Adapting to A Different World



Hospice Care ...because every

day is precious



Annual Review

2021-2022

Total support for patients and families

Clinical - Emotional - Spiritual - Practical - Financial



Introduction by Sarah Church

(Chief Executive)

Thank you for taking the time to read our Annual Review. This past year has been a time of recovery and adaptation, as we have adjusted to living with Covid in the long-term. As restrictions eased, we were pleased to extend our visiting hours on the In-Patient Unit (IPU)



and invite our Living Well patients back in to the Hospice and Beacon Centre for face-to-face appointments and group sessions. Our staff have needed time to recharge, and we have been conscious of helping them to do this. We have organised social events to bring teams back together after so much time apart, and our flexible and home working options have helped staff to maintain a good work-life balance.

From April 2021 to March 2022 we cared for 2,137 patients, 3.3% more than in 2020/21. Although still dealing with the impact of the pandemic, we began to look to the future, reflecting on the changes which we have undergone since the start of the pandemic, and incorporating the beneficial ones into our future plans. We reopened all of our services, maintaining our use of PPE and following the appropriate safety guidelines. So many patients needed our services, and still do. It is always especially hard to see many younger patients needing palliative care, as well as those with a late diagnosis and rapid decline.

We need to raise over £25,000 every day to continue providing our services, and our Income Generation team works hard to achieve this. **Despite the pandemic, they raised over £9m from April 2021 to March 2022**, through donations, community fundraising, sponsored events, legacies, corporate donations, trust donations and retail sales. Thank you to all of our wonderful supporters who helped us to raise this incredible amount of money.

It is important that we invest in the future of our services, and we have been working on rebuilding our income streams, to ensure that we are able to continue funding our care. We are also looking at updating our digital and physical estates, so that we are well-placed to meet the growing demand for our services and the changing shape of hospice care for the years to come.

I am so proud of all that we've achieved over the last year, and of the resilience of our staff and volunteers. As we enter a new financial year, we are mindful of the war in Ukraine, first and foremost for those directly affected, but also for the wider ripples from it and how they may impact us. We will keep this in mind as we plan for the future.

I hope you will find this Annual Review interesting and informative.

agh 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 Hospice and Beacon Centre.



We have recently introduced two new Living Well programmes: Living Well with Illness, and the Creative programme. They run over eight weeks and offer a two-hour weekly group session which focuses on a specific topic. For the Living Well with Illness programme, topics include fatigue, anxiety, 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. An example of how our Living Well service supports patients is Nigel's story.

Nigel's Story

"I love going up there, it's an oasis," smiled Nigel, one of our Living Well patients. "It's not just the activities, it's the place itself. It's wonderful - a warm safe place with wonderful people. I can't praise it highly enough, it ticks so many boxes."

"The Living Well sessions are a really important part of my week, something I definitely look forward to. They're on different subjects



each week and they've covered quite a lot. I remember the

Living Well with Fatigue session - that was really helpful. I've got advanced cancer, but you wouldn't know it to look at me; I don't look ill. So when I get tired, I feel I shouldn't be tired. Going to the session on fatigue, it was almost like it gave me permission to be tired. We were given tips on how to pace yourself and preserve energy."

As well as attending the Living Well with Illness sessions, Nigel has benefitted from several massages from our complementary therapists, to relax his muscles and ease tension, and has also been coming to our art group, Artscape, which is held on Monday afternoons.

"Artscape was brilliant; it really got a hold of me. I loved working with the watercolours. I sat next to one man there and he was very easy to talk to; we got on well. It's nice to be with people who have got mutual experiences. At



Artscape there is somebody opposite you who you can chat to, and the volunteers are good too, they bring people together. You can walk up and down too, and look at each other's paintings."

"The whole Living Well team is fantastic. They keep tabs on you and make sure you're ok. I feel connected; I know there is somewhere I can go for advice. It's all about setting realistic goals; being realistic about what you can and can't do.

The cancer doesn't have to stop you, there are ways of planning so you can still do what you want to. You might have to limit your ambitions a bit, but you can still get the benefit of doing the things you love."

"When you're first referred, you hear the word 'hospice' and you think 'you go there to die', but actually it's all about living. It's not just end of life. It's about enabling people as much as possible to get the most out of the abilities they've



got and preserving their independence."

"The Living Well sessions are a really important part of my week, something I definitely look forward to."

Our Hospice Care at Home service gives patients, their families and carers, access to high quality, compassionate care in the place they most want to be... at home or in their care home. An example of how our Hospice Care at Home service supports patients and their families is Caroline's story.



Caroline's Story

"Gus and I had lived in the local area for over 20 years, so I'd heard of Phyllis Tuckwell," said Caroline. "I knew how wonderful hospice care was, and it was reassuring to know that Gus would be cared for by them. The Hospice movement is so wonderful and so needed. We're lucky in this area to have Phyllis Tuckwell."

