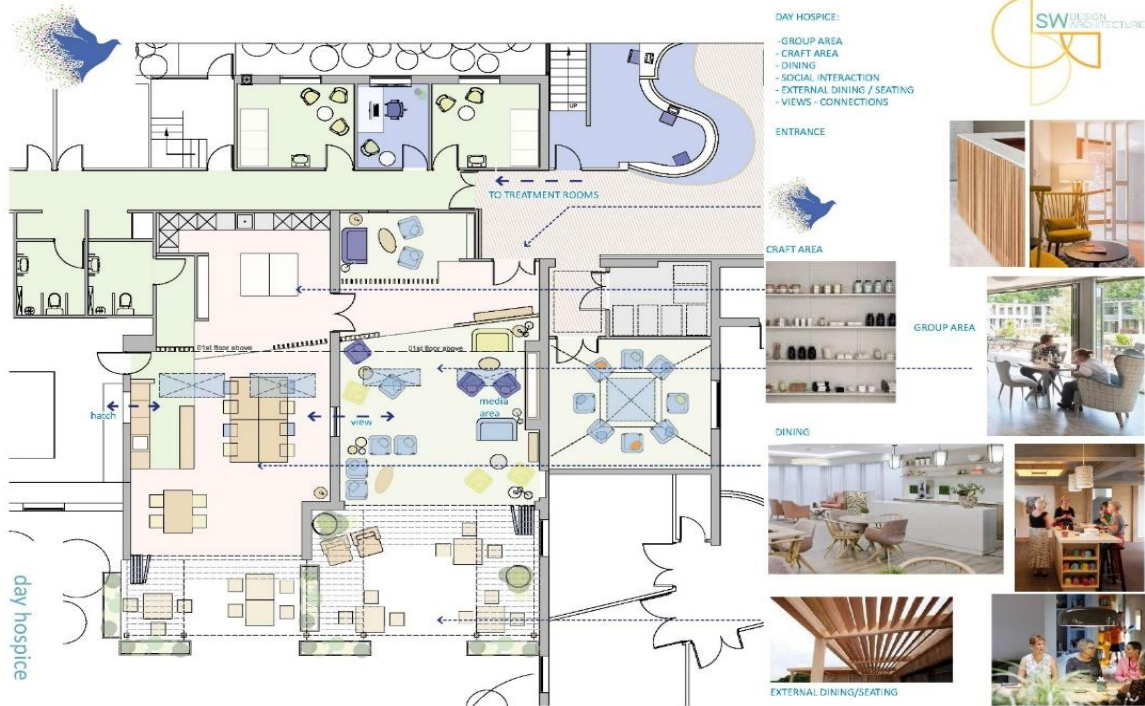
Therapeutic garden update

The therapeutic garden has experienced delays owing to availability of trades, services and materials however the project is on track to start week commencing 23rd January 2023 and complete within 2-3 weeks. Outcomes will include:

- Provide accessibility directly to the garden from In Patient Unit (IPU), where currently none exists.
- Introduce accessibility wide enough to facilitate bed bound patients and the appropriate mobility infrastructure (ramps etc) for beds and mobility aids
- Provide therapeutic benefits to enhance wellbeing, cognitive function, sensory stimulus and promote positive emotional and spiritual welfare
- Provide a natural environment, easily monitorable by clinical staff, safe and secure for less mobile or vulnerable patients, and those with cognitive impairments or memory loss
- A private, tranquil and easily accessible environment for patients and their families to engage with nature and one another, especially important for those enduring life limiting conditions or on the end-of-life pathway
- Introduce a sheltered area so the garden can be used all year round, 24/7 if required, particularly to accommodate end of life patients last wishes
- Whilst the focus for our project is patient and relative wellbeing, the therapeutic and stress relief benefits of sensory gardens are proven. They will also provide an important retreat and relaxation space for staff and volunteers who's care duties can incur profound emotional and spiritual impacts
- Beneficiaries per year will include 175-190 IPU patients, 80-100-day hospice visitors, 700-950 relatives & family friends & 200+ staff & volunteers



Day hospice refurbishment project



RECEPTION
Reception desk orientated to guide visitors.
Reception area open to arrivals and within circulation space
With good visibility of shop and outpatient area.
Area created for staff within reception - screens use for privacy

RETAIL
open from reception
shop window with displays from corridor ensure good visibility - keep simple layout

DOOR ARRANGEMENT
Revised layout - less institutional.
Clearer, welcoming routes to day hospice and to treatment rooms.

