

Quality Account

St John's Hospice

2024/25



St John's Hospice North Lancashire and South Lakes is a charitable incorporated organisation registered in England with charity number 1157030

Built by the people for the people



Our Purpose

St John's Hospice is a charity providing specialist in-patient and community based palliative care and support for the people of North Lancashire, South Lakes and parts of North Yorkshire.

We believe that when people die in our community they should do so with dignity and in the place of their choosing.

The staff and volunteers of St John's Hospice strive to provide world-class palliative and end of life care and support to patients and their loved ones.

To be truly successful we must uphold our values, work across our communities and, with many partner organisations, lobby decision-makers both locally and nationally and raise sufficient funds to deliver care of the highest quality.

Our Vision

Putting local patients and families at the heart of everything we do, we will ensure that on the journey towards the end of life we provide the right care, in the right place, at the right time.

Our Values

- **Care** – We will provide first class care, delivered by competent people who put the patient at the heart of all we do
- **Compassion** - We will treat everyone with respect, dignity and empathy
- **Collaboration** - We will work with others to ensure that patients and families receive the best end of life care possible
- **Charity** – We will provide care, free of charge to patients and families and will connect with our local communities so that they continue to finance our present and our future
- **Celebration** – We will celebrate the abilities of the people we care for, however limited they may be. When people are bereaved, we will support them to celebrate the lives of the people they have lost

Part 1

Chief Executive's Statement

It gives me great pleasure to present this Quality Account for St John's Hospice.

In this account, our aim is to show how the Hospice measures quality, involves patients, carers and staff and strives to always look for areas where we can improve our care.

A Quality Account is an annual report to the public from providers of NHS healthcare about the quality of services they deliver. It is important to note that, in a normal year, St John's Hospice only receives less than a third of its funding from the NHS; the remainder of the monies we need in order to run the Hospice is donated by the local community. The vast majority of services described in this document are funded by charitable donations and not by the NHS. This is not a sustainable position for the Hospice.

Quality sits at the centre of all the Hospice does. Our vision is that everyone in our catchment area of South Lakes, parts of North Yorkshire and all of North Lancashire with any life-shortening condition will have high quality care and support at the end of their life, in the right place, at the right time.

We asked patients, families, volunteers and staff to sum up in one word what St John's means to them. Their key words can be seen at the entrance to our ward and here:



Our Corporate and Clinical Governance structures ensure that we have both the systems and processes in place to maintain a viable and responsible business, whilst ensuring that our services are of the highest quality and meet the aspirations of our vision. Our services are subject to unannounced inspection at any time.

On the 20th December 2023, the Hospice was inspected by CQC; we were given no notice of the inspection.

Our overall rating was “Good”. This was broken down in the following categories:

- **Safety** – Good
- **Effectiveness** – Good
- **Responsiveness** – Outstanding
- **Caring** – Good
- **Well led** – Good

I am responsible for the preparation of this report and its contents. To the best of my knowledge, the information contained in this Quality Account is accurate and a fair representation of the quality of healthcare services provided by our Hospice.

Sue McGraw
Chief Executive
1st June 2025



Part 2

Our priorities for 2025-2026

New priority 1: Refurbishment of Chapel into non-denominational space

St John's Hospice was founded by an order of nuns in the mid-1980s, so the Hospice Chapel was a prominent and central part of the original design. Since then, society has changed and the demographics of our patient cohort means the Chapel space was not well used and, in some cases, off-putting for patients and their families.

Working with the local Catholic Priest, the Hospice's Spiritual Care team and the Lancaster and District Communities Together forum (made up of representatives from all major, local faith groups) a design has been developed to make the space more appealing for people of any faith or no faith.

With a "Sanctuary" space at the front and a smaller Catholic/Anglican Chapel at the rear, it is hoped the area will now be more appealing for everyone, whether they want to pray, relax or simply sit quietly away from the hustle and bustle of work or the stresses of caring for a dying loved one.

Work is scheduled to be completed in June 2025.

New priority 2: Staff engagement regarding refurbishment of the Hospice building, as part of our "Fit for the Future" campaign

St John's Hospice was built in the mid-1980s, some of the materials were second hand and the building and its infrastructure is now showing its age in areas. The Hospice is therefore beginning to plan for the building's refurbishment so that it is fit for the future, i.e. for continuing excellent patient care.

