Responding to Hospice Care Liberause every day is precious Care Liberause every day every day is precious Care Liberause every day every d



Annual Review

2022-2023

Holistic support for patients and families

Clinical - Emotional - Spiritual - Practical - Financial



Introduction by Sarah Church

(Chief Executive)

It's lovely to welcome you to our latest Annual Review – thank you for taking the time to read it.

Over the last year we have continued to expand and develop our services, listening and responding to

the needs of our local community and the feedback we have had from our patients, carers, staff and volunteers, to ensure that we provide the best service we can.



Referrals to our care increased again over 2022-23, and we cared for a total of 2,150 patients, as well as their families and carers. The numbers of patients being referred to our In-Patient Unit (IPU), however, is far greater than the number we are able to care for there, as we still currently only have 14 beds, in comparison to our pre-Covid number of 18. We desperately need to return to an 18-bed IPU, as well as be able to offer our Living Well programmes and community care services to a greater number of people who need our support. The success of our Response Service, which provides a timely response to patients who are experiencing a rapid decline. illustrates how important our community care is, with the team averaging 150 home visits and 550 phone calls a month. Our Virtual Ward was also very successful, caring for 28 patients with the most complex physical needs, over a five month period, keeping them out of hospital and at home, where they wanted to be. The increased demand that we are seeing for all of our services – on our IPU, in the community and through our Living Well programmes at the Hospice and Beacon Centre - illustrate how important it is that we expand and develop our services so that we can reach more people who need our care.

To this end, we have embarked on an exciting project to build a new, state-of-the-art Hospice on our existing site in Farnham. The additional IPU rooms, clinical and consulting rooms, wellbeing, exercise and education suites, and family rooms that it will provide will enable us to keep up with the growing demand we are seeing for our services, which is predicted to increase even further over the coming years. It will transform the way in which we work and, although we will miss the old building, which holds such special memories for so many people, we are very excited at how our new, larger, purpose-built Hospice will enable us to care for thousands more people in the years to come.

I hope you will enjoy reading about our new Hospice project, finding out about our latest referral and service figures, and hearing from our patients, as they tell you about how the care they have received has helped them and their families.

Jarch Church

Our Living Well service supports patients and families who need help managing everyday life. Its doctors, nurses, therapists, dietitians, patient & family advisors and Pastoral Care team visit patients at home, providing support in the community, and also offering individual and group sessions at the Beacon Centre.



Our two Living Well programmes, Living Well with Illness and the Creative programme, offer clinical, practical and emotional support to patients who need help managing living everyday life with their illness. Each offers a two-hour weekly group session over a course of eight weeks, focusing on different topics: the Living Well with Illness sessions include topics such as food and nutrition, keeping mobile and sleeping well, while the Creative sessions include culinary therapy, therapies through nature, and pottery. Whilst they are at the sessions, patients can talk to the clinicians there, and also chat with and get to know each other. Pam, who is cared for by our Living Well team, has attended both of the programmes and found them very beneficial.

Pam's Story

"Immediately you feel that there's a warmth around you," she said. "They support you from that first interview, right to the end. They go into mobility problems, sleep problems, pain problems, everything. You meet



other people there too, and you can ask questions as well. It's the whole community thing really, the bringing together of people. You hear about other people's problems and how they cope with them. If you could see the nursing staff here, the tenderness, the help, the comfort they keep you in. Understanding you're not alone. They hold your hand right to the end. I can't tell you how good that is."

"My love was of gardening, which I cannot now do, but there you do tabletop gardening, and aromatherapy, and cooking. In the cooking session I had no idea we were going to make Christmas puddings, but when we arrived the whole table was laden with ingredients! I've always made Christmas puddings, and the feeling of achievement, of being able to do that again, was marvellous."



We also offer individual sessions, in which our nurses and health care assistants meet with patients to discuss their symptoms and any problems they may have, phone them to check on how they are



doing, and visit them at home if needed. Our physiotherapists offer individual support tailored to each patient's needs, and our occupational therapists help patients to participate in their daily activities and manage any symptoms that impact their independence and quality of life.

