KEECH HOSPICE

Quality Account

2024-2025

“One word, amazing!

(name redacted) are fantastic, the encouragement and support they offer is truly invaluable. From walking into the sessions for the first time and support on the equipment they put you at ease instantly.

The facilities and sessions I can’t describe the feeling it gives you. Having balance and walking difficulties I was so nervous and had stopped doing things as was worried about falling, the thought of a circuit class was terrifying but how wrong was I!

I’m so glad I put those fears to one side, (name redacted) advised and showed how you can exercise safely and it’s not all about how far or long but the strength and control, that just doing a little is so much better than nothing.

As a group the support each patient gives each other is so encouraging, sharing experiences and difficulties that illness has put on our daily life.

Each Monday I looked forward to the sessions and I can’t describe what it does but walking in to the Wellbeing Centre just changes you and encourages you to do things that you wouldn’t do. (name redacted) is brilliant she encourages and supports so brilliantly and gets you moving.

I have a long way to go to get confidence back but after attending these sessions and (name redacted) guidance it has made me confident to want to do it.”

Patient - Rehab Team

Contents

A warm welcome

I am accountable for the preparation of this report and its contents. To the best of my knowledge, the information reported in this Quality Account is accurate and a fair representation of the quality of healthcare services provided by our hospice.

Liz Searle
Chief Executive Officer

I would like to start by thanking all our staff and volunteers for their outstanding work throughout the year. It has been a year to be very proud of. We consider this Account to be an important publication as it is part of our accountability to the many individuals and groups with a stake in the work of Keech Hospice.

We are delighted to provide you with this summary of the quality initiatives that we have undertaken throughout the financial year, and to give you a high-level overview of some of our plans for 2025-2026. The quality of our services is very important to us, and we know you want to be assured of our attention to the quality of our delivery and our efforts to continuously improve wherever we can.

Our ambitions remain:

1. A sustainable building and processes fit for the future.
2. A more equal and inclusive organisation.
3. A Teaching Hospice and Centre of Excellence.
4. Digital and innovation first.
5. New and improved income streams.
6. New and effective internal and external partnerships.

Overall, last year we've seen improvements and traction against our strategy across all areas of the organisation.

Funding remains a challenge, with National Health Service (NHS) funding not keeping pace with cost increases and in some cases reduced, and voluntary income also remains challenging in these difficult economic times. The pressure remains to be effective and efficient with our resources.

Our focus became investment in projects that we could both afford but also drives future sustainability so that we are here to continue caring well into the future.

Part of this investment is to prioritise how we look and sound. This took the form of a brand refresh and launch of our new website. We look more modern, we sound more relevant and hopefully attract more patients and supporters.

We galvanised our information technology (IT) by undertaking an extensive infrastructure project to upgrade our systems and move essential data and programmes to the cloud. This affords us a much safer and secure IT and helps us to be resilient against increasing cyber risks.

We have invested in a Fundraising Review to ensure we are able and ready to grow our income to match the ever-increasing costs. Alongside this we have invested in a new Customer Relationship Management system (CRM).

Our hope is that this prepares us for the future. Next year we will embark on our new strategy, and we will engage stakeholders and staff, as well as patients and families as we shape our services.

I am extremely proud of our staff and the incredible work they do. We were recognised as an 'Outstanding Organisation to Work For' in the Best Companies List 2025 , as voted by our staff. We were also delighted and humbled by the positive feedback that we receive from patients and their families across all our services, achieving 100% of friends and family who would be likely to recommend our care. Finally, we were inspected by the Care Quality Commission and were rated Good overall.

We have worked hard on our Equity, Diversity, and Inclusion (EDI) approaches and have celebrated both with staff and our community the importance of coming together. We have started the process of diversifying our Board.

We continue to work closely with our system partners, and we are delighted to have an Integrated Care Board (ICB) Macmillan Transformation Lead in place to review and improve Palliative and End of Life Care priorities. Our ICB has recognised Palliative and End of Life Care as one of their three strategic priorities.

This put us in a good position to move the care agenda forward for patients and families. Making the difference when it matters most.