It is vital for the Hospice-wide teams to be involved in the design process. This is why we have already started engaging with staff to gain their views on how the Hospice could look. Further activities will include:

- Display of planning ideas and visuals in prominent places in the Hospice for all teams to comment on
- Feedback loops with written briefings and 'update' posters (with space for comments and questions) for all staff
- Face to Face Team Briefings with all staff groups so they are appraised of developments and can engage with the process.

Certain groups of staff e.g. clinical and frontline departments work very closely to the patients and families, so we will be undertaking specific engagement activities with these groups of staff. These activities may include:

- Focus groups with teams from the inpatient ward, housekeeping, hospitality, facilities, reception, day therapies and community functions

- Visits to other hospices by specific clinical staff
- Discussion of ideas from other studies of hospice design
- Workshops with architects etc.

Engagement activities will evolve according to a planning timeline.

New priority 3: Exploring the best model for day therapies in the community

Day therapies have been a key part of St John's Hospice and many other hospices' services since the modern hospice movement began. The day therapy model has changed over the past few years to ensure more patients can be supported by the Hospice. However, during COVID when it was not safe for people to meet in groups the day services were temporarily closed and staff were redeployed. The day services returned in 2022, but without the traditional day hospice running, instead concentrating on shorter group sessions which required less staff resources. The work all centred around the Hospice building in Lancaster, not across the large Hospice patch. Some groups have been run off site but without huge success.

In the St John's Hospice strategy 2025-2029, the Hospice is aiming to have more clinical hospice presence in South Lakes, the northern part of our catchment area. Working with fundraising, clinical staff will be used from day services and from the respite team in Hospice at Home, to engage with those attending coffee mornings across the area, asking attendees what support they can access in their area, and what gaps the Hospice could help with. This may be a day therapy group, a grief café or carer's support group.

It is hoped this work will not only meet more patient need in the area but assist with income generation at a time when it is needed more than ever.

Review of our Priorities for Improvement 2023-2024

Review of Priority 1: Lancashire & South Cumbria Education Alliance (LSCHA)

The education arm of the LSCHA began its journey to seek to understand current education and research capabilities, present a vision and business plan for shared improvement and delivery and where possible support implementation of improvements.

A LSCHA Education and Research Strategy Board was established, as were Terms of Reference. This Board's aims were to:

- Improve end-of-life quality of care through better training provision for hospices and our external partners

- Enhance use of existing resources, skills, and expertise (clinical and non-clinical)
- Provide more efficient and effective training and education for staff and volunteers
- Generate supporting income through training programs, study sessions, and conferences on end-of-life and palliative care for other professionals, including external staff such as NHS clinicians or care staff.

Objectives:

- Develop a jointly structured (clinical and non-clinical) education provision
- Pool and manage resources effectively across hospice partners
- Share costs and income between the hospices under a co-produced agreement
- Ensure equal representation in decision-making around the provision, data, and delivery of education.

St John's Hospice's first focus area was mandatory training.

It is fair to say the Education Partnership has been much more difficult to progress than the main Hospice collaborative and has not achieved its aims this year. A recent reflection session was held and it is clear that to change the way education is delivered across hospices requires a much more strategic approach than currently. Whilst the hospice CEOs were involved at the start and drove the vision and aims, attendance at regular meetings has been left to hospice educators who have been reluctant to make the changes anticipated in the strategy document.

The CEOs have agreed to take a more active part in the project going forward; it is hoped that, with their input, the year ahead will be more successful.

Review of Priority 2: Investing in Staff and Volunteer Wellbeing

The health and wellbeing of the Hospice team remains paramount. The Hospice has continued to embed recent actions and launch new initiatives so that health and wellbeing remains a priority across the organisation.

This means we have invested in these areas:

2.1 Further line manager training - a new 'Leading from the Middle' programme has been designed to support managers to influence peers, team managers and their managers. This started in March 2025. Key areas of the programme are:

- Reflective leadership
- Collaborative leadership
- Leadership in a 'Well-Led' hospice
- Learning Forum.