"I have had an occupational therapist visit the house. They came to see if I needed a handle outside the back door, and they have supplied me with two perching stools. I can sit at my kitchen table and help with the preparation of food now. Also sitting, as I have to a lot of the time, I was getting quite sore on my coccyx, and they arrived with an inflated pillow for me to sit on. It's marvellous. These things I would not even have thought about, are so helpful."



"I feel very at ease coming to the Hospice now. When you first come in you think am I going to enjoy this? But it is wonderful!

You are cared for from the moment you arrive, and you go home feeling uplifted. They help you, whatever age you are, for however long you need. They are marvellous people; I can't speak well enough of them."

Our community team supports patients who want to be cared for at home, and our clinical nurse specialists (CNSs) often visit patients, to tell them about the care we offer and find out more about the support they need. When Alan was referred to our care, he was visited by Luke, one of our CNSs, who told him more about our care and helped to ease his anxiety around his diagnosis.



Alan's Story

"Being told I had cancer and that I needed palliative care was a lot to take in, and I was a bit apprehensive at first," said Alan. "When Luke came round to see me, I wasn't sure what we were going to discuss, but he really put me at ease. He was absolutely excellent. He told me about the care that Phyllis Tuckwell provides, gave me an overview of the services, and then we went through the ReSPECT form."



ReSPECT forms are forms for patients to fill in to tell us about how they want to be cared for in an emergency. ReSPECT stands for Recommended Summary Plan for Emergency Care and Treatment, and the forms were developed by the NHS to create personalised recommendations for patients' healthcare providers to use in an emergency, if patients themselves are unable to make or express their wishes.

"We did the form at my pace," said Alan. "Luke asked me if I was ready and told me that there was no pressure, and that if I wasn't ready it was fine to do it another day. I wanted to do it though, so he said we could stop whenever I liked, and because there was no pressure everything just flowed and it was easy to keep going. We filled in the whole form that day, right down to where I wanted to spend my last days. He just made the whole thing easy for me."

"I've got a lot of praise for Luke - he was amazing. After that first meeting, he's kept in touch. He rings me every couple of weeks to see how I'm getting on and he's adjusted my medication too, as needed. He's always at the end of phone if I need him. If he's not in the office when I call, I just leave him a message and he gets back to me.



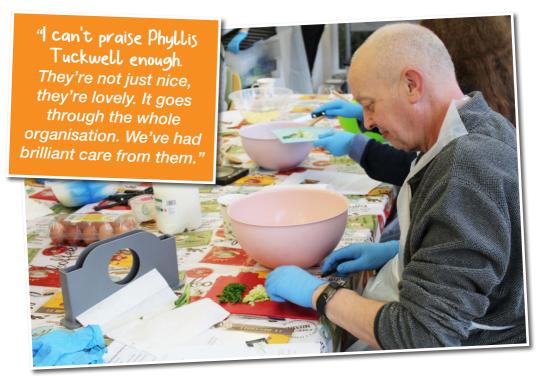
He's very good at getting back to me, and I know that he'd come round to the house again to see me if I needed him."

Alan has also benefitted from individual counselling with our clinical psychologist, Liz.

"I wasn't sleeping well, so I spoke to Luke about it and he referred me for some therapy. I never thought



I'd have therapy, but Liz has been absolutely amazing. She made me feel at ease, and it was easy talking to her. She said that she thought I was a bit on the depressed side, so she spoke to one of the doctors about getting me some tablets for that. I'm just coming to end of my sessions with her now. She really helped me to get through a dark time. My wife Wendy has had therapy from Phyllis Tuckwell too, and online sessions for people who are living with someone with an illness."



