

ImpactReport

2019-2020



Because every day matters
www.hospiscare.co.uk



Hospiscare
Caring in the heart of Devon

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Welcome

to Hospiscare's first annual Impact Report, replacing our previous Quality Account. We see the impact that our specialist end-of-life care has in our community every day and this report aims to share this impact, as well as the challenges and successes we have experienced this year.



I was incredibly honoured and humbled to be appointed as Chief Executive of Hospiscare in December 2019 following eight years as the Director of Finance and IT. I am passionate about our work and our vision to ensure those in need receive outstanding end-of-life care in the place of their choice.

We were delighted to achieve local and national awards in 2019. Our end-of-life care received a local GOLD award and our nurses received national recognition for the excellence of their care at the LaingBuisson awards. We also collaborated closely with the RD&E hospital to develop a bespoke approach for heart failure patients and their carers.

2020 has been a year like no other for us all. The COVID-19 pandemic continues to impact our way of life and has had a drastic impact on our charity's ability to generate income.

This report, which would usually be published in May, has been held back in order to fully share the highlights and challenges we have faced in the last financial year along with a review of our response to COVID-19 and our adapted priorities moving forward.

Despite these challenges, we have never felt such a close bond with our community. The support we have received at a time that has been so difficult for us all has been overwhelming, and for this we are incredibly thankful.

We continue to face challenges in order to deliver vital end-of-life care to those who need it most. In addition to the uncertainty of the COVID-19 pandemic, we must continue to adapt to the increasingly aging population in Devon, as well as the closure of local community hospitals.

We strive to be at the forefront of end-of-life care and deliver the care that our community wants which, for most people, is to die at home. Funding home-centred care has always been a challenge and this has become increasingly so due to the impact of COVID-19. This has led us to delay our expansion plans of 24/7 Hospiscare@Home until we are in a position financially to move them forward again. However, we remain in the heart of our community with our established Hospiscare@Home and community nursing teams supporting over 2,000 patients and families each year in their homes and on our specialist ward.

I would like to thank everyone who is part of our Hospiscare family, from our staff, volunteers and trustees to our supporters, funders and healthcare partners. Thank you for all of the support you have given to patients and families in need and for the difference we will make together in the coming year.

Andrew

What we do



Funding

We are funded by your generosity; just 18% of our funding comes from the NHS



Care

We care for patients with any form of terminal illness, not just cancer



Local

We are your local hospice charity, caring for patients and their families in the heart of Devon



Our Journey

Hospiscare has been supporting patients with terminal illnesses and their families for almost 40 years. It all started with one man...

The consultant took a look at her and, after a short pause, concluded, 'Send her home and give her a bottle of whisky a day'. I was an idealistic young medical student but I remember thinking, 'There has to be a better way'.

Dr John Searle, an eager young medical student in London, was shocked by a consultant's behaviour towards a dying woman on a routine ward round.

1979

Dr John Searle, inspired by Dame Cicely Saunders' pioneering hospice work in London, accepts an invitation to bring together a group to improve palliative care in Exeter.

1987

To generate more income for patient care, a trading company is formed and the first Hospiscare shop opens in Exeter.

We have 10 bereavement volunteers actively visiting friends and relatives of patients to support them through their grief.

1991

Our care reaches further across the heart of Devon; we have more nurses, as well as 70 volunteers and 12 bereavement visitors.

1996

Hospiscare contributes to the care of approximately 700 people out of the 1000 people who die this year from cancer in our community.

The dedication of our volunteers continues to grow; we now have almost 200 volunteers.

2001

Our Welcome Team launches – volunteers who help ensure patients, families and visitors receive a friendly welcome.

1982

After a public meeting led by Dr Searle in Exeter's Guildhall, Hospiscare is officially founded.

Our first volunteer course is run by Bridget Boxall.

1989

The need for Hospiscare is growing so we launch a public appeal to raise £1.6 million to build a hospice in Exeter.

1992

Searle House, named after our founder, is officially opened by the Duchess of Kent. Our community's fundraising efforts mean that we now have a bespoke hospice building, providing patients with a 12-bed ward and day hospice unit.

Dr Jim Gilbert is appointed as our first Consultant in Palliative Medicine.

1998

Our founder, Dr John Searle, is awarded an OBE for his services to medicine and the hospice movement.

2002

We now have 27 specialist Hospiscare nurses working in our community and our volunteers exceed 1,000.

2003

Our first website provides open and clear communication to our community about death and dying.

2006

Families can now stay close to their loved ones thanks to a generous legacy donation that enables us to provide visitor accommodation at Searle House.

2012

Liz Searle, wife of Hospiscare founder Dr John Searle, runs her first marathon at the age of 70 in aid of her "fifth child": Hospiscare.

Our Hospiscare Enterprise Centre opens in Marsh Barton, allowing us to process more shop donations and maximise income for our charity.