FEATURE WALL
Upon arrival facing wall - key area for wayfinding / artwork to welcome visitors and orientate themselves within the Hospice

OUTPATIENT WAITING AREA
Curved screen provides privacy whilst still maintaining visibility with reception and the circulation space.
New built-in unit with tea/coffee facilities
Views to courtyard

STORAGE
discreet entrance to storage as not desirable to be on view or greeting with service doors opposite arrival



WELCOMING:

- RECEPTION
- ENTERING THE BUILDING
- WAYFINDING
- OUTPATIENT AREA



RECEPTION



OUTPATIENT WAITING AREA



CHAPEL

“Changing the perception and experience of Day Hospice by transforming our setting through enhancement of clinical care, breaking down barriers, widening engagement and promoting inclusivity” - work is expected to commence January/February 2023 and complete May/June 2023

IMPACTS:

- Clinical provision enhanced, both quantitatively and qualitatively, with an outpatient area and the addition of 2 x new treatment rooms accessible directly off the facility. These will be used for clinical consultations, outpatients and potentially counselling – supporting some 180+ beneficiaries each year. These dedicated facilities will also offer the potential to expand Day Hospice in the future (when staffing and resources permit), an extra day a week, but with a focus on dedicated clinical and therapy related support.
- 160+ Day Hospice patients directly and, 250 carers+ indirectly per annum (average daily attendance is 14, however with appropriate personnel resources, the potential will exist to support 15% more beneficiaries) which would equate to approx. 1450-1650 attendances per year
- The setting being more appealing, accessible, and inclusive to all patient age groups, genders, mobility levels and ethnicities with a palliative diagnosis
- Ability to expand the space and its function (additional activities like tabletop gardening, painting, bird watching etc) with the introduction of bi-fold doors bringing the outdoors, indoors, and vice versa
- Greater independence for our patients including personal care, toileting needs, accessibility, disability provision, entertaining and refreshments
- Embracing user friendly technology as a participation tool for an audience, stereotypically seen, as reluctant to embrace change. However, COVID has brought about a sea change in attitudes and now is the time to harness this momentum of change and appetite for progress, enabling better care and accessibility

Funding projects - 2023

Technology infrastructure investment within our IPU rooms:

- Voice activated appliances to better support patients with mobility impairments including alexa's, smart TV's and voice activated units
- Improved patient resources providing more home comfort services and enabling a more pleasant and familiar homely experience – reducing stress and anxiety
- Patient rooms will have direct video communications link via alexa screens and offer an alternative communications platform with patients' family and friends on a day-to-day basis for improved contact – again reducing worry, anxiety and minimising isolation and loneliness



Therapeutic spa room:

- Greatly enhanced therapeutic spa room for IPU, Day Hospice and community patients (150+ palliative beneficiaries per annum)
- Improved ergonomics for bed bound patients to gain access directly into the spa room and its facilities
- Relaxing environment where patients can relieve stress/anxiety/pain associated with palliative conditions
- Relieve nausea, vomiting and relax patients
- New hoist to enable patients to be lifted into the spa bath in greater comfort, dignity and ease
- More hygienic space that is easier to clinically maintain and durable
- Built-in retractable screen alongside the spa bath for enhanced privacy, dignity and personal care
- Visual and audio experience, enhancing the therapeutic environment and opportunities
- Dimmable, coloured lights as well as LED lighting around the room creating a warm, sensory and relaxing atmosphere
- New comfort height toilet, sink and integral mobility aids so that patients can use the facilities with increased independence
- Wall hung, heated radiator with additional rail hangers to heat patients' towels and clothes
- Remodelled recessed ceiling feature to house sensory lighting
- Improved integral storage and capacity
- Enhanced heating and moisture extraction