2.2 HR Policies and Practices - the Hospice is in the process of continuing to tailor policies and practices to organisational and employee needs. For example, during 2024-2025 the following HR

policies were updated, this was in addition to the new policies required by the new government:

- Appraisal
- Performance Improvement (was Capability)
- Paternity Leave
- Equal Opportunities
- Whistleblowing
- Flexible Working
- Equality, Diversity & Inclusion
- Retention, Destruction and Disposal of Records
- Leave
- Probation Review
- Gratuities (Tips)
- Vehicle Tracking

2.3 Health and Wellbeing - we are strengthening the Hospice's robust organisational framework to promote good mental wellbeing and foster a culture where people can talk about their health, stay well and seek help where needed. For example:

- Further promotion of the onsite and community Mental Health First Aiders so all staff can access support
- Promotion of the Staff Health and Wellbeing Directory, including a 'how to' guide to encourage access of Westfield Health – a health benefit scheme for staff funded by the Hospice
- Promotion of the paid-for Employee Assistance Programme with Westfield Health including onsite drop-in sessions with Westfield Health staff
- Additional Complementary Therapy sessions for staff
- Investment in two new roles: a Volunteer Manager and Volunteer Administrator to lead the recruitment and retention of volunteers
- Information posters re: sexual harassment
- Hosted an off-site Volunteer recognition and long service award event for 150 volunteers with food, drink, gifts, badges, certificates and awards
- Further night sitter engagement with regular meetings etc.
- Encouraged protected time for staff and volunteers to attend Last Days Matter training, which has been well received
- Lunchtime 'Hot Topic' sessions for staff have included a session on dealing with bereavement and grief, managing pain and more

- Staff engagement initiative encouraged staff to put forward their ideas about which wellbeing initiatives they would welcome
- Refurbishment of certain office areas to improve the working environment e.g. fundraising office
- An exhibition of the work of different staff areas was held for Trustees and for staff – this enabled staff to share their challenges, hopes for the future and achievements with each other to further boost work wellbeing
- Outdoor seating area for staff has been upgraded
- Free lunches for all staff working Christmas and New Year Bank Holidays.

Review of priority 3: Staff investment through clinical education

As palliative care referrals are set to increase by up to 30% by 2040 (*Etkind et al, 2017*), the need to educate external staff increases as hospices may be unable to keep up with demand.

The preceptorship programme continues to be successful, this year two newly qualified registered nurses were employed instead of one and the programme will now happen every 2 years, to offer peer support. One RN from each of the programmes so far has successfully applied for available posts.

The Advanced Communication Skills course now has a robust number of trained facilitators at St John's Hospice, and this course is now available to paying external staff.

All our Hospice health care assistants (HCA) have now completed the HCA development course, with resounding success.

Courses can only be run when there are available staff hours, and this has proven difficult at times with ongoing clinical commitments. This will continue to be reviewed, balancing staff resources with income generation and the importance of educating our community to give excellent palliative care as referrals increase.

References: Etkind, S.N., Bone, A.E., Gomes, B. et al. How many people will need palliative care in 2040? Past trends, future projections and implications for services. BMC Med 15, 102 (2017).

Part 2 (Continued)

Statements of Assurance from the Board

Quality Accounts have a series of statements that MUST be included. Many of these statements do not apply to St John's Hospice. Explanations of these statements are given where appropriate and are prefaced by the words "**MANDATORY STATEMENT**"

During 2024-2025 St John's Hospice provided the following services:

- In-Patient Unit
- Community Service, comprising of Hospice at Home Service, Night Sitting Service, Day Respite Service and Clinical Nurse Specialist Service
- Family Support and Bereavement Service
- Education and training for our own staff
- South Lakes Palliative Care Educator Post for care homes, and homes care
- Out-patient clinics, led by specialists in palliative medicine
- Physiotherapy, Occupational Therapy, Complementary Therapy, Social Work, Spiritual Care, and hosted Lymphoedema Services
- In-house catering for our ward and day hospice patients
- Housekeeping to ensure strict standards for infection prevention and control.

MANDATORY STATEMENT – St John's Hospice has reviewed all the data available to them on the quality of care in all these NHS services.

Participation in Clinical Audits and Compliance with NICE 2024/25

The Audit and NICE Group, led by the Medical Director and reporting to the Clinical Operations and Performance Committee, has met bimonthly during 2024/25, focusing specifically on Clinical Audit, Compliance Audits and baseline assessment of NICE standards and Guidelines.

In August 2024 the Hospice's Patient Safety Incident Response Framework (PSIRF) policy and Plan were validated and ratified. The Hospice's PSIRF Plan includes the forward Audit and NICE baseline assessment plan for 2024/25 and will be updated yearly.