2016

98 admissions to acute care are avoided and our patients receive care in their own homes thanks to the work of the Seaton Hospiscare@Home team.

Hospiscare is awarded an 'Outstanding' rating by the Care Quality Commission in recognition of our exceptional patient care.

2019

Axminster Hospiscare@Home is launched, funded by the local League of Friends, to provide end-of-life care to more people in their homes.

We are proud to receive a LaingBuisson award for Excellence in Nursing and the accolade for end-of-life care for our Hospiscare@Home service in the Markel 3rd Sector Care Awards.

To strengthen our care across the heart of Devon, we announce a merger with our sister charity, Exmouth and Lympstone Hospiscare.

2004

Links with Peninsula Medical School are established to share our expert palliative medicine training with the next generation of doctors.

2011

Patients in Mid Devon can now access our hospice services as Pine Lodge in Tiverton is opened by the Countess of Wessex following an amazing fundraising campaign by the community.

The excellence of our volunteer-force is recognised with the Queen's Award for Voluntary Service.

2015

81% of people want to die at home, but only 24% of people achieve this in Devon. We launch Hospiscare@Home in Seaton, funded by the local League of Friends, to bring 24-hour care to the community.

To support our patients and provide companionship, we introduce the role of volunteer care navigators.

Olympian Jo Pavey, MBE, officially opens our new £1.2m day hospice in East Devon.

2018

In collaboration with the Royal Devon and Exeter Hospital, we launch the Heart2Heart Programme to support patients earlier in their illness following a diagnosis of heart failure.

2020

The coronavirus pandemic drastically impacts many of our services and halts many of our vital fundraising events. Despite this, we strengthen ties with our community through a bereavement alliance and our hospice remains open with our specialist nurses continuing to deliver end-of-life care in our community and on our ward.



Hospices are amazing places. Just seeing everything that you do for your patients at Hospiscare means so much. John feels safe here and loves his room.

No one knows when, if or how we will need services like Hospiscare. I don't think I've got the words to express how wonderful it is here.

Vanessa's husband, John, was cared for on the ward at the end of 2019.

Our Impact

We said...

We would move our care closer to home.

We have delivered our Hospiscare@Home service to Seaton, Axminster, Exmouth and Budleigh Salterton with plans to extend the service to more communities in the future.

We would develop a workforce fit for Hospiscare's future.

We developed a new Nursing Associate role through an apprenticeship with the University of Plymouth and we are working with the RD&E hospital to train nursing and medical students. Our specialist nurses are now trained in Non-Medical Prescribing and our Learning and Development department is running a series of masterclasses for 2020.

We would open up access to Hospiscare provision.

We joined Stonewall, the LGBT+ rights charity, to ensure our organisation provides acceptance without exception and developed an LGBT+ Carers group to meet our community's needs. We are also working with St Petrock's, Exeter's homeless charity, to open up access to this vulnerable community.

We would develop a carers' strategy and action plan.

We consulted staff and carers across our community to find out what they needed from Hospiscare. Implementation of the resulting strategy and action plan starts this year.



Patients and Families

Thanks to Jayne, my grandad's Hospiscare nurse, he stayed at home with no hospital admission until he was directly admitted to the hospice on Boxing Day. In the last week of his life, he had time to say goodbye to us all and told me that I'd better have a girl! Fortunately for my grandad, he knew a week before he died that this was going to be the case.

Grandad Jack died before he was able to meet Florence, his first girl after having five great-grandsons. Sarah felt it was important to take Florence to the Twilight Walk in memory of Jack.

Patients are at the centre of everything we do

We know that every day matters to our patients; that is why a lot of the work we do revolves around life, rather than death.

Our patients want...

To be as healthy as they can for as long as they can

To be with the people they care about

To choose where they die and die with dignity

To know that their loved ones will be looked after when they are gone

Feeling well is hugely important to our patients

We care for people with complex medical and psychological needs and this complexity requires specialist care. Many people believe that the ward at Searle House is where people come to die, but this is not always the case. With its twelve beds and round-the-clock medical staff, the ward is a place where patients can come for symptom management and pain control before returning home. Many of our patients never need to visit the ward.

Alongside our medical staff, our team of complementary therapists are here to support patients to feel as well as they can. Treatments are also available to family members and carers to ease their stress and give them some much-needed 'me time'.

We want patients to feel nurtured and that you don't just become your symptom; you don't just become your disease which can happen when someone receives a terminal illness diagnosis.

Sarah, Complementary Therapist



Hospicare care is more than medical care

We are committed to providing the end-of-life care that our patients ask for. This may be supporting patients with Advanced Care planning; discussing with them everything from resuscitation consent to the music they would like played at their funeral. Sometimes our care can take a different form; we have helped patients and families to have one final holiday by liaising with medical teams in other parts of the country and preparing special medical kits. We have even stepped in as wedding planners, arranging short-notice wedding and friendship ceremonies.