Funding projects - 2023

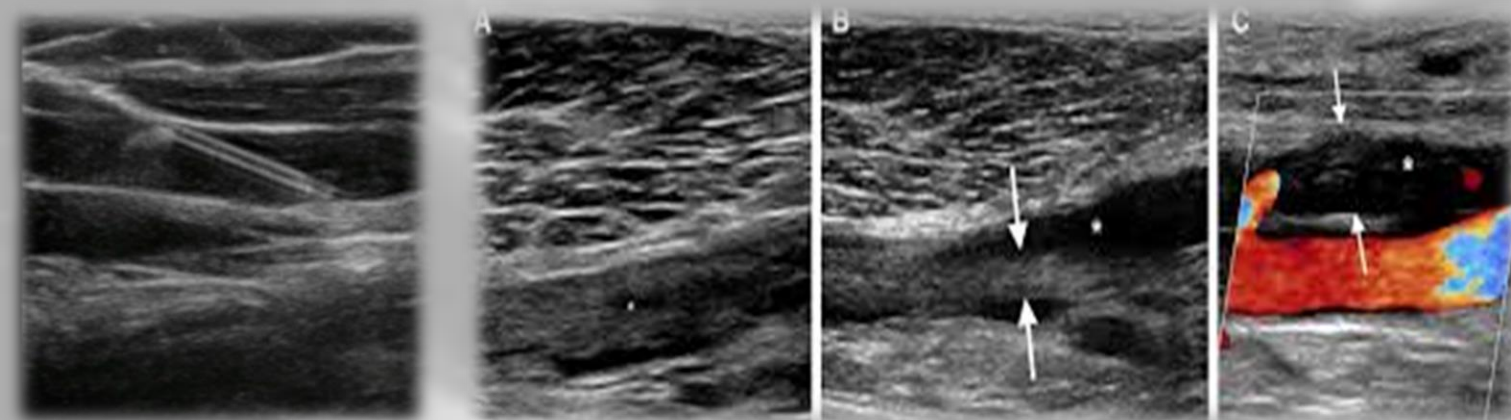
Portable ultrasound scanner project:

- Currently the hospice has no scanning equipment, since its outdated bladder scanner became uneconomic to repair and operationally un-viable
- When patients require a scan, for example to check abominable fluid build up from ascites, they must currently attend Weston General Hospital or Musgrove Park Hospital in Taunton (some distance). The availability for these scans can be 2-10+ day wait times and these delays are critical when a patient is in pain and/or has only days or weeks of life left.
- When being referred to hospital, patients can find themselves falling between the jurisdiction of differing departments. For patients who, by the nature of their palliative condition are frail, this can be an exhausting and traumatic experience. In addition, because they attend as a day case under a team who does not know the patient, there is no thorough clinical assessment, so co-morbidities might not get addressed in unison
- In addition to abdominal scanning, significant numbers of hospice patients would benefit from enhanced scanning technology to help facilitate in-house diagnosis, pain management and assist potentially difficult procedures associated with deep vein thrombosis (DVT), vascular access and cannulation
- Minimise potential infection risks to patients, and other hospice patients, by not having to attend unnecessary external clinical settings. The hospice by the nature of its work interacts with some of the most clinically vulnerable in our community



Portable ultrasound scanner outcomes:

- Greater patient choice and flexibility of clinical care and treatments
- Improve holistic hospice care assessment including pain, fluids, breathlessness and nausea
- Better and faster pain relief intervention for palliative conditions
- Broader spectrum of procedures and interventions that can be undertaken in-house at the hospice
- Less stress and inconvenience for palliative patients, and their families, receiving treatments at the hospice
- The scanner would be available to patients across departments including IPU, Day hospice and community nursing
- Potential to help 100+ patients per year through direct interventions and 500+ through indirect impacts, such as mitigating travel to external appointments, minimising avoidable infection risks for clinically vulnerable palliative patients
- The scanner will also play a significant role for outpatient care and assessments within the newly refurbished Day Hospice facility, due for completion in 2023. This could potentially expand its use and impact 100%+



Assisted cannulation

Investigating DVT



Weston Hospicecare

THANK YOU FOR YOUR SUPPORT

"We would be lost without this service"

"The support I received from everyone helped me carry on caring for my husband and helped me cope when he passed away. I'm not sure if I could have managed without the support. Thank you."

"Staff incredible - so attentive, nothing is too much trouble. Beautiful, calm and peaceful in here. Every need catered for - for both patient and family."

"This is my safe place, my lifeline, I can spend time being me amongst good friends"

"I feel very relaxed, I don't feel the tightness I had, I feel calm and relaxed. It was a good laugh - the best medicine for me, I really enjoyed it and feel much, much better."