Challenges, success and refresh

After experiencing challenges with recruitment during the summer of 2024, we implemented a holistic, hospice-wide approach to recruitment and retention of clinical staff. This strategy has proven to be highly successful, with all care services operating at full capacity. Human Resources, Quality and Governance, Care Services, Marketing and Communications, and Fundraising have together formed a robust model that drives our achievements in quality improvement initiatives and service development.

A prime example of this success is our refreshed branding and newly designed website. Our updated brand is both celebratory and inclusive, with its design stemming from extensive research with our community and stakeholders. We are extremely pleased with the outcome and are confident that our service offerings are now clearly communicated and easily accessible.

In October 2024, our Bedford site launched a new name and program for patients and carers. We now provide a variety of outpatient and day services, while also offering a venue for Macmillan colleagues to deliver welfare benefits and psychological support services. This development has significantly enhanced the care and support available to individuals living with life-limiting conditions in Bedford.

Our teams remain committed to continuously welcoming feedback and reflecting on the services we offer. This ongoing evaluation ensures that we maintain a cycle of quality improvement, not only in the delivery of care but also in how we integrate with the broader healthcare system. We are proud to be part of the Dying Well Review and are eager to collaborate with partners to advance this important work.

In addition to the care and support we provide, we deliver a comprehensive program of education and training for health and social care professionals, as well as workshops for the public. These workshops facilitate crucial conversations about death, dying, loss, caregiving, and planning ahead. This is an essential role for hospices, particularly as the number of individuals living with long-term conditions, across all age groups, continues to rise.

I would like to extend my heartfelt thanks to the exceptional team at the hospice, whose dedication to caring for our patients and families ensures that we continue to provide the highest standard of care. Additionally, I am grateful to all the supporting teams whose efforts make this possible.

ETalliday

Elaine Tolliday
Deputy Chief Executive and
Clinical Director

About Keech Hospice

Keech Hospice provides free specialist palliative and end-of-life care for people of all ages.

We support adults in Bedfordshire. Children and their families in Bedfordshire, Hertfordshire, and Milton Keynes. At home, in hospice, or wherever we're needed.

As a teaching hospice, our exceptional people, training, and facilities are helping local communities to live and die well.

How are we funded?

We raise funds through generous donations from our local community and the sale of donated goods in our charity shops. In addition, a funding contribution is made by the NHS and local authorities.

Our purpose

Our purpose is to lead the way in providing specialist care, supporting babies, children, young adults and adults with life-limiting conditions, helping them to live well and make every day count. The support extends to their loved ones and is free to all who need it.

Care and support can be provided in the patient's own home, as an outpatient or in our day services, or in our purpose-built in-patient units.

We will provide a programme of care and support, that has each person at the centre, enabling them to live well with their life-limiting condition.

We will offer a well-coordinated, multi-professional and 'seamless' service, which integrates hospice specialist palliative care services with primary, secondary and tertiary health care services, other voluntary/ independent agencies, social services and, in the case of children and young people, education services.

Our approach will be non-judgemental and non-discriminatory, ensuring equal access for all. We consider it equally important to give support to those who care for our patients, whether they are professional carers, members of the family, friends or trained volunteers. We work with our communities to develop resilience at end of life and beyond.

We aim to use our expertise to benefit the community we serve.

This includes promoting conversations about death, dying and loss within communities, therefore normalising the process and helping people to communicate their wishes. We also provide training to health and social care professionals. We take the lead and work in partnership to spearhead research and innovation within our specialist field.

Our vision

To Make the Difference When it Matters Most.

We believe hospice care is:

- About quality of life and making dying, death and bereavement a normal process, and about living with these realities.
- Innovative & pioneering.
- Integrated.
- Led by people's needs.
- Delivered at its best when staff and volunteers are recognised, developed, supported and well-led.
- Expert in nature.
- Equitable and inclusive.
- Influential in the quality of care provided by others.
- Engaging and connects the whole community, valuing diversity.
- Provided in partnership with others.
- For all ages and all conditions.
- Environmentally conscious.