We are here for families

We know that the diagnosis of a terminal illness does not just affect the person diagnosed, but also their loved ones.

Our doors are open to friends and family members during their loved one's illness and they don't close after their death. Our trained bereavement volunteers are here to offer telephone support to those close to the patient, whether a relation, a carer or a friend. Our volunteers are at the end of the phone to offer support as frequently as is needed, as well as keeping the person they are supporting informed about the different bereavement support groups we offer which include drop-in teas, a walking group and HEAL where bereaved friends and family come together for evening meals at a local pub.

Many family members like Sarah choose to organise or take part in an event in memory of a loved one. Although our events are an important part of raising funds for our charity, they are also vital for connecting with those in our community. We celebrate Light Up A Life every December to support our community through what can be a challenging time of year by celebrating the memories of loved ones who are no longer with us.

In 2019...

 **96.7%** of our patients recommended Hospiscare on iWantGreatCare*

 **582** people were allocated a bereavement volunteer

 **112** thank you letters and cards were received

*iWantGreatCare is an independent service that allows patients to provide feedback on their care

Caring in the Community



response to the letter sent to him by the Hospiscare team. Laura was overwhelmed and moved to tears by Jürgen's reply which included the rousing line from Liverpool's anthem, but an equally personal message to Laura: "You'll Never Walk Alone".

We respond to our community's needs

Hospiscare@Home was developed as a response to the greater call on our services due to the recent reduction by 50% of community hospital beds. Community hospital closures across Devon have led to an increase in admissions to the acute hospital, making accessing care and visiting loved ones more complex and distressing for patients, families and friends.

We plan to extend Hospiscare@Home to more communities in our region so that patients who choose to die at home have the support they need to do so.

supports patients to come to terms with their diagnosis and evolve new plans and aspirations.

Each of our three centres in Exeter, Mid and East Devon offer day hospice services with a re-enabling approach to supporting local people living with a terminal illness. Patients can participate in a variety of therapeutic and creative activities, from complementary therapy to seated exercise classes, as well as having the chance to socialise with other patients, volunteers and staff.

We aim to increase links with our community wherever we can; as such we run a monthly Film Club at Searle House that is available to anyone: patients, family, friends, carers, and staff. We also host weekly rehearsals of the Hospiscare Choir.

Terminal illness does not discriminate and neither should our care

There are many vulnerable groups within society that are at risk of missing out on expert end-of-life care, which is why Hospiscare has formed a number of partnerships to support vulnerable members of our community.

In partnership with the University of Exeter, Hospiscare is part of a research project that focuses on access to end-of-life care in low-income areas in the South West. Research shows that people living in these areas are less likely to access end-of-life care and the project aims to explore attitudes towards death and dying in low-income communities to find out how access and attitudes can be changed.

In 2004, the NHS launched its National End of Life Care Programme with the central aim of improving end-of-life care for all over the following decade. In response to this, Hospiscare has worked with Exeter Prison's healthcare team since 2012 to provide training in end-of-life care. The prison now has a designated end-of-life care unit which can support up to 11 prisoners and Hospiscare is currently working to develop link nurses to support inmates at the end of their lives.

This year, we started to work closely with St Petrock's, an Exeter charity that supports people who are homeless and vulnerably housed, to deliver drop-in clinics to vulnerable members of our community.

I don't know what I would have done without them; everyone is so kind.

When Laura's health took a sudden and rapid decline, our Hospiscare@Home team for Exmouth & Budleigh Salterton began to care for her at home.

As a lifelong Liverpool FC fan, Laura decided that she didn't want to be cared for in her bedroom as most of her Liverpool memorabilia and her television were in her living room. Hospiscare@Home arranged for a specialist medical bed to be positioned facing Laura's television to ensure that she never missed a match and could be close to all of her Liverpool treasures.

Laura died peacefully at home on 30 March 2020 with the support of Hospiscare@Home, which was her wish.

We care across the heart of Devon

Many people believe that to access our care, you need to come in to our ward. In fact, most of our care takes place in the community.

Following her diagnosis of lung cancer, Laura became a Hospiscare patient and was visited regularly by the Exmouth Community Nurse Specialist team.

Laura's health suddenly declined, making it difficult for her to move around her home and perform everyday tasks. Our Hospiscare@Home team began to care for her at home and enabled Laura to do the everyday things she had missed, like washing her hair using a special microwavable cap without ever having to leave her bed.

Hospiscare@Home were also on hand to help Laura achieve the extraordinary. At just five years old, Laura's father took her to her first Liverpool match and in the 85 years that have followed, Laura's devotion to the club never waned.

As her health declined, Laura expressed her wish to speak to Liverpool Manager, Jürgen Klopp, before she died. Laura's nurse, Helen, worked with the rest of the team to draft a letter to Jürgen expressing Laura's wish to make contact.

On March 11, Laura was looking forward to the evening's Liverpool match when she received the letter of a lifetime. Jürgen wrote a personal reply to Laura in

Hospiscare@Home enables over 90% of patients to die with comfort and dignity at home.