Caroline's husband Gus was diagnosed with terminal cancer, and he was referred to our care. He and Caroline received a phone call from Ursula, one of our Clinical Nurse Specialists (CNSs), who assessed their needs, and they were visited by Olga, one of our Occupational Therapists.



"My goodness, Olga was effective!" said Caroline. "She looked ahead to the things that Gus would need and made sure we had them set up and ready for him. She decided he would need a stair lift, and grab rails at the door and front step. She ordered him a hospital bed, too. Gus didn't need any of them when she visited, but by the time they were delivered and installed he did."

As Gus's symptoms began to worsen, Ursula called them to discuss the next steps. Gus wanted to remain at home, and Caroline was determined that he should, so Ursula referred him to our Hospice Care at Home (HCAH) team.

"The HCAH team were wonderful," said Caroline. "They would visit once a day and stay as long as they were needed. Two of the team would come each time and it was usually the same people, so we got to know them really well. Gus had always been a very sociable person, so he looked forward to their visits and would chat away with them. They provided personal care – washing and



dressing him, making sure he was comfortable, even washing his hair for him. Gus was starting to have difficulty swallowing by that point, and Ursula spoke to his GP about switching to liquid medication, which Gus found much easier to take."

As well as looking after Gus, the HCAH team also supported the family. "They were never in a hurry, and spent time chatting to me and our daughter, Victoria. Looking back, they were clearly making sure we were all alright. They would even say hello to our dog, Toffee! Gus adored Toffee. She was one of the reasons he wanted to die at home – he couldn't have borne not having her with him."



"A few days before Gus died, I had a phone call from Phyllis Tuckwell asking if I would like a night health care assistant to sit with Gus overnight, so I could get a good sleep. I said yes. I was really tired, and it was a relief to have someone else there supporting us both. Our health care assistant was called Charlotte and she was absolutely lovely. I was very glad she was there in the end, as that night turned out to be really difficult. Charlotte had to call the Nurses twice; I'm not sure I would have known what to do if I'd been on my own."

"When Gus died, I was fully prepared and had been able to ensure that our son and daughter were both there with us. The care that we had all received from Phyllis Tuckwell had allowed us time to come to terms with Gus's illness. They enabled him to remain at home, where he wanted to be, and he was able to die with his family around him and his beloved dog at his side."

"Gus had always been a very sociable person, so he looked forward to their visits and would chat away with them."

Our 14-bed In-Patient Unit provides 24-hour compassionate, professional and personalised care for patients, as well as support for family members and carers, at the Hospice in Farnham. An example of how our In-Patient Unit service supports patients and their families is Simon's story.



Simon's Story

Lucie had a sarcoma, a rare form of cancer. She and Simon spent New Year's Eve at The Royal Marsden, discussing her treatment.

"It was quite a harsh chemotherapy. Lucie went in for her first session, expecting to be there for four days, but she became really ill. After three weeks there, she was transferred to the In-Patient Unit (IPU) at Phyllis Tuckwell Hospice, where she stayed for about two and a half weeks. She was still able to walk and could chat to the staff, so they really got to know her. The kids and I visited every day. We would walk in the Hospice garden, or sit and play games in Lucie's room. It was January, so it



was really cold and there was snow on the ground. Seby and Scarlet decided they wanted to build a snowman, and Lucie helped them. One of the staff saw them and went to fetch a carrot from the kitchen for the snowman's nose.

It was really nice, a bit of normality in an unreal situation."

Karen, one of our counsellors, talked Simon and Lucie through how to tell the children that Lucie was going to die.

"We went out into the garden to tell them; there's a little arbour there which looks out onto the grass and trees. It's hard - your instinct as a parent is to try to protect your children, but actually involving them is the best thing to do. They can see that Mum's getting worse, but they need it put into their terms so they can understand it properly. Karen helped us to do that."

It was Lucie's 44th birthday at the end of January, and she was well enough to go home for the day. A few days later, she was discharged, and went home for about four weeks

"We didn't realise that would be an option – we had thought that when you're admitted to a hospice, you go there to die. During her last week at home, her health deteriorated quite

quickly, and she was re-admitted to the IPU. They were all so kind and caring, not just the medical and nursing teams, but everyone there. They cared for Lucie, but they looked after me and the kids, too. They would bring me cups of tea and ask me whether I'd eaten, and the housekeeping staff would give Seby and Scarlet chocolate and diet cokes from the food trolley. People often think hospices are full of doom and gloom, but it's the contrary. They're full of people helping other people to live the best life they can for as long as they can. We felt safe there; it's where Lucie wanted to be."