Our Mission

To lead the way in providing excellent care, supporting children and adults with life-limiting conditions and those affected by death and dying, helping them to live well and make every day count.

Our Values

We deliver better outcomes by **working together**

We take **care** of each other

We can be **trusted** and are **respected** for our **professionlism**

We are **committed** and **innovative.**

Driven by vision

Highlights of Impact and Achievement

Freedom to Speak Up (FTSU)

We were successful in recruiting two staff members as Freedom to Speak Up Guardians – one from the Education Team and one from Retail, giving us a total of four FTSU Guardians. The new recruits have completed their training and have been announced to the organisation. We are working with the guardians to ensure we have a robust, fair and transparent process in place for staff to confidently raise their concerns if they wish to.

In addition to this, we have identified a number of Freedom to Speak Up Champions to support the Guardians in their role.

Infection Prevention and Control

We continue to work within national guidelines for managing Covid and staff are able to access lateral flow tests. It was agreed that we wouldn't go back to mask wearing as standard, as some of our local hospitals have, but this remains under review at Keech. All staff have been reminded of the steps they should be taking to reduce the risk of spreading infections and the expectation of keeping surfaces free from clutter with regular cleaning has been reiterated.

Inclusive Health Service

The Inclusive Health Service is a new specialist nurse-led service that began in November 2023. The purpose of this service is to serve and assist with the care of the homeless community who have no permanent address in Luton and who have a life-limiting condition. Luton has the highest population of homelessness outside of London and a large amount of the homeless community continue to need support from service providers. In January 2025 the service expanded to cover Bedford and Central Bedfordshire.

The Inclusive Health nurse-led service offers an outreach clinic to clients at an accessible and suitable venue, regular advocacy and joint working with key professionals and discussion at multi-disciplinary meetings, full holistic assessments are provided to support the complex needs of the client and their environment. Support is also provided to service providers working with the homeless community particularly with bereavement and guidance through palliative management. The service also provides education and learning opportunities across the existing homeless partnership in Luton and across other health domains in and outside of Luton to help increase awareness.

October - the Hospice UK inclusive health report was written and delivered. This gave us an opportunity to demonstrate all of the achievements and reflect on the successes of the year gone by as well as highlighting the continued need for and importance of the Inclusive Health Service in our community.

November - the service was nominated and achieved runner up for the category the Inclusive Community Award courtesy of Charity Comms. It is a great accolade to be recognised for the work we are doing locally as well as nationally.

December - the Inclusive Health Service celebrated its first-year anniversary.

The Inclusive Health Service continues to make strong relationships with the wider community and is very thankful for the time and ongoing support from the Luton and Bedford Homeless Partnerships and the ongoing help and support from multi-disciplinary team members across the hospice, hospital and local community.

Rehab Service

The Rehab Team remain busy assessing and treating patients, with link roles and ongoing service development projects. We continue to have a waiting list and are working together to monitor and prioritise patients following triage assessment.

The Rehab Team have taken the lead in developing the new 'Wellbeing Group' programme; this has been completed, and the pilot programme, working with other Keech services including Supportive Care, Complementary Therapies and the Nursing Team has been a fantastic way to develop and provide a new holistic group for our patients. Education and activity sessions were offered to patients to help them develop a personalised 'tool kit' to help them navigate their own health and wellbeing through their diagnosis.

The group ran for the planned six weeks and was a huge success, with excellent feedback. All teams coming together was great, there were no negatives, and patients said they felt empowered and supported. Three patients completed their Advance Care Plan (ACP), two talking therapies referrals were made, and one patient was added to the Crafty Gardening Group. Attendees also said they did not want the group to end and as a result we have offered a once-a-month social group.

Outpatient Care – Wellbeing Centre

Our outpatient service continues to support patients being seen for initial assessment often for blood tests and blood transfusions. We have been able to support a newly qualified nurse in her preceptorship, as she develops her skills within the Wellbeing Centre. Our Clinical Nurse Specialist has now gained her qualification in Non-Medical Prescribing.