Hospiscare@Home



Average for Devon

Our care extends across 1,028 square miles of Devon's heartland

Many of our patients access this care through our community-based Clinical Nurse Specialists (CNS). Our CNS team treat patients who have complex medical needs by visiting them at home during the day. An overnight telephone advice service is available and additional support is delivered through nurse-led clinics in the community. These clinics allow our specialist nurses to assess and review patients' symptoms and provide an opportunity to discuss any concerns. They are also an opportunity for patients to find out about other Hospiscare services and activities, including complementary therapy and support groups.

In addition to the complex medical needs of our patients, Hospiscare's CNS team are trained to support the psychological wellbeing of those within our care. Being diagnosed with a terminal illness can drastically change life plans and aspirations. Our CNS team

In 2019...

 **1,871** of our patients were cared for at home

 **2,609** attendances were recorded at our day hospices

 **907** minutes of film were enjoyed at Film Club

Learning and Developing



It has felt really hard at times, but something drove me on and I have always felt it was the right thing for me to do. I know that I am growing through it; I have changed through the experiences I have had so far and it has given me a lot of confidence within my work. I feel like I understand the role, and nursing in general, more now and appreciate how diverse it is.

Sally became Hospiscare's first Trainee Nursing Associate when she began the two-year programme in September 2018.

A new role for Hospiscare

Sally Reed embarked upon a new chapter in her life by taking on the role of Trainee Nursing Associate at Hospiscare, in partnership with the University of Plymouth.

The Nursing Associate Apprenticeship offers a new and important route into nursing, enabling Sally to train whilst in paid employment at Hospiscare. The two-year programme comprises a full-time schedule of learning on the job with one day attendance at university per week.

After Sally has completed her training, she will be employed at Hospiscare as a Nursing Associate. This role will have a great benefit for our charity as Sally will have gained a breadth of experience across nursing with a specialist knowledge of palliative care in both a medical and home setting.

We are specialist training providers

At Hospiscare, we provide training internally for our staff and volunteers, as well as externally for health and social care professionals outside our organisation.

Our Learning and Development department provides a comprehensive annual programme that includes clinical training opportunities such as syringe pump training and symptom management, as well as skills development courses for all, such as project management and resolving conflict in the workplace.

As specialists in palliative care, training the next generation of nurses and doctors is of vital importance to our charity. The strength of our palliative medicine training was recognised in 2019 when the annual General Medical Council report ranked palliative medicine speciality training for registrars in the South West as the highest in England for "overall satisfaction". Palliative medicine speciality training is provided at just three sites in Devon, with Hospiscare being one of these. Peninsula Postgraduate Medical Education, the training body that covers our region, was ranked highest for criteria including quality of teaching, clinical supervision and the experience provided. Over the past five years, Peninsula has ranked within the top half of Deaneries in England, demonstrating a consistently high level of performance in palliative medical speciality training in the South West region.

Training the next generation

Hospiscare provides clinical placements, education and assessment for the medical students from the University of Exeter Medical School. In 2019, over 70 medical students were able to learn essential skills in palliative



medicine by shadowing our Hospiscare@Home nurses and our Community Nurse Specialists. These students also spent time with patients and doctors on the Hospiscare ward and participated in tutorials and clinical skills sessions about palliative care, symptom control and bereavement.

Our patients are often delighted to speak to students and help them learn. These placements help the students understand the importance and relevance of good palliative care for their future careers as doctors.

Looking ahead, our Learning and Development department is hoping to widen access to young people in secondary education by planning a work-experience programme for 17-year-olds. A range of experiences will be offered to students across the breadth of our organisation, including placements in our clinical, fundraising, retail, marketing and support teams.

In 2019...

-  **75** medical students undertook clinical placements at Hospiscare
-  **100** workshops were delivered
-  **656** people attended our training sessions

How we Maintain our Care and Clinical Standards



Dr Cate with a patient on the ward

As a charity that provides a care service, we are registered with the Care Quality Commission (CQC) and the CQC's five key lines of enquiry form the basis of our care.

Caring

As a hospice, our care is centred around helping people feel as well as they can for as long as they can. We were successfully awarded funding from the Innovation in Healthy Ageing Challenge Fund from the European Regional Development Fund, processed by Devon County Council. This grant has enabled us to focus on re-enablement work with our patients benefitting from the expertise of a physiotherapist and an occupational therapist. Through the work of these two practitioners, we are developing a patient diary to give our patients ownership of their care.

Food February took place in 2020 following new regulations regarding preparation of food for patients. We opened up our day hospice in Exeter to share our learning and Lil Badcock, our Chef Manager, took to the floor to provide hands-on demonstrations and food-sampling of different textures and thicknesses of food according to new regulations.