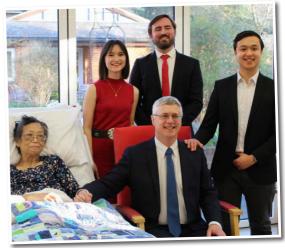
Our In-Patient Unit (IPU) offers 24-hour symptom management and end of life care, and our staff support patients' families too, at this difficult time. Sometimes the most important thing we can do is to help them as they make final precious memories together. They might want to celebrate a special day, such as a birthday, wedding



anniversary - or an engagement, as Sua, one of our patients, and her family did.

Sua's Story

Sua and her family wanted to celebrate the engagement of Sua's daughter Emily to her fiancé Matthew, by organising a traditional Chinese wedding tea ceremony. We were delighted to help and offered them the use of our Dove Lounge at the Hospice, where they could hold the ceremony, as Sua was staying on our In-Patient Unit at the time.



"It was important to both me and my mum that we carried out this tradition and that she would be able to bless my marriage," said Emily. "The staff at Phyllis Tuckwell were absolutely wonderful in helping to organise it."

The Chinese tea ceremony is a cultural wedding tradition and symbolises welcoming the fiancé to the family and blessing the marriage. When they married, Sua and her

husband Tim also took part in a tea ceremony, so were really happy to be able to help organise one for Emily and Matthew too.

Emily had spent some time talking to her aunts in Malaysia, where Sua was originally from, to learn more about this traditional ceremony and make sure that she had included the various different elements of it in her and Matthew's celebration.

The Chinese tea ceremony usually happens on the day of the wedding. The couple offer tea to the bride's family and then to the



groom's. They kneel before the family members and serve the tea with both hands. If the family accepts the offer of tea, then they are accepting the bride or groom into their family as their new son or daughter-in-law. Customs and traditions vary by family and region, and Emily and Matthew

kept to as many of Emily's family's traditions as they could, adapting them for their own specific situation.

The tea which was served was a traditional Chinese Oolong tea. Emily and Matthew also added dried Chinese dates, making the tea sweet, to represent a sweet marriage. Emily's brother, Michael, helped host the ceremony and poured the tea which Emily and Matthew then served to Sua and Tim. Following tradition, the bride and groom both wore red – Emily's dress and Matthew's tie – and Sua and Tim gave the couple a red envelope in return for the tea. Similar to those used on Chinese New Year, these envelopes are filled with money or sometimes jewellery, and symbolise prosperity and happiness.









"I will treasure the photos and memories of this day forever."

Comments from the relatives of our patients

"I have never experienced such kindness before. The care and devotion shown by the nurses and the health care assistants was incredible, but the whole team, from the doctors to the tea ladies and the cleaners, was amazing. I will never forget the two weeks we spent in your care."



"From the minute Julie rang me about Hospice Care at Home, everything changed. Everyone was amazing and made his rapid decline one of dignity and compassion. I and our children were with him when he died. His suffering was minimal thanks to your team."

"My sisters and I wanted to say a huge thank you for looking after our brother.
Your professionalism, honesty, care, compassion and kindness will never be forgotten.
The work you do is amazing."



"We would like to thank each and every one of you for the care that you not only gave to him, but also showed to us as a family.

We cannot thank you enough for going above and beyond to accommodate his Alzheimer's too.

He died peacefully and with no suffering."

"I would like to express my heartfelt thanks to everyone who helped us through a difficult time with my mother.

The past year has been extremely hard to manage as we are a distance away, but there was always someone on the end of the phone to reassure and guide us through. The care and compassion given by the two nurses who came and washed her after she had died were amazing."

"Thank you so much for the care and compassion you have shown when looking after him and all of us, his family.

You have provided huge comfort and support and we couldn't have wished for better treatment during such a difficult time.

Thank you for making his last days as comfortable as possible."

"Please accept my deeply felt gratitude for your loving and selfless care during his last days and weeks.

We should both have found it all so very much more difficult to bear without your unfailing and constant support and comforting presence."



"Thank you for the ongoing care that you are providing for my dad.

He really appreciates his Wednesday afternoons with you, and all the drivers and staff that look after him. You are doing a wonderful job."