"The Saturday Lucie was admitted was the last day we had a normal conversation. I went back on the Sunday and took the children with me; we knew it would be last time they would see her. She didn't want them to see her so ill, so they just came in for a few minutes to say goodbye, and then my parents came and picked them up. I stayed for rest of visiting time, and came back every day that last week. I would sit and talk to her, even though she couldn't really talk back by then, she just wanted to sleep. Jill, one of the chaplains, sat with me one time and chatted to us. She said that even though Lucie couldn't respond, she could still hear me, and that it was important for her to hear familiar voices."

"The following Saturday, they phoned me to say that Lucie was in her last few hours, and that I should come in. That week I'd had a chat with one of the nurses, and she'd explained what happened to people in that last stage of life, so I was prepared for those final hours. I was really glad she'd taken the time to do that. When I arrived, two nurses were sitting by Lucie's bedside, holding her hand. She was unconscious. I sat down next to her, and one of the nurses stayed with me for about an hour. I sat there holding Lucie's hand for 12 hours, and she died just after 4pm."



"Lucie was always smiling. She was full of happiness and kindness. After she became ill, she never once complained or asked why me? She just accepted it, and was brave and strong right to the end."

Comments from the relatives of our patients

"You not only cared for him in such a special way, but always made sure that we as a family were cared for as well. You made the ending so special for us."

"Words cannot express how grateful we are to you for looking after us all in our time of need.
You swept into our lives like guardian angels, compassionate and nurturing, and enabled us to fulfil that final promise to Mum to die with dignity at home."

"You made our mum's final days peaceful, warm and loving. You all demonstrated such heroic kindness and guided us through this tricky time. Mum had a lot of love for you all and we know that you made her final days comfortable with lots of happiness."

"We all appreciated not only your wonderful care and professionalism, attending to Mum's every need, but also the support and care that the whole family received whenever we visited."



"We all received care and attention of the highest standard from everybody. You all made a horrible time much more bearable for all of us. What you do is incredible."

"We cannot thank you enough for all the care you gave us all in looking after our precious husband, dad and grandad in his final days and weeks.

We always knew from your reputation how incredible you all are, but experiencing and seeing is believing."

"The care my dad received from Phyllis Tuckwell in his final months was amazing -I will never forget how well supported I felt and the respect and truly tender, loving care every single member of your team demonstrated."





"Your knowledge, expertise and warm, heartfelt counselling helped me enormously dealing with the loss of my dearest husband. I felt you holding my hand on many occasions and still value your advice today."

"You're made to feel like you're special and that you matter."

Different world, same care

We kept up-to-date with the latest government Covid guidance,

adapting our services to keep our patients and staff safe, and continuing to care for people throughout the pandemic.





As Covid restrictions lessened,
we restarted group activities and
increased the number of people
we could see face-to-face.

Since the lockdowns
we've extended our IPU
visiting hours again,

enabling more family members and friends to spend precious time with their loved ones.

90% of those we helped were cared for in their usual place of residence,

visited by our clinical and pastoral care teams.

We reintroduced our popular Afternoon Teas for patients and visitors in our Coffee Shop. We resumed our Living Well sessions at the Hospice and Beacon Centre,

and launched two new programmes: Living Well with Illness and the Creative programme.



We increased our number of IPU beds from 12 to 14

by converting our two four-bed wards, closed due to Covid, into two single rooms with en-suite facilities, and one shared two-bed space.

We've welcomed several new starters,

including Community Operations Manager Jade Cope and Community Team Manager Lesley Aldridge.





We looked after the spiritual and psychological needs of patients and their families,

including helping people deal with bereavement.

We made sure our teams were up-to-date in their training,

and supported over 1,000 other health and social care professionals to increase their skills and confidence in end-of-life care so that they, in turn, could support more people in our community.



We supported staff to recharge their batteries after a very challenging period at the start of the pandemic.

Our Board continued to provide oversight, support and challenge to our Senior Management Team.

We made inclusion and wellbeing priorities,

focusing on making sure each individual has access to the same opportunities and the best possible experience, whether they are a patient, staff member or volunteer.

We held our Light up a Life service back in the Hospice grounds,

as well as streaming it online and illuminating Guildford cathedral with the names of those being remembered.

Despite continued disruption to retail and fundraising.

our team found safe, creative ways to generate income.



Our care in numbers

We cared for

2,137 patients

an increase of

3.3%

on the previous year, and

and referrals to our care increased by

8.3%

over this time.





During the pandemic, we cared for

728 carers through

face-to-face meetings, and non-face-to-face contacts.

We offered telephone support and advice to GPs and other healthcare professionals

through 2,000+ telephone calls

to help additional patients, not under our direct care.



We helped relieve pressure on the NHS during the winter months through our rapid response pilot, keeping

466 people

out of hospitals.





We offered placements to

over 60 students

and have agreements in place with four Higher Education Institutes (HEIs) to receive their students for practice placements, across a range of professions.