Responsive

We are committed to responding to the needs of our community and this means delivering care where it is needed. We want to open up conversations around death and dying so that everyone in our community knows how to access end-of-life care. This has led to a partnership with St Petrock's, the Exeter charity for people who are homeless and vulnerably housed. We are working with St Petrock's to deliver drop-in sessions and develop relationships in order to bring our care to this vulnerable community.

To widen access to our care, we are at the beginning of a video prescribing project. Nurses can prescribe patients videos on self-management and support for conditions including anxiety, breathlessness and dementia care. This will enable our patients to have more ownership over their care as they will be able to access these videos from home.

For many of our patients, planning for the future becomes a significant concern following a terminal illness diagnosis. We are fortunate to have the support of local solicitors who run a free legal clinic where patients and their families can receive legal advice and practical support to enable them to plan for the future.

Effective

The benefits of exercise for both physical and mental wellbeing are well evidenced, but keeping active with a terminal illness diagnosis can be difficult. As part of our day hospice programme, we run yoga and seated exercise classes to support patient re-enablement and provide gentle forms of exercise that are accessible to our patients.

As a hospice, communicating effectively with other health organisations, as well as with those under our care, is of the utmost importance. We have made two significant changes to develop the effectiveness of our communication.

In 2019, we moved our patient records to SystmOne, a computerised record keeping system used widely by GPs. This enables our clinical staff to access information from across healthcare settings and communicate with any healthcare agencies that are involved in a patient's care.

In 2020, after almost a year of development, we prepared to launch our new website after consultation with staff, patients, families and the local community. The new website prioritises the user's journey to ensure that information about our care and services is easily accessible and that resources, such as video prescriptions, are readily available.

Safe

Safety September takes place every year at Hospiscare to bring safety, whether that of our patients, staff, or those in our community, to the forefront. During the month, information on safety-related topics is broadcast throughout our organisation and staff and volunteers are encouraged to have their say on how we, as an organisation, are operating safely.

Our 'Freedom to Speak Up Guardians' are appointed to protect patient safety and quality of care. The Guardians ensure that staff are supported in speaking up and address any barriers that may prevent open communication. We are continuing to develop a culture where issues raised are seen as opportunities for learning and development.

We have a dedicated Estates team who are responsible for the safety of staff, patients and the public across all of our sites; from the ward in Exeter to each of our twenty shops in the community. From hygiene to risk assessments, the Estates team are our champions of health and safety for all.

Well-led

All of our clinical staff are responsible for providing high-quality care that improves our patients' quality of life. To support this and to ensure that we are utilising every learning opportunity, we developed a Patient Experience and Safety (PES) committee that meets monthly to scrutinise a range of issues, such as safeguarding, safety alerts and patient and family feedback.

In 2019, we established a Clinical Quality Team, pulling staff from across Hospiscare to form a body that works together to examine our clinical practice and to provide transparent reports to our Board of Trustees about the safe delivery of our care.

In 2019, we also had two significant changes of staffing. Andrew Randall became our Chief Executive following a period of dedicated service as Interim Chief Executive. We also appointed Kelly Prince into the new role of Head of Governance and Data Protection to lead in all areas of data protection compliance.

Our Family



Throughout the charity, we treat every person as an individual and this extends to their meal choices too.

I began as an agency chef and there was a patient who hadn't eaten for over three weeks. I suggested she try some eggs and she agreed. I made her three spoonfuls of soft, buttery and creamy scrambled eggs and she said, 'That is the best scrambled egg I've ever had.' She died the same night, but it was so rewarding knowing that she left us feeling wonderful about her food again.

Lil, our Chef Manager, has worked at Hospiscare for over twelve years.

It's the people who shape our organisation

Every person within our Hospiscare family is dedicated to making every day matter to our patients and their loved ones.

Wellbeing is at the centre of what we do and, as an employer, we are committed to the wellbeing of our staff and volunteers. We are proud to be a Disability Confident Employer and a Stonewall member which demonstrates our commitment to providing equal and open opportunities to our staff.

We are also registered with the Health Assured Employee Assistance Programme to ensure that our staff can seek confidential advice, support and counselling if they are experiencing problems at home, financial difficulties or are suffering with their mental health.

Within our workplace, we have also recently established a Wellbeing Group whose sole focus is the mental wellness of our staff and volunteers and how best we can support and promote wellbeing in our workplace.

The expertise of our doctors and nurses was recognised in June 2019 at the Devon and Cornwall Outstanding Care Awards, where we were named "GOLD" winners in the end-of-life care category. In November, our nurses were nationally recognised at the LaingBuisson Awards, otherwise known as the Oscars of health and social care. The award for Excellence in Nursing was a meaningful recognition of our commitment to patient care.

People come to volunteering for all sorts of reasons. For me, it is because Hospiscare holds a special place in my heart.

Kelly's step-dad, Malcolm, was diagnosed with cancer and passed away four years ago under our care. Shortly after Malcolm died, Kelly knew she wanted to give something back to Hospiscare by becoming a volunteer in our Marketing and Communications department.

