

# Saint Francis Hospice

## Strategic Plan

2021 to 2022



## Agile, Effective and Resilient

- Care for you
- Support for everyone
- Helping people to live well

saint  
francis  
hospice



living with dignity

# Saint Francis Hospice

## Our Purpose

Saint Francis Hospice is committed to helping anyone in our community who is living with a life limiting illness to receive excellent person centred care when they need it, and ideally in the place of their choosing.



### Our Vision

A world where everyone gets the right palliative and end of life support and care for them and their loved ones.



### Our Mission

To provide local people with excellent palliative and end of life care and support, before, during and after death.

## Our Values



**Supportive** - We listen to people and value peoples' experiences and use them to give the personal support that is right for everyone.



**Compassionate** - We are kind and provide a caring and compassionate environment for everyone. We put people at the heart of our actions and words and support people's choices and decisions, helping them feel safe, secure and valued



**Inclusive and Respectful** - We are open and transparent and value each person's individuality. We respect everyone and value diversity. We believe our different experiences and knowledge make us stronger. Together we achieve more.



**Professional** - We are experienced in what we do as a hospice and as a charity. We encourage everyone to give of their best, in providing the appropriate care and expertise to those who need us and support us.



**Always Learning** - We are open and outward looking, always ready to adapt and change, looking for better ways of doing things, by learning from each other and from the ever changing world around us.

# The Challenges We Face

Despite the success of charities like Saint Francis Hospice and the development of palliative and end of life care within the NHS, there remains an unmet need in our community. The local population is growing and people are living longer leading to more people living with complex and multiple illnesses who need a range of care options from light touch to complex palliative and end of life care. Local people do not always get the support and care that they need.

## Our External and Internal Environment

Now, more than ever, the external and internal environment is affecting Saint Francis Hospice and how it operates. Below is a list of the key factors that have influenced this strategy and which may affect how we deliver against our key goals and objectives going forward.

### The External Environment

- A global pandemic and social distancing has changed how we engage with people and how our staff and volunteers work
- An uncertain financial future with an expected severe downturn in the financial economy because of the global pandemic
- The high street is changing at a fast pace with a shift to people buying and selling online as more social restrictions come into force
- Statutory and voluntary income uncertainty and a potentially reducing supporter base
- Growing competition from big charity brands, like the NHS and more charities in a state of urgent appeal
- Demand for our services is increasing
- Saint Francis Hospice serves boroughs that have an above average population of elderly people
- A growing diverse local population with a wide range of support needs
- Changing commissioning practices with new Sustainability Transformation Partnerships (STPs) forming.
- Increased requirement for evidence based funding and to deliver value for money
- Ensuring continued compliance with our many regulators including the Care Quality Commission, Health and Safety Executive, Gambling Commission, Charity Commission.

### The Internal Environment

- Possible disparity of awareness amongst referrers about our work and our referral criteria.
- Continuing the journey of widening access and profile raising, so that we are known to and accessible to any person in our catchment who is struggling with palliative care needs.
- Increased delivery of services through COVID has set a level of expectation that we will be expected to maintain.
- Increasing voluntary income year on year previously, but during this year, growth has fallen away and investment in future growth undermined due to the global pandemic.
- Our people and services have benefitted from the forced move to better use of digital technology because of the global pandemic. To be sustainable, investment is needed.
- Benefits of our investment to improve systems needs to be realised and processes embedded and new data to be maximised to further inform our decision making.
- Income pressures drive the need for a more business like and agile approach.
- The development of our hospice building is now stopped in light of the changing external environment and financial uncertainty.
- Pressure of COVID 19 on services and people is driving the need to build resilience going forward.

# Working to Meet the Challenges

## The Difference We Want to Make – Our Six Ambitions



## What We Value and Will Uphold



# Our Goals for the Next 18 Months

Our overall strategic aim for the next 18 months is to meet the growing demand for experienced and expert palliative and end of life care services in our local boroughs, as an essential contributor to the local community and as a key part of the health and social care local provision.