Thirteen local clinical audits were completed and reviewed by the clinical teams at St John's Hospice in 2024/25 which provided assurance of good practice and the opportunity to complete actions to improve the quality of healthcare provided.

Clinical Audit
Deprivation of Liberty Safeguards (DoLS) & Safeguarding
Medical Gases Hospice (Hospice UK, HUK)
General Medicines Audit (HUK)
Controlled Drugs (HUK)
Infection Prevention and Control (HUK)
Care plan and risk assessments
Hospice UK Benchmarking/Patient Safety Program
Steroids (Inpatient unit)
Falls (thematic review)
Non-Medical prescribers
Venous thromboembolism (VTE)
Steroids (Community)
Heart Failure

Twenty-four NICE Baseline assessments have been completed. Applicable areas have all demonstrated a compliance of 100% apart from NG 150 Supporting Adult Carers which is 98% compliant and CG 103 Delirium, which has been reviewed as part of a Quality Improvement Project by the ANP with ongoing actions and will be re-reviewed in 2025.

NICE Guidance and Clinical Guideline Baseline Assessments
NG 24 Blood Transfusion
NG 76 Child Abuse
NG 13 Workplace Policy and Management Practices
NG 218 Vaccine Uptake in the general population
NG 142 End of Life Care for Adults Service Delivery
NG 5 Medicines optimisation: the safe & effective use of Medicine to enable the best possible outcomes
NG 15 Antimicrobial stewardship: systems and processes for effective antimicrobial medicines use
NG109 UTS (lower) antimicrobial prescribing
CG 140 Palliative Care for adults: strong opioids for pain relief
CG 173 Neuropathic pain in adults: pharmacological management in non-specialist settings
NG 42 Motor Neurone Disease: assessment and management
CG 103 Delirium: prevention diagnosis and management

NG 89 VTE in over 16's reducing the risk of hospital acquired DVT or PE 50% compliance -redo BAT when actions completed
NG 96 Care and Support of people growing older with LD
NG 97 Dementia assessment management & support for people living with dementia & their carers
CG 32 Nutritional support in adults
NG 13 Workplace policy & management practices to improve health and wellbeing of employees
NG 146 Workplace health: long term sickness absence and capability to work
NG 150 Supporting adult carers
NG 212 Mental Wellbeing at Work
CG 161 Falls in older people – part of deep dive
NG 114 COPD (acute exacerbation) antimicrobial prescribing
NG 138 Pneumonia (community acquired) antimicrobial prescribing
NG 139 Pneumonia (hospital acquired) antimicrobial prescribing

The audit and NICE schedule for 2025/26 has been planned. Compliance Audits provide further evidence of assurance, and the clinical teams have selected clinical audits that are important to ensure that best practice standards are being achieved to ensure quality, safety and clinical effectiveness.

In 2024/25 the following are highlights from the Audits Schedule:

Falls Deep Dive – this work was led by the In-Patient Unit Manager who wanted to review the care received by patients at risk of falls, and after experiencing falls.

A retrospective review of records from the period May 2023 to June 2024 was undertaken, and the NICE guidance and national research were reviewed.

The review identified that, overall, standards of care were very high however some improvements were recommended and completed. This has led to a rise from a 73% compliance rate to a 100% compliance rate with all Hospice falls care.

Corticosteroid audit – This audit was led by the Medical Team on IPU in 2024 and standards were audited against the Guidelines for the Use of Corticosteroids in Palliative Care. Overall compliance with the standards was good at 85%, however there are opportunities for improvements with a plan to re-audit in 2025.

The Patient-Led Assessments of the Care Environment Programme (PLACE) Audit

The Hospice was audited on the 30th of October 2024, by four patient assessors and two staff assessors. This audit promotes the principles established by the NHS constitution that focuses on areas that matter to families and carers.

The Hospice is reviewed against standards for Cleanliness, Combined Food, Organisational Food, Ward Food, Privacy, Dignity & Wellbeing, Condition, Appearance & Maintenance, Dementia and Disability, scoring a combined average score of 98.5%

Cleanliness, Ward Food, Condition, Appearance & Maintenance, and Dementia all scored 100% each.

Patient Safety Programme (Hospice UK) - Moving from Benchmarking to a Quality Improvement Focus.

Since Q1 2023/24 the Hospice has submitted monthly data for Pressure Ulcers, Falls and Medicines Management Incidents into the Hospice UK (HUK) Benchmarking Tool. HUK reviewed this methodology in early 2024 with the ambition to streamline the data collection process to ensure that clinical incident data management focused on quality improvement at hospice level rather than performance benchmarking.