Hospiscare could not exist without the dedication of our volunteers

We have over 1,000 volunteers and, on average, our volunteers donate three hours of their time per week which equates to approximately £1.3m annually.

We have 31 diverse volunteering roles at Hospiscare, from care roles on the ward and in our day hospices to creative roles such as gardeners, flower arrangers and photographers.

Our volunteers give so much to Hospiscare, not only committing their time and energy but also

bringing their personal and professional expertise to their roles. Hospiscare shop volunteer Rachel says "volunteering works both ways" and this is echoed by many of our volunteers; our charity benefits hugely from our volunteers and equally, they benefit from giving something back and being a part of their community. Our volunteers are also able to access a wide range of training opportunities from our Learning and Development team at no cost to further equip them for their roles, as well as for their general professional development.

We value the unique skills and experience that every volunteer brings to Hospiscare. Like Kelly, many of our volunteers have a personal connection with our charity and want to give something back to the organisation that has helped them or someone close to them.

In 2019...

 **33%** of our employees have been recognised for long service of five years or more

 **48%** of our volunteers have been with us for five years or longer

 Our most popular volunteering roles in September 2019: **45.6%** retail, **17.5%** fundraising groups, **5.5%** care navigators, **5.1%** drivers

Waiting

*You ask: What does waiting mean to me?
Well, I see it as an opportunity,
There are many things I've not yet done,
The extra time allowing me, do some.*

*I've used time to tell my wife and family,
I love them, and have enjoyed their company,
We've talked of the many things we've shared,
We'll do more if I'm so spared.*

*Some traits in me I cannot change,
But I can explain those, that are strange,
This helps to build my bond with friends,
By your use of words your trust depends.*

*Illness can reduce your level of activity,
That's no reason to dwell on misery,
Situations change, you meet new folk,
Compare notes, to laugh and joke.*

*Sometimes your life can be a strain,
Sharing may often ease your pain,
If friends can put their trust in you,
Helping them could help you too.*

R.

A poem written by Richard as part of the Waiting Times project.

With the reduction of community hospital beds and the continuing challenges of the economy, collaboration is vital for our charity.

We work closely with the RD&E hospital, particularly on our Heart2Heart project, funded by St James' Place Foundation via Hospice UK. The project was specifically developed to support local people living with heart failure. We understand that a diagnosis of heart failure can leave patients with a lot of uncertainty and unanswered questions and the programme aims to address this. At each session, heart failure nurses and Hospiscare nurses guide patients and their carers through topics such as treatment options, practical tips and planning for the future.

It is vital that our care is available to all in our community and thus we also work closely with the Devon Partnership Trust so that our community team can regularly visit the dementia ward at Franklyn Community Hospital. Working alongside Primary Care Networks is also essential to build relationships with GPs and local services so we can improve end-of-life care in our community.

With patients across 1,028 square miles, many based in rural communities, accessibility of medication can be difficult. That is why we collaborate with Devon Freewheelers whose volunteers deliver essential medical substances, such as blood, medication and medical equipment, on their specialist motorcycles. This collaboration ensures that patients living in remote areas or without access to transport are able to receive the medication they need.

We collaborate to create opportunities

In 2019, we partnered with the University of Exeter on a special project called Waiting Times. The project as a whole examined the experience of time and waiting in healthcare by eliciting participants to create and share stories of their experience.

Our patients have a unique view of waiting times in healthcare as their experience goes further than waiting for appointments, tests results and a diagnosis. The project opened up a conversation about waiting for death. In this respect, the project proved to be cathartic for our patients, but it also provided them with the opportunity to examine their lifetime and the legacy they wished to leave behind.

Research indicates that storytelling and group activities have a therapeutic benefit for patients. In addition to this, the project created a unique opportunity for our patients to bond through shared experiences and memories, as well as build digital legacies that will stretch far beyond the span of the project.

In 2020, we are looking forward to working with Balloons, the Exeter charity that supports bereaved children and young people. Together, we will develop resources and education for schools across our catchment area to develop bereavement care for young people in our community.

Our Partners



Strong ties with our local business community are essential for the future of our charity

We are fortunate to have been chosen as Charity of the Year by several local businesses, including Otter Garden Centre. Their efforts raised £11,500 for us in 2019 and they chose to support us again in 2020.

Many of our corporate supporters have worked with us for a number of years. Since 2011, Thrifty Car & Van Rental has donated £1 for each car rental booking made via their website. Thrifty are a national business and as their business has grown (they now have over 100 branches throughout the UK), so have the donations we receive, which now exceed £30,000 each year.

Making personal connections

There are some local businesses that we have particularly close ties to, such as Burgoyne's, the family-run estate agents owned by John Burgoyne. John is the son of Marnie and David Burgoyne, both of whom were original members of the Exeter Friends of Hospiscare who have supported our charity since its very beginnings in 1982. Burgoyne's sponsor our popular golf day each year, held in memory of Marnie, who died in our hospice in 2000. The Marnie Burgoyne Memorial Golf Day is led by an amazing committee of

volunteers and since its inception in 2005, the event has raised over £200,000.