"The sessions you provided were useful and thought-provoking in equal measure. You provided the tools and techniques that enabled me to move and look forward, without dismissing the past. I learned to appreciate life, albeit different without her, but to plan ahead and not allow my grief to define me. I gained strength from this and courage to take on new challenges."



"Thank you everyone for all the beautiful care you gave our mum.
We were truly blessed that she could end her days so well, while in your care."

"I am so very grateful to have you in my life and would not be where I am without your care and support. Phyllis Tuckwell is my 'safety hole' and my 'happy place'.

Everything I have attended I have so enjoyed.

I have had Some dark times, but know that I have your Support to help me through."

Our care in numbers

We cared for

2,150 patients

an increase of

0.6%

on the previous year, and

referrals to our care increased by

5.6%

over this time.

We supported

2,071 patients

in the community, which we estimate saved the NHS 850 hospital admissions.



The proportion of referrals of patients without a cancer diagnosis increased from

36% to 42%.

We supported

811 family members / carers

an increase of

10.2%

from the previous year.



Our Hospice Care at Home team cared for



506 patients

and made

4,383 home vists

There was an

18.2% increase in referrals on our IPU, and we cared for

over 300 patients on our IPU

with a 92% bed occupancy rate.



Attendances at our Living Well groups grew from

1,488 in 2021/22 to 2,238 in 2022/23



2,824 attendances

at our education sessions, an increase of

from the previous year.



of these were internal attendances and

1,216

were external attendances.



Over 60 health and social care students

came to Phyllis Tuckwell to experience the services we offer, and we have agreements in place with four Higher Education institutions for their practice placements, across a range of professions.

Education session attendances from care home employees increased from

578 in 2021/22

918 in 2022/23

Staff from 84 care homes have engaged with our training, 74 of which are in our area, meaning that over 60% of all care homes in our area have accessed PT training.



Developing our services

We appointed a new director of patient services, a clinical governance manager and two new community managers.

We piloted a virtual ward,

with consultant led care in the home for people who would otherwise need a hospital bed.

We introduced electronic prescribing in the community, and NHS smart cards,

resulting in better access to medication and safer prescribing.

All of our community staff now have the skills and equipment

to enable flexible working and integrated working with community partners.

We expanded our rapid response capability in the community,

to increase the number of patients we can reach who are experiencing rapidly changing needs or instability.



We purchased ipads and made modifications to our integrated electronic record system,

to support mobile working for our Hospice Care at Home team.



Our First and Second Steps bereavement groups have returned as face-to-face sessions and have been redeveloped

to ensure that they are tailored to the specific needs of the participants.

We introduced a Pastoral Care Companion service for patients on the IPU,

with volunteers who have skills as a Soul Midwife or End of Life Doula providing companionship by sitting alongside someone as they are dying, together with their families.

We are working with Gurkha Welfare, and other partners,

to increase awareness of PT services for people within the Nepalese community.

We completed an extensive review of our patient and carer literature, and translated key leaflets into Nepalese

to enable access to information for more of our community.



Agreeing sustainable levels of funding from the NHS continues to be a priority.

Our current NHS funding is significantly lower than the average for hospices in England. We will continue to push for a more financially sustainable solution, as we believe good partnership working will deliver the best care for people who need us.

In response to the increased cost of living,

we updated our knowledge and skills related to supporting people living on a low-income and for those without access to public funds.



Phyllis* Tuckwell Hospice Care

about energy bills and the cost of living?



We have completed the first stage of our Digital Transformation project and have begun to embed new systems into our existing practices.

This means our staff will be able to work from anywhere, at any time.

How your donations make a difference

Our Income Generation team have performed very well, with a total income of £13.2m over 2021-22.

Of this approximately 26% was Government/NHS funding, whereas in a normal year NHS funding is around 21%.



Total expenditure for the year was £14.3m,

giving us an operating deficit of £1.1m.



Our Retail team had an outstanding year, with income increasing by 18%.

We opened a new warehouse in Farnborough, which operates as a donation and sorting centre, offers trade sales and is a centre for our online sales activity.



£3.4m from NHS/government funding.