## Goal 1

**Sustainability  
Best Use of  
Resources**

## Goal 2

**Our People  
Agile, Resilient  
and Confident**

## Goal 3

**Our Services  
Doing More  
Than You  
Think**

### Goal 1. Sustainability: Best Use of Resources

We will ensure we offer good value for money to our statutory and voluntary funders, whilst meeting the needs of those who use our services. Our priorities are:

- Strengthen our financial position now and plan for the future.
- Digital transformation.
- Build our influence within local health and social care, to help drive developments in palliative and end of life care provision and create new funding opportunities.

### Goal 2. Our People: Agile, Resilient and Confident

Our people are central to our success and we will build on our experienced workforce with a focus on agility, resilience and confidence. We will ensure our people reflect the diverse communities that we serve, and retain and learn from our most experienced staff and remain a great employer and place to volunteer. Our priorities are:

- Support our people to build confidence, resilience and agility so they can continue to respond effectively to our changing environment.
- Ensure our workforce continues to reflect our diverse communities.

### Goal 3. Our Services: Doing More Than You Think

For people who are in need of palliative or end of life care to live and eventually die well and families and loved ones to be supported along the way, we need to not only provide our experience and expertise but also build resilience and coping mechanisms within our systems/services, with our partners in care, the local community and patients and carers too. Our priorities are:

- Continue to provide outstanding care
- Build resilience in our models of care and systems focusing on crisis support/pro-active care and what really matters, models of support.
- Share our knowledge and experience and work in partnership with other care providers to build a stronger palliative and end of life care support system for our community.

# Our Goals and Key Priorities

## Goal 1. Sustainability: Best Use of Resources

### **Strengthen our financial position now and plan for the future**

- Implement a cost recovery program focusing on non-pay, pay and service redesign to achieve cost reduction.
- Review our income sources and re-evaluate our income opportunities in the new COVID-19 climate.
- Understand and benchmark our services, models of care and unit cost/impact and agree the right fit for the future.
- With our increased understanding of unit cost, introduce cost improvement targets.
- Explore more and different opportunities for charitable funding and commissioning of services.

### **Digital transformation.**

- Digital transformation of our services, across complex care provision to light-touch community support and administration.
- Improve access to education, offering remote and digitally enhanced training.
- Develop digital communications tools and platforms, that enable remote and virtual support for services and the charity including buying goods and services online.

### **Build our influence within local health and social care, to help drive developments in palliative and end of life care provision and create new funding opportunities.**

- Increase our involvement by building strong working relationships with all our commissioners, palliative and end of life (health and social care) partners and Integrated Care Systems, increasing our involvement in key NHS and partner decision-making.
- Improve our use of data to influence palliative and end of life care provision locally and nationally.
- Evidence our impact and effectiveness and prioritise communication to our people and stakeholders about our impact and effectiveness at every opportunity, with clarity and transparency.

# Our Goals and Key Priorities

## Goal 2. Our People: Agile, Resilient and Confident

**Support our people to build confidence, resilience and agility so they can continue to respond effectively to our changing environment.**

- Continue to invest in training, and be responsive to an increasingly diverse set of care needs.
- Develop and implement a new People strategy that includes staff and volunteers and expansion of our volunteer roles, including more skilled roles.
- Create an organisation that has a strong underpinning of knowledge and confidence around information technology.
- Continue to develop our use of data and confidence in using data to evidence and inform decision-making.

**Continue to develop our workforce to reflect our diverse communities.**

- Develop a diversity and inclusion strategy to ensure our people reflect our local population and harness the knowledge, skills and experience of our diverse community.