In addition to fundraising support from our local business community, our charity benefits from corporate volunteering programmes. Staff members at EDF Energy are allocated volunteering days and we have welcomed their support with tasks such as sorting donations at our warehouse in Marsh Barton. NatWest and RBS staff have also volunteered to help with a range of roles, such as collecting Christmas trees and volunteering in our day hospice and garden at Kings House in Honiton. These businesses are keen to give something back and to be of benefit to their local community.

We also receive invaluable support from local solicitors who give up their time each year in May to take part in our Will Fortnight. This event raises around £16,000 a year for our charity and, as well as being a fundraising campaign, it helps to encourage our supporters to put their affairs in order by making their Will. Additionally, some of our local solicitors donate their time to take part in our monthly legal clinics where patients can discuss confidential legal matters and receive advice free of charge.

It's all about inspiring patients by finding different ways of working with them. It's not about telling patients what they can or can't do, it's about giving them the chance to be the initiator and lead on what they want.

Carolina's role as Wellbeing Project Physiotherapist was funded by the Healthy Ageing Project grant.

Funding from the Healthy Ageing Project grant enabled us to employ a physiotherapist and an occupational therapist from June 2019 to March 2020. These vital roles, fulfilled by Carolina Read and Vanessa Martin, have enabled our staff to receive training and advice in these specialist fields, as well as having a direct impact on patient care.



Your Money

We receive just 18% of our funding from the NHS

Our charity relies on the support of our community to generate 82% of the income needed to fund our care. This ensures that end-of-life care and family support is delivered at no cost to our patients and their loved ones.

Grants are a vital source of income for our charity and we apply for these for a range of purposes, from funding therapeutic roles, such as Carolina and Vanessa's, to funding initiatives such as our Heart2Heart Programme and Hospiscare@Home.

Gifts in Wills form a vital part of our charity's income. Without the generosity of those in our community

who choose to remember our charity in their Wills, we simply could not operate our services.

Every year, we invite our community to take part in a number of events to raise funds for our care. We aim to offer something for everyone, from challenge events like Wild Tri to walks that celebrate community and togetherness such as Men's Walk and Twilight Walk.

We need to raise approximately £8 million every year to provide our services. This is how our income and expenditure was split in 2019-20:



- Fundraising 29%
- Gifts in Wills 20%
- NHS contribution 18%
- Partner charities 16%
- Lottery 9%
- Shop profit 3%
- Education 2%
- Investment income 2%
- Other 1%

- Ward 41%
- Community nursing 38%
- Fundraising & gifts in Wills 11%
- Lottery 4%
- Day hospice services 4%
- Education 2%

Figures exclude:

- Transfer of funds from merger with Exmouth & Lympstone Hospiscare
- Loss on reserve investments due to impact of COVID-19 by 31 March 2020, which totalled £387k

Thank you

We couldn't do this without you

Thank you to the runners, the trekkers, the wing-walkers,
The thrill-seeking, adrenaline-pumped supporters of our cause.
Thank you to the gardeners, the landscapers and the outdoor-lovers,
who shared their outdoor sanctuaries with us all.
Thank you to the bakers, the brewers, the sippers and the eaters,
who opened their homes, schools and village halls.
Thank you to the bargain-hunters, the collectors, the 'let's have a clear out'ers,
for making our shops their first port of call.
Thank you to the sewers, the crafters and the artists,
who gifted their creativity to us all.
Thank you to the employers, the employees; our community champions
who want to give something back (and will do anything for some team competition!).
Thank you to the bingo players, the tea dancers, the Christmas hamper makers,
(the Christmas hamper winners!), the variety show performers, the pamperers,
the second-hand salers, the singers and the rafflers;
We couldn't do this without you.

22

Hospiscare Heroes' blogs were shared to celebrate the achievements of our community



142,367

items of ladies' clothes were sold in our charity shops



12

 people signed up to Wing Walk for our charity

71

 properties were cleared by our House Clearance team

49

Coffee Mornings were held



Over 2,000

 people visited our Open Gardens

54

 Christmas Hampers were won

We have

11

 active support groups in our community with many long-standing members



We are both hugely grateful to the staff at Hospiscare who gave Phillip such tender and expert palliative care. One of his last acts of kindness was to change his Will so that he could leave a donation to Hospiscare to say thank you. We both felt it was important to support such an important charity.

Phillip, artistic director of the Llanarth Group and a well-travelled actor, author and teacher, died in our care with his wife, Kaite, by his side.

Every year, one in five of our patients is cared for by the generosity of people like Phillip who leave a legacy that lives on even after their death.