Monthly data for Pressure Ulcers, Falls and Medicines Management Incidents at the Hospice has continued to be submitted for each quarter for 2024/25. The Hospice's data is then presented over time in the form of 'run' charts. The benchmarking function is still available by way of Clinical incident comparisons for all adult hospices submitting data.

St John's Hospice is performing well against a national average for each category, and this is overseen by the Care, Quality and Services subcommittee of the Board.



Research

MANDATORY STATEMENT - The number of patients receiving NHS services, provided by or sub-contracted by St John's Hospice in 2024-2025, who were recruited during that period to participate in research approved by a research ethics committee, was NONE.

Use of the CQUIN Payment Framework

In 2024/25 the Hospice was not subject to any CQUIN payment schemes.

Statement from the Care Quality Commission (CQC)

St John's Hospice is required to register with the CQC; on advice received from CQC in 2021, we only need to register for the following regulated activity, as the others are included under this:

- Treatment of disease, disorder or injury.

St John's Hospice has the following conditions on registration:

- Only treat people over 18 years old
- Only accommodates a maximum of 17 in-patients.

The CQC has not taken any enforcement action against St John's Hospice during 2024/25.

The CQC rated St John's Hospice as "Good" at its inspection, now under independent healthcare, on the 20th December 2023.



MANDATORY STATEMENT – St John’s Hospice did not submit records during 2024-2025 to the Secondary Users Service for inclusion in the Hospital Episode Statistics which are included in the latest published data.

The Data Security and Protection Toolkit (DSPT)

St John’s Hospice achieved compliance across all mandatory areas of the DSPT in 2024-2025.

Clinical Coding Error

MANDATORY STATEMENT – St John’s Hospice was not subject to the payment by results clinical coding audit during 2024-2025.

Part 3 Review of Quality Performance

INPATIENT UNIT			
	2024-2025	2023-2024	2022-2023
<i>Total Patients</i>	217	197	184
<i>Total admissions</i>	223	209	184
<i>Patient RIPs on Ward</i>	157	145	135
<i>Patient Discharges</i>	62	49	46
<i>% Ward Occupancy</i>	76.5*	96	96
<i>Average Length of Stay (days)</i>	14.4	16.1	17.9
COMMUNITY CARE: HOSPICE AT HOME			
	2024-2025	2023-2024	2022-2023
<i>Total Patients</i>	726	727	648
<i>Home Visits</i>	2616	2219	2928
<i>Telephone Calls</i>	10552	10243	10343
<i>% Patients who died at home</i>	91%	88%	90%
<i>Average Length of care (days)</i>	36	41	40
COMMUNITY CARE: NURSE SPECIALISTS			
	2024-2025	2023-2024	2022-2023
<i>Total Patients</i>	447	563	713
<i>Home Visits</i>	1391	1243	1196
<i>Telephone Calls</i>	4061	3302	4426
DAY SERVICES			
	2024-2025	2023-2024	2022-2023
<i>Total Patients</i>	187	174	383
<i>Average length of support (Days)</i>	72	35	82.5
FAMILY SUPPORT & BEREAVEMENT			
	2024-2025	2023-2024	2022-2023
<i>Total service users</i>	766	753	319
<i>Discharge from 1-1 support</i>	102	121	85
<i>Average length of support (Days)</i>	42	33	91

*The ward has changed its bed occupancy reporting to be in-line with Hospice UK metrics, therefore showing occupancy differently. The direct comparison of the data from the past 3 years is therefore not possible.

The 76.5% is in line with national average occupancy rates for hospice inpatient units.

The Hospice is calculating the days and costs of delayed discharges, as this is impacting on admission rates and waiting times. Care home places and social care packages now require longer waiting times.



Patient Safety Incidents

There continues to be a healthy incident reporting culture at the Hospice. Throughout the reporting period, the categorisation and analysis of incidents has been reviewed and improved to better understand our themes and trends and to appropriately target resources to improve patient care. This is in line with the Patient Safety Incident Response Framework (NHS,2022). All reported incidents are of a low level in terms of patient risk. However, we actively encourage our teams to report incidents. All incidents are reviewed weekly by the hospice Senior Management Team (SMT) as well as daily by clinical managers and the Clinical Governance and Improvement Team.