### Our Strategy Enablers



# Our Goals and Key Priorities

## Goal 3. Our Services: Doing More Than You Think

### **Continue to provide outstanding care**

- Develop a relationship strategy in collaboration with our care partners that improves access to referral.
- Review service pathways to ensure flexible delivery of care tailored to individuals' needs and priorities that make the most of our limited resources.
- Ensure our widening access projects are grant ready to take advantage of any funding opportunity to reach more people in need.
- Put in place a short term plan to adapt the hospice In Patient Unit that keeps pace with increased and varied demand for care, and maximises bed capacity with our CQC registration without losing our quality of care.
- Maximise ward use by developing more robust pathways for timely admissions and discharges.

### **Build resilience in our models of care and systems focusing on crisis support/pro-active care and 'what really matters' models of support.**

- Support a robust round the clock expert community service and system, working with external providers, that is sustainable and continues to reach more people.
- Develop and grow virtual groups (social and therapeutic) to reach more people.
- Embed a bereavement strategy that works with local faith leaders and utilises our network of outreach services and partner working.

### **Share our knowledge and experience and work in partnership with other care providers to build a stronger palliative and end of life care support system for our community.**

- Develop our approach to networking and building partner relationships, either political or educational with Primary Care Networks (PCNs), Acute Hospitals, Community Hospitals, North East London NHS Foundation Trust (NELFT), Care Homes.
- Share our experience across the organisation and with care homes and nursing homes and community hospitals to ensure partner organisations have the skills and support they need to do more.
- Build on our established status as a training centre of excellence and establish ourselves as a research active hospice.
- Explore the longer term implications for the Hospice of a single point access to palliative and end of life care.



# Our Impact – How We Are Already Helping



1

**1674** people were cared for from April 2019 to March 2020. Many people used multiple services, for example, a ward stay as an in-patient, physio-therapy, and bereavement support.

2

**305** people were cared for as an in-patient on our ward. (370 admissions)

3

**1583** people were cared for at home, care home or community hospital and **554** people died at home, under the care of our hospice at home team.

4

Our experienced senior nurses made **21,891** telephone calls to support patients, carers and health professionals – GPs and District Nurses, providing strong network of support in the community. Whilst our hospice at home team who care for those at home at the very end of life, made **5,416** calls to people at home.

5

Our clinical nurse specialists, and crisis teams made **1,297** visits to people at home, in a care home or community hospital. Our Hospice at Home team made **4,799** visits to people who needed care and support to die at home.

6

Total calls = **27,307**  
Total visits = **6,096**

7

509 people were supported with bereavement care. **391** were adults, **118** were children. **3198** bereavement sessions were in person and **1340** bereavement sessions were delivered by telephone.

8

**84%** of the people we looked after until their death were cared for in their preferred place.

# Our Measures

## Goal 1: Sustainability

- Use of financial and service benchmarks to assess SFH's spend and reach.
- Defined costs per unit for each service alongside value and impact assessments.
- Reduction in operational cost that is in-line with predicted future income.
- Increased reporting which includes data supported management information to external partners and commissioners.
- Increased use of data driven management information across all teams.
- Increase in staff confidence in using IT and Technology.