The Need for Hospiscare

An ageing population

Changes in lifestyle, health and welfare mean that we can all expect to live for longer, but not necessarily in good health. Life expectancy in Devon is particularly high and an older, rural population means greater pressure on health services.

All Devon districts have a higher proportion of those aged 85 and over than the rest of England, as well as a higher proportion of single-person pensioner households and an estimated 20,000 carers who are themselves older.

The population of our county is also changing, with a projected increase in population of 100,000 over the next 20 years. There is a greater need for end-of-life care than is currently available and with Devon's ageing population, demand is only going to increase.

People are now living longer with multiple diagnoses and, although treatments are improving, it means that patients towards the end of life have complex needs which often require a holistic, specialist approach to enable them to achieve the best death.

We can't change a diagnosis, but we can change someone's life after diagnosis

Every year, we care for over 2,000 local people living with a terminal illness. This care is provided at no cost to the patient and their family as we believe that everyone, no matter their circumstances or economic standing, deserves the right to a good death.

Our care has never been more vital with the changes in our demographic as well as the reduction by 50% of community hospital beds in our area further increasing the demand on our service.

We are here because of our community

Our community needs the specialist end-of-life care that our doctors and nurses provide every day and, in turn, we need our community. From legacies like Phillip's to sponsorship raised from fundraising events, we rely on local support to provide 82% of our funding in order to deliver our care to those who need it most.

Death is a part of life and everyone has the right to make choices about their end-of-life care. We are here to honour those choices because we know that every day matters to our patients and their loved ones.



I am really grateful to be in the caring hands of Hospiscare.

Richard, patient

Looking Ahead

A simple hug or just a touch on the shoulder to support families; these are the things we haven't been able to do because of the distance we need to keep at the moment to keep everybody safe. I think our nurses find it tough because they can't do the job they normally do; smiling and laughing with patients as although people are headed towards the end of life, there is still a lot of laughter and enjoyment at times.

Julie, Ward Manager



From March 2020

In order to look ahead, we must take into account the past few months. The impact of the COVID-19 pandemic and subsequent national lockdown from March is still being felt and for all of us, the future still seems uncertain.

From mid-March to the end of June, we reviewed and acted on 320 pieces of information relevant to managing care during the COVID-19 pandemic.

Throughout the pandemic, we kept our ward open, although we had to make some adaptations for visitors based on government guidance. Our Hospiscare@Home 24/7 service in Seaton, Axminster, Exmouth, Budleigh Salterton and Lypstone has continued to care for patients in their homes during the last weeks and days of their lives.

We made the difficult decision to suspend our day hospice services in accordance with government guidelines as many of the people benefitting from this service were vulnerable and shielding. Instead, we supported those same people through our specialist community nursing teams.

Part of our response involved setting up a Clinical Co-ordination Centre (CCC) at Searle House which became a single point of contact for all referrals and calls from patients, families and healthcare professionals.

We designed the CCC to run 7-days-a-week and extended the operational hours to enable people to contact us every day until 8pm. Following this, we continued to run our 24-hour, 7-day-a-week advice line to ensure that our community was never without us and could contact our team whenever they needed to.

In keeping with GPs, we began using secure video calling software for consultations with patients, enabling our doctors and nurses to communicate face-to-face with patients and carers at this time without risk of contracting the virus.

Personal Protective Equipment (PPE) was sparse at first and although its availability has now improved, we still have to monitor our stock levels and require regular deliveries. We cannot thank our supporters enough for coming to our aid when we put out a call for PPE; their donations have been a huge help.

The need for PPE has presented our charity with a new financial challenge; from March, many of our fundraising events were cancelled and our shops were forced to close resulting in a drastic impact on our income. We shared the news that we predicted a minimum loss of £1 million during the financial year due to the impact of COVID-19 on our fundraising.

The road to recovery

As we all strive to find a 'new normal' way of life, our charity is committed to continuing its delivery of end-of-life care and bereavement support to our patients and their families.

Working with those who need our expert end-of-life care remains our constant focus and therefore providing this care will remain our highest priority through the difficult times to come.

Our priorities

Ensure end-of-life care remains accessible

We have developed a '5 Ways' strategy to ensure that patients, families and healthcare professionals are able to connect with us and access our service through home visits, a stay on our ward, phone contact, secure video calling or coming in to a Hospiscare clinic.

Be experts in our field

We will provide a 'hub' of training expertise in palliative care for doctors, nurses and other healthcare professionals as well as linking with universities and researchers to be at the forefront of palliative medicine.

Care for all of our patients' needs

We will strengthen our multi-disciplinary team approach to provide holistic care and support for our patients to ensure that we meet more than just their medical needs.

Adapt our fundraising to the 'new normal'

We seek to return our fundraising activities to normal levels, but the impact of the pandemic on our finances, staff and methods of working cannot be underestimated. We will amend and review our methods of running our services, shops and fundraising to meet the new challenges, whilst always retaining the needs of our patients at the heart of all we strive to achieve.