Staff from

55 care homes

received training from Phyllis Tuckwell

(46% of all care homes in our area) enabling non-Phyllis Tuckwell patients to receive improved end of life care.

We increased the number of training sessions we offer for non-Phyllis Tuckwell staff

by 91% in one year,

providing free training for

1,234 external attendees

in our local area.



How your donations make a difference

It cost £12.3m to provide our services between April 2021 and March 2022.

Our total income for the year was £12.8m, a decrease of 2% on the previous year. Of this, due to additional Covid payments,

approximately 28% was NHS/ government funding, whereas in a normal year it would be around 21%.

Our total expenditure for the year was £12.3m, compared to £11.8m in the previous year, giving us an operating surplus of £0.5m. To make up the shortfall between the NHS/government funding we receive and our total expenditure, we have to raise over £25,000 every day.



With lockdown restrictions easing in the first half of the year and then being lifted completely towards the end, we were able to reinstate many of our fundraising events, such as our annual sponsored Walk for the Wards. Our Reindeer Runs were also very popular, with over 10,400 children from 44 local schools taking part, raising over £80,000! We were also able to hold our Santa Fun Run in Farnborough, which 200 Santas took part in, raising over £14,000, and have been able to continue running our skydiving, wing walking and abseiling challenge events.

The income we receive from Trusts and Foundations is also hugely important to us, and helps us enormously in raising the money we need to be able to provide our care. We would like to thank all of those who have so generously donated to us, helping us reach a fantastic total of £428,000.

Once again our Corporate supporters were hugely generous, and we welcomed several new corporate partners throughout the year. Vale Furnishers hit their three-year target of raising £100,000 to support our care, and committed to another three-year target of the same, kicking it off with a £10,000 company donation.

Our Retail team also had a terrific year, with our shops reopening their doors and online sales continuing to flourish with a total of £2.5m income.

£3.6m from NHS/government funding.

£1.8m 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.

£481,000 our share of Tuckwell Chase Lottery.

£2.5m raised through our 17 shops.

£428,000 raised from Trusts.

£498,000 raised by our local community through events and challenges.

£188,000 raised through Phyllis Tuckwell events, such as taking on personal challenges.

£184,000 raised through local businesses, their employees and customers.

£334,000 generated from investments.

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

72p in every £1 we spend goes towards patient and family care.





Looking to the future

As we look to the future, we know that the demand for our services will increase, as more and more people are living for longer, many with an advanced or terminal illness such as cancer. By 2030, one in five people in the UK (21.8%) will be aged 65 or over, 6.8% will be aged 75 or over and 3.2% will be aged 85+.

In order to ensure that we are able to with cope this increased demand for our services, we need to update our Hospice in Farnham and Beacon Centre in Guildford to make sure that the buildings we work in and from match the quality of our care, providing our patients, families, staff and volunteers with a calm, professional, modern and welcoming environment in which to spend their time.

We are planning on rebuilding much of our Hospice, increasing our IPU from 14 to 18 beds, each with ensuite facilities and individual access to our garden, which will be re-landscaped to include private areas for families to enjoy the peaceful surroundings with their loved ones. In addition to this we will also extend our outpatient facilities, providing more rooms for individual consultations and group sessions. We have appointed an architect for this project and will be submitting planning permission later in the year, with the aim of beginning the rebuild in 2023 and completing it by 2025. We aim to be a diverse and inclusive organisation, both as provider of end of life care and also as an employer, and are committed to providing accessible services and support, delivered in a way that respects the needs of each individual and does not exclude anyone. We will therefore ensure that the building we create is fully accessible and welcoming to everyone.

We are also planning to refurbish the Beacon Centre, to bring it in line with the bright and welcoming environment which we will be creating at the Hospice site. This will be done at the same time as the Hospice rebuild, resulting in two fully redesigned and modernised physical spaces from which to provide our care.

Alongside this rebuild and refurbishment, we have launched a digital transformation programme which will enable our staff to be able to work from anywhere, at any time, rather than being tied to one office, location or set of hours. By offering flexible working, we will help staff to manage their work-life balance, which is so important to their wellbeing. This will also prove invaluable during the rebuild, when staff will be unable to work from our Hospice building.



Our Trustees, Officers and Senior Management Team

President

Chris Tuckwell

Chief Executive

Sarah Church sarah.church@pth.org.uk

Board of Trustees

Dr David Eyre-Brook (Chair)

Alison Huggett (Vice Chair) Richard Hunt (Vice Chair) **Rosy Anand** Helen Atkinson Professor Michael Bailey (retired Sept 2021) **Veronica Carter** (retired Sept 2021) Helen Franklin Dr Robert Laing **Ken Ratcliff** David Tomlinson (from Sept 2021) Elizabeth Wells Anne Whelan

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