

TYNEDALE HOSPICE AT HOME

ANNUALREPORT 1 APRIL 2019 - 31 MARCH 2020

8 new Trustees were recruited in May 2019, who have enhanced the quality and impact of Board leadership across the organisation. A good financial performance due to strong fundraising activities, improved retail results and careful monitoring of costs has improved our reserves position but retains them within the limits of our Reserves Policy.

Funding was designated from reserves to "seed fund" new services during 2019/20 – Complementary Therapies, Dementia Support – and the works required to open an additional retail unit, as part of the Strategic Plan 2019-22. Sadly these developments have been delayed due to the impact of COVID-19.

The Strategic Plan maintains our commitment to provide outstanding services and offer more support to more people. The organisation continues on its path to increase the reach and impact of services for our community.

During the last 12 months the Hospice has been successful in delivering key elements of its strategy:

Good governance

• the Articles of Association were reviewed by the Trustees, and the final revisions were approved by the Charity Commission in January 2020.

Income generation

- a review of retail operations was completed, and a new retail unit was funded in Prudhoe.
- a Community Engagement Officer was appointed to increase the hospice's profile across our community and increase the number of donors and volunteers supporting the organisation.
- options for the provision of a Hospice Lottery were considered and a suitable provider identified, with a view to launching this during 2020/21.

Care services

- a feedback system for users of all our care services is now being utilised.
- the nursing team extended the availability of support to patients in the early stages of palliative illness.
- a post of Senior Family Support Practitioner was created in order to ensure the highest standards of provision were maintained by the Family Support Team.

Staffing

 a review of policies relating to human resources took place during the year. Relevant policies were revised and updated to reflect current legislation and best practice. A staff handbook was published.

During 2019/20 Tynedale Hospice at Home received only 7% of its income from the NHS, which is not guaranteed and is negotiated annually. The Hospice recognises more reliable and secure income streams are needed to ensure our services can be delivered to the local community. The expansion of our retail operations, introduction of a Hospice Lottery and raising the Hospice's profile across the community will be crucial to the plan.



Care Services

During 2019/20 we provided 3,300 hours of nursing care to 112 patients. 99 adults and 68 children received support from our active listening [Family Support] service and we received 56 new referrals for our transport service during this time.

Comparative statistics to previous year are shown below:

	<u>2018/19</u>	<u>2019/20</u>
New patient referrals	99	112
Hours of care provision	2,630	3,300
New referrals for transport	55	56
Family support adult new referrals	82	99
Family support child new referrals	28	68

During the year 61% of the patients that we supported, died in their own home and 17% of patients had a Tynedale Hospice at Home nurse present at the time of death.

We provided nursing care to more patients in 2019/20 compared to the previous year. Eligibility criteria for our services are reviewed regularly and, as a result, we are now able to provide increased hours of "day respite" and have extended our service to provide support throughout the evening period until the "night shift" commences.

The Head of Care Services, continues to integrate our services with Community NHS provision and ensures the Charity responds promptly to those most in need of our services. The Head of Care Services is also the

Registered Manager for the Hospice.

We are registered with the CQC to provide the following regulated activities:

- Treatment of disease, disorder or injury
- Personal care

Nursing Care

Tynedale Hospice at Home employs a nursing team comprising 12 Registered Nurses, 10 Hospice Support Workers, and 2 Senior Nurses (one with responsibility for training and staff development and the other responsible for ensuring the delivery of the highest quality service).

Care is available to adults on the palliative care register and who are patients of any of the 13 GP practices within the West Northumberland locality of the Northumberland Clinical Commissioning Group (CCG). Care is primarily directed to those at end of life and can be provided in the home or place of residence. This service, at end of life, is available on a 24 hours basis and all of our services are free of charge to those who need them.

Family Support Service

The Family Support Service is an active listening service, provided by both fully trained professionals and trained volunteers. It is available to anyone who lives in our catchment area who may be referred by their Primary Health Care Team, the Macmillan service, Oncology Service or they may self-refer. We provide both pre and post bereavement support for adults, children and young people.

Three year funding for one Family Support Practitioner – the team comprises 3 staff - was secured from the BBC Children in Need campaign and commenced in May 2018. During the previous year 6 teenagers made a film about their experiences of grief and bereavement, which won a bronze medal at the National Charity Film awards ceremony held in London in April 2019. The film is being used to



raise awareness of our work in the community, in schools and in support sessions with young people and their families.

Hospital Transport Service

This discreet service is operated by volunteer drivers, using their own vehicles and supporting clients to attend hospital appointments for treatment directly related to their life limiting condition. During the year we provided transport for 92 clients of whom 56 were newly referred. A total number of 600 return journeys were undertaken by the volunteer drivers.

Staffing and Volunteering

The focus for 2019/20 was to ensure all staff contracts and HR policies were up to date and reflected current best practice and legislation. The newly published staff handbook provided all staff with a summary of relevant information required to enable them to understand their rights and responsibilities as employees of the hospice.