Below is the total number of patient safety incidents this year. These include medication, slips, trips and falls and include all near misses.

Number of incidents	2024-25	2023-24	2022-2023
Regulated/Internal	247	248	326

Number of incidents resulting in severe harm or death: 0

Implementation of the Duty of Candour

Duty of Candour means being open and honest with people using our services, especially when things have gone wrong, or potentially may go wrong.

The Duty of Candour must be followed in all aspects of patient care so that the patient, where they have capacity, is informed when something has not happened as planned. If the patient does not have capacity, incidents must be shared with the family or carers. Any questions or concerns must be addressed as soon as possible, and everything said should be documented.

At St John's Hospice we have developed a system to implement the Duty of Candour, both regulatory and professionally, through informing family members of particular patient incidents (with the patient's consent, if they have capacity) which have resulted in actual harm, through best interest meetings with family when a patient does not have capacity and through open and honest discussions about patients' conditions and treatment plans.

Feedback from Staff



A biennial staff satisfaction survey is conducted at the Hospice. The top three statements that staff agreed with in our most recent staff survey were:

- I would recommend a friend or family member for care
- I am proud to work for St John's Hospice
- I enjoy the work I do

Feedback from Patients, Families and Carers

Feedback from patients, families and carers is one of the most important ways for us to

understand and improve the services we provide.

We often receive comments and compliments by letter or email, but also many verbally which are not formally recorded.

We never forget that the sign above the door here reads: 'Built by the people for the people'.

Patient and Family Surveys

Valued Opinions in Care Excellence (VOICE) volunteers support the completion of a Hospice experience questionnaire which is offered to all patients and families at the end of a patient's life. Volunteers are either speaking to patients and families on the In-Patient Unit or are phoning families to complete the questionnaires. Some questionnaires are posted.

VOICE carried out the following engagement with patients and families:

Face to Face (IPU + Day Services)	126
Telephone	191
Postal sent	405
Postal returns	99
Percentage of returned postal	24.44%

The analysis of the responses for 2024/25 showed that feedback continues to be overwhelmingly and consistently positive.

VOICE survey questions	Responses
"I was cared for with compassion, kindness and respect"	95% of strongly agreed
"My views and opinions were listened to"	95% of strongly agreed
"My privacy and dignity were respected"	95% strongly agreed
"I understood how to ask questions and discuss any concerns about my care and treatment"	98% strongly agreed
"I knew how to make a complaint if something was wrong"	99% strongly agreed
When asked about their experience with St John's Hospice	99% said it was good (choices: good, good & bad, bad)



Complaints 2024-25

Complaints are all monitored by the relevant member of the Senior Management Team; clinical complaints are discussed at the Care, Quality & Services Subcommittee and are reported to the full Board of Trustees.

Complaints (regulated care)	Number
Total number received	9
Formal complaints	3
Informal complaints	6
Total number of complaints upheld in full	4
Total number of complaints upheld in part	2
Total number of complaints not upheld	3

The three formal complaints have all come from one patient. Two of these have been upheld.

Freely given compliments

The Hospice receives many compliments including phone calls, verbal reports, letters and emails, flowers, photographs, poems, social media comments, visitor book comments and cards. Compliments are received from a wide range of patients, families and friends who access the service across the inpatient, day therapy and community.

For 2024/25 the hospice has received a total of **493 freely given compliments for all areas.**

Here are two patient stories which are typical of the feedback we receive:

Stuart Care



This is the story of my time with St John's. It's something I want to write because I want people to know what Hospice care from St John's is really like.

The commitment and attitude to patient care is second to none and their care extends to family too. Whether I have been cared for at home or at the Hospice, the St John's team have looked after my family too. It's a comfort to know the Forget Me Not Centre will be here for my wife Tracey and our daughters Ellie and Lauren too.

Staying here means I experience and see patient and family care. I see all the staff making a difference - whatever their job. The team are so supportive – it's reassuring for me and my family to know I'm in the best hands. It's relaxing here and the Hospice makes visitors welcome - even pets!

One of the many things I appreciate about St John's care is that no-one forces you to do anything. I have chosen to be here and can leave if I want to go home because no-one is forcing me to do anything. Don't be frightened of the 'hospice' word.

Stuart died at St John's Hospice surrounded by his family.