£1.5m raised through donations, appeals and other activities.

£2.4m raised through legacies – in a usual year, the care of 1 in 5 of our patients is funded by gifts in Wills.

£504,000 our share of Tuckwell Chase Lottery.

£2.8m raised through our 18 shops.

£342,000 raised from Trusts.

£552,000 raised by our local community through events and challenges.

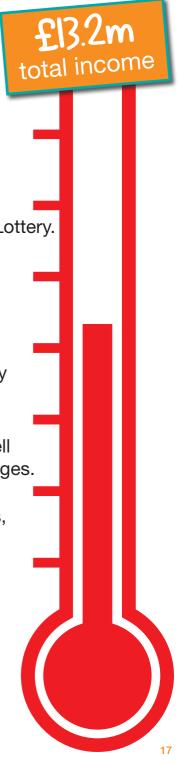
£200,000 raised through Phyllis Tuckwell events, such as taking on personal challenges.

£211,000 raised through local businesses, their employees and customers.

£481,000 generated from investments.

For every £1 we spend raising funds, we raise £3.

73p in every £1 we spend goes towards patient and family care.



Looking to the future

Our priority is to provide people with high quality, compassionate end of life care. We will continue to grow and support our team of motivated and skilled staff and volunteers.

By focussing on equality, diversity and inclusion for our patients, families, staff and volunteers, we will ensure that we are accessible, flexible and that our services meet the needs of everyone in our community. 2023 sees the start of an ambitious project to help deliver our long-term strategy for our local community.

The number of people needing our expert supportive and end of life care is already high and, due to our ageing and growing population, is set to increase substantially. By 2040, deaths in our community will have risen by 25%, and the number of people needing palliative care will have doubled by 2060. There are already more people who need us than we currently have the capacity to support, with people dying whilst on our waiting lists, before they receive the specialist care they deserve.

Our existing building, converted from a 1930s community hospital, has served us well, but much of it was built over 90 years ago. It is dated, poorly laid out and costly to run. To increase our capacity, we have decided to build a new Hospice, with facilities that will enable us to care for thousands more people, increasing numbers on our IPU. offering more outpatient services, and providing improved community services for those at home or in care homes. It will transform the way we work, helping us to care for 3,000 people a year by 2040.

It will be sustainable with renewable energy sources, maximum insulation, reduced water consumption, and will protect local wildlife.

Demolition of the existing building is planned for November/December and building work will start from January 2024, with the aim of moving into the new Hospice by January 2026. The new Hospice will include 18 ensuite inpatient rooms, enabling us to care for 25% more people than we can currently accommodate. It will also include a new wellbeing suite, an education suite, a café, family rooms, an exercise suite, and a raft of new clinical and consulting rooms, and will be surrounded by beautiful, landscaped gardens.

We will continue to offer our specialist services throughout the period of the build, from alternative locations. Our In-Patient Unit services will be temporarily relocated to a new 10-room wing at Kings Lodge care home in Camberley, our community support will be managed by our teams working from our modernised Beacon Centre site in Guildford and a new office facility at Headway House in Farnham, where our support staff will also be located for the duration of the build. Outpatient appointments and Living Well sessions will continue to run at the Beacon Centre.

We have £10m in designated reserves, so we have launched a £6m capital appeal, seeking major gifts from trusts, corporates, foundations, statutory sources and 18 individuals.

Our Trustees, Officers and Senior Management Team

President

Chris Tuckwell

Chief Executive

Sarah Church sarah.church@pth.org.uk

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Alison Huggett (Chair) Dr David Evre-Brook (retired Sept 2022) Rosv Anand (retired Sept 2022) Helen Atkinson (retired July 2022) Helen Franklin (retired Sept 2022) Richard Hunt (Vice Chair) Dr Robert Laing **Ken Ratcliff David Tomlinson** Elizabeth Wells Anne Whelan Emma McLachlan (from Oct 2022)

Dr Andrew Brooks (from Oct 2022) Lillian Nsomi-Campbell (from Oct 2022)

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