During 2019/20 278 volunteers, an increase from the previous year of 25%, willingly gave 21,000 hours of their time, across all of our services as well as in our shops and at fundraising events. The financial value of this support has been calculated at approximately £200,000. Without the continued support of volunteers we would be unable to provide our services.

Fundraising and Publicity

We appointed a Community Engagement Officer as we continue to grow and enhance our Fundraising operation. This appointment enabled us to recruit new donors, additional volunteers and raise the hospice's profile across our community.

During 2019/20 we scoped and planned the inauguration of a Hospice Lottery, which will be implemented during 2020/21 and finalised a legacy strategy.

Our communications focus during 2019/20 was on increasing our reach via Social Media. As a result of this focus we have increased our followers across Social Media significantly.

Retail

The Hospice occupies, on lease, four retail premises, two are in Hexham, one is in Ponteland, and a fourth premises was opened in November 2019 in Prudhoe, which has already developed a community of support from regular customers.

Income from our retail outlets increased by 21% during the year. The three new managers have settled well into their roles, and we are delighted that our volunteers have embraced the changes required following the introduction of retail gift aid and Ebay sales.

Financial review

Reserves

The Board of Trustees has considered the financial position of the Charity. They recognise that it is critically dependent on the support of the local community. The Trustees regularly review the financial risks of the Charity to ensure there are sufficient reserves to meet any risks that may occur.

Financial Performance

Increased retail income for a third consecutive year was very pleasing, and further opportunities for growth have been identified. Expenditure was carefully monitored during the year and opportunities for savings implemented.



Structure, governance and management

Organisational structure and decision-making policies

The Board of Trustees meets bi monthly and is responsible for governance and oversight of Charity operations.

There are four committees with clear terms of reference and delegated powers:

- Care
- Finance
- Community
- Governance

Risk management

The Trustees review a strategic register of the main risks which the Charity faces. The risk register is regularly reviewed in meetings between the CEO and Department Heads, Committees and at Board level.

Plans for future periods

Our three year strategic plan (2019-2022) has been developed to help us achieve our vision:

"Tynedale Hospice at Home will ensure that everyone in our community has access to the resources and care they need to reduce the distress caused by life limiting illness and sudden death. Our services will be maintained at an outstanding level and funded by a combination of community support and statutory funding"

The strategic plan identifies proposed goals, objectives and milestones from April 2019 until March 2022. The strategic plan has been developed through consultation with staff, volunteers, stakeholders and partners who contributed to goals and objectives that were approved by Trustees. It has been separated into 4 key areas:

- People at our core: patients, clients, supporters and staff.
- Outstanding services: provide an outstanding experience in all that we do.
- Provide more support to more people: provide the most holistic service possible.
- Grow our reputation: ensure everyone in our community knows who we are and what we do.

In year event - Covid-19

The global pandemic caused by COVID-19 (C-19) had a brief but significant impact on the Hospice at the end of the financial year. The Hospice SMT foresaw the inevitable "lockdown" and started planning in the preceding weeks in the following areas:

Budget

The 2020/21 budget was immediately re-cast, reducing planned expenditure and expected income to accommodate the inevitable reduction in fundraising, as result of banning public gatherings and the potential impact of the pandemic on the UK economy. Trustees authorised the use of reserves, where required, to meet any deficits experienced as a result of C-19.All government funding available was accessed, including rates relief for our four shops and the Job Retention Scheme.



Staffing

Staff were furloughed, ie.

- those, whose duties were not essential in the short-term and/or
- could be undertaken by others whose capacity had been released due to a fall in the volume of work as a result of reduced activity across the Hospice.

Any volunteers and staff who were deemed to be in a "vulnerable" category, as defined by NHSE/PHE, were advised to cease any Hospice activities immediately. The relevant staff were furloughed and regular calls were made to all of our volunteers to ensure they were not socially isolated and to offer to complete shopping duties where required.

Income Generation

Trust/grant funding, that became available due to C-19, was accessed to cover costs of care provision. An appeal was made to our supporters for funding to supplement losses, we had and would encounter, as a result of the reduction of public gatherings and the potential impact of COVID-19 on the UK economy. All Hospice retail units ceased trading with effect from 19 March 2020.

Care

We attempted to obtain personal protective equipment (PPE) for all staff who required it. Sadly, we were unable to procure adequate PPE to protect our staff for a very short period, due to significant shortages in the system, which affected all UK care providers. Consequently our nursing service ceased for six days, whilst adequate PPE was sought. Our local NHS partners supplied PPE and supporters in our community responded promptly to an appeal made via Social Media. During the short period that we were unable to provide care the NHS ensured that the needs of any patients that required support, were met. Since this time we have provided support to all patients that required care.

The Family Support service staff and volunteers adapted the methods for providing bereavement support, using digital methods rather than meeting clients face to face.

The Transport service continued to function with significant reductions in demand, as hospital appointments were cancelled to reduce the risk of infection to patients.