## Goal 2: People

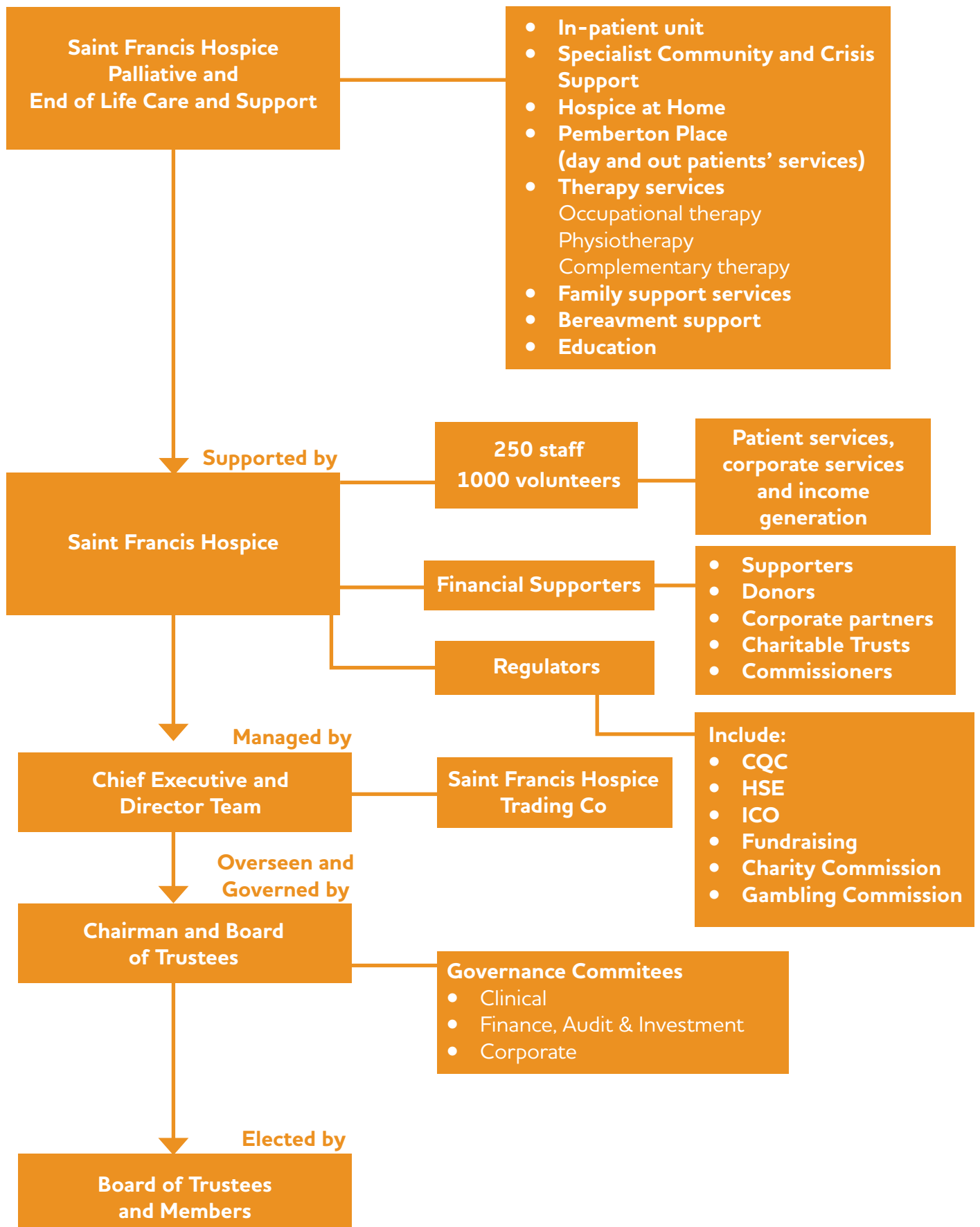
- Increase in use of volunteers in skilled roles.
- Improvements in staff and volunteer diversity.
- More agile workforce with staff able to multi-task with confidence.
- Groups formed that work across the hospice directorates and recognise and value sharing skills and experience.
- More internal appointments, promotions and apprenticeships.

## Goal 3: Services

- An increase in referrals and new referrers.
- Admissions and discharge pathways result in reduced waiting times.
- Changes in services directly linked to more people receiving the care that matters to them.
- More collaborative working and joint decision making with STP and partners in care.
- Hospice ward capacity at CQC registration capacity.
- Quality of care continues to be "outstanding".

# Governance and Management Structure

Saint Francis Hospice is a charity, governed and managed by a team of professional people some who are also volunteers. This is the governance and management structure of the charity.



# Where We Care



An individual's home



At the Hospice



In Care Homes



In Community Hospitals

## Our Local Community