Tracey Care

Stuart was a 'light up the room' man. He was a man of his word with a strong spirit. He was never happier than when all the family were together, eating and laughing round a table. If he wasn't working or hosting a family occasion, then he was listening to music, dancing or singing along!

He had been ill years back and although he recovered, his illness was always at the back of our minds. When it came back, we knew he would not recover this time. On diagnosis, Stuart did what he always did – put me and the girls first. He made sure the house improvements and DIY jobs were finished so that I wouldn't need to do anything after he died and made time for us to make new family memories.

The time we had at St John's was precious: just being in the fresh air, sitting together as a family, holding hands and cherishing every moment. Stuart died at St John's. I can't describe how much I miss him, but I can describe how much the girls and I love him.

Thank you for supporting St John's - when you raise money for the Hospice you are helping patients and families during and after one of the most difficult times they will face. Thank you for being there for us: you make a difficult time so much better.

Dawn's Story - Hospice Day Therapy Services



Dawn was referred to St John's Day Therapy Services from the Hospital respiratory team. Having benefited from many of the Hospice services, Dawn is happy to share her experiences to help others!

"I have Chronic Obstructive Pulmonary Disease (COPD), it got so bad I had to retire from my job and then I found myself ill and alone in hospital during the pandemic.

After the pandemic my breathing had worsened so when St John's Day Therapy Services were suggested I thought, "I've nothing to lose". I knew I'd be safe and cared for because they nursed someone in my family who'd passed away on the ward and my Dad has fantastic care from the Hospice at Home team.

During the past 12 months I have attended the FAB programme for my fatigue, anxiety and breathlessness, which has made such a difference. It was then time to take stock of my mental health; it had got worse through living with this life limiting COPD. So, I signed up to the Positive Living Group in the hope of improving my wellbeing, confidence and developing future plans. It's worked – I have found myself exploring activities and new hobbies that I enjoy! We can all laugh at crafts and things but they give you a focus, you actually make something and they can distract me from my pain.

If I'm honest, it can be hard to summon up the courage to walk into a place where you don't know anyone. I don't know why I was so worried because everyone is so friendly. There's always a brew, biscuits, advice and support. Plus, you get to meet other people, you make friends – this place has an amazing feel to it!

The St John's Day Therapy team always know how you are feeling – it's like they can sense it. They're genuinely interested in their patients: such amazing people.

I was a right mess when I first came here and I'm in a different place now. My physical and mental health has improved, and I've found my self confidence that I'd thought I'd lost forever."

Opportunities to give Feedback on this Quality Account

We welcome feedback on our Quality Account.

If you have any comments, please contact:

**Sue McGraw
Chief Executive
St John's Hospice
Slyne Road
Lancaster
LA2 6ST**

Feedback on our Quality Account

Response to St John's Hospice Quality Account Report for 2024-2025 for NHS Lancashire and South Cumbria Integrated Care Board

3rd June 2025

Re: St John's Hospice Quality Account 2024/25 – Stakeholder Feedback
Lancashire and South Cumbria Integrated Care Board

Lancashire and South Cumbria Integrated Care Board welcomes the opportunity to review and comment on the St John's Hospice Quality Account 2024/25 and the commentary provided in this letter relates to services commissioned by us. We have a continued commitment to commissioning high quality services from the hospice and take seriously their responsibility to ensure that patients' needs are met by consistent and high standards of safe care, provision of effective services and that views and expectations of patients and the public are listened to and acted upon.

Firstly, we would like to recognise the continued hard work and commitment staff demonstrate during what has been a challenging time for the NHS in relation to demand and patient flow. Lancashire and South Cumbria Integrated Care Board is pleased with the progress made by St John's against the quality priorities set out for 2024/25, this includes investment in staff and volunteer wellbeing and investment through clinical education. We note that there has been some challenge with progressing the Lancashire and South Cumbria Education Alliance project work, with recognition that a more strategic approach is required. It is positive to read that the Chief Executive Officers have agreed to take a more active role, which we hope will support progress with delivery over the coming year.

Lancashire and South Cumbria Integrated Care Board notes the areas of focus for 2025/26; refurbishment of the Chapel into a non-denominational space, staff engagement regarding refurbishment of the hospice building and exploring the best model for day therapies in the community. Might we suggest that the Lancashire and South Cumbria Education Alliance project is identified as a continued priority for 2025/26, this ensures ongoing focus and prioritisation as the challenges with implementation are addressed.

Lancashire and South Cumbria Integrated Care Board champions the quality improvement data focus St John's has adopted and note the monthly submissions being made to the Hospice UK Benchmarking Tool. The hospice is performing well against the national average for each category. Lancashire and South Cumbria Integrated Care Board acknowledges the ratified Patient Safety Incident Response Framework policy and plan, this demonstrates a clear commitment to patient safety improvement. We encourage the hospice to consider inclusion of the local priorities outlined in the Patient Safety Incident Response Framework plan, along with a reflection on how these have contributed to enhancing patient safety culture. Similarly, could consideration be given to referencing any related training delivered during the year, this further demonstrates the organisation's commitment to embedding the Patient Safety Incident Response Framework principles.

We are encouraged to read that no incidents resulted in severe harm or death during 2024/25 but note there has been a reduction in reported incidents since 2022/23 (a difference of 79 when compared against the 2024/25 total number) and would welcome additional narrative that details any causal factors behind this. It would also be helpful to state how many Patient Safety Incident Investigations were commissioned under the Patient Safety Incident Response Framework plan.

We recognise the importance of Duty of Candour and the requirement for Providers to act in an open and transparent way with people receiving care or treatment from them. On this basis, it is pleasing to read that the hospice has developed a system to implement this. We suggest consideration is given to including additional narrative around compassionate engagement with families and how this has been embedded, which is a key principle of Patient Safety Incident Response Framework.

Staff and patient feedback continue to be positive, and St John's actively seeks the opinions of patients and their families through the Valued Opinions to Improve Care Excellence volunteers. We felt bolstered to read the patient stories, which highlight the impact of care delivered by St John's for palliative patients and their loved ones. Patient experience is crucial as it's a key component of quality alongside clinical excellence and safety. A positive experience is linked to improved health outcomes, increased staff satisfaction, and better financial performance.

The Quality Account provides an open account of the achievements made in the past year and areas for improvement. This is an important contribution to public accountability in relation to quality and Lancashire and South Cumbria Integrated Care Board appreciates the amount of work involved in producing this report.

Yours sincerely

Kathryn Lord

Lancashire and South Cumbria Integrated Care Board – Director of Nursing, Quality Assurance and Safety

Response to St John's Hospice Quality Accounts Report for 2024-2025 Lancashire Healthwatch

From: Jodie Ellams, Manager Healthwatch Lancashire,
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Healthwatch Lancashire Response to St John's Hospice Quality Accounts Report for 24-25

Introduction

We are pleased to be able to submit the following considered response to St John's Hospice Quality Accounts for 2024-25.

Chief Executive's Statement

Included in the Chief Executive's statement is a word cloud made up of words that patients, families, volunteers and staff have used to describe St John's. Words such as love, safety and tranquillity, really is a testament to the services that St John's provides. It is great to see that this is displayed at the entrance to the ward.

New priority 2: staff engagement regarding refurbishment of the Hospice building

It is pleasing to read about the planned building refurbishment and how staff will be involved in this process. I understand that staff work very closely with patients and their families. It may be worth taking some of the plans directly to some of the groups that the Hospice run (if appropriate of course) to hear directly from families also.

Review of Priority 2: Investing in Staff and volunteer wellbeing

In last year's quality account, we highlighted how positive it was to learn about the investment into staff and volunteer wellbeing. Of note is the recognition event for 150 volunteers, what an amazing way to celebrate your volunteers. The investing into the two new roles; volunteer Manager and volunteer Administrator, will in no doubt further strengthen your volunteer offer.

Patient and Family Surveys

We note the continued high levels of satisfaction and uptake of the Hospice experience survey, which mirrors last year's results. This reflects the care and treatment people receive whilst in the Hospice's care.

Again, the inclusion of two patient stories really hit home the impact that the Hospice has on people's lives and their families.

In accordance with the current NHS reporting requirements, mandatory quality indicators requiring inclusion in the Quality Account we believe the St John's hospice has fulfilled this requirement. Overall, this is a fair and well-balanced document which celebrates achievements and plans. We welcome these and as a Healthwatch we welcome any involvement and support into the development of the St John's building.

Jodie Ellams

Manager- Healthwatch Lancashire

Response to St John's Hospice Quality Accounts Report for 2024-2025 Lancashire County Council Health Scrutiny Committee

The committee is unable to provide comment on this year's quality account, however they are grateful for continued engagement as the committee moves forward.