The activity within this service remains stable and we continue to support patients for their regular blood transfusions, reducing the need for them to have to go to hospital for their life-sustaining treatment. As a satellite unit under the umbrella of the Luton and Dunstable Blood Transfusion Service, we are required to comply with legislation and their service specifications and are formally audited annually by members of their team. The auditors were very happy with the service we provide, our processes and our documentation. We are delighted to be able to continue to offer this essential service, directly reducing the need for hospital attendance, and enabling patients and their families to have full access to the range of services offered by Keech as they need them.

As reported to our Commissioners and Trustees, we identified an issue with staffing levels on our adult in-patient unit. This was due to several vacancies of registered clinicians which we have had for many years, added to maternity leave, a staff member leaving and a retirement. From Monday 10 June we paused admissions to the adult in-patient unit.

Adults In-patient Care

While we were not taking admissions to our adult in-patient unit, we continued our commitments of the 24-hour advice line, day services in Bedford, outpatient services in the Wellbeing Centre and My Care Co-ordination services which continued alongside services in the community.

We worked with partners to extend our offer in the community with doctor visits and additional Palliative Care Support Worker (PCSW) support. We also used this time to carry out refurbishment and maintenance work.

We used this time to recruit new team members. The education department arranged an induction week for all new starters which provided many mandatory training sessions such as medicines management, moving & handling, basic life support, bereavement support and record keeping. Introduction sessions were also provided by our Specialist Nursing Team, Social Worker, Supportive Care Therapists and our Rehab Team. The week was an intense period of learning but also a chance for colleagues from across care to meet each other in an informal setting and share knowledge and experiences.

Our existing staff members made use of the time available during the pause in admissions to complete mandatory training and to seek out additional learning opportunities. Many staff have visited our Bedford site and supported My Care Co-ordination Team (MCCT) with patient visits. Each team member devised a personal learning plan to ensure that all training needs were met, and any areas of interest were developed. Some team members also spent time with community teams from both Luton and South Beds and specialist nurses within the hospital such as the Tissue Viability Nurse and in the Dialysis Unit.

As part of our staff development, we currently have two preceptorship nurses, who qualified in January. They were able to continue their professional development by working across both the in-patient unit and Wellbeing Centre to maintain patient contact and support with venepuncture and blood transfusions. We also supported an apprentice PCSW, who had primarily been working in MCCT during the pause in admissions.

We were delighted to be able to lift this pause of admissions on Monday 7 October 2024. Our new team continued to be supported through their probationary periods and close monitoring of patient dependency and activity, and a staff skill mix was undertaken daily to ensure that the safety of our patients and the quality of our service was not compromised.

During the time of paused admissions to the adult in-patient unit, we were able to accommodate two short term admissions:

- **One for a patient who needed a crisis admission for symptom control, who was then discharged to another hospice after 48 hours.**
- **The other patient was a 58 year old gentleman with melanoma who was admitted for end-of-life care; his preferred place of death was the hospice, and he arrived from hospital following a sudden deterioration.**

We were able to ensure safe staffing levels to accommodate these short-term admissions and provide the care and support needed for the patients and their families.

Living Well Centre and launch

Outpatient and day services are developing very well on the Bedford site. There has been some refurbishment on site including the front office, the entrance hall and development of a clinical room to store medication, wound dressings, oxygen, and other clinical items safely.

The building is busy with outpatient clinics held by the Doctor and Clinical Nurse Specialist (CNS), Supportive Care and Complementary Therapy Co-ordinator as well as Macmillan Psychologist and Welfare Benefits Advisor. These are in addition to the health and wellbeing days, cancer support group and patient and family programmes on a Thursday.

We continue to encourage service user feedback and use it to inform ongoing quality improvements through regular reviews. A Community Specialist Nurse provided feedback regarding a referral, noting that the patient found attending the centre helpful and that it had a positive impact on his mood. Following his initial holistic assessment, he started and continues to attend the centre. We have supported him by referring him for external financial assistance, and the team has provided emotional support. He continues to attend for symptom control and support with completing his Advance Care Plan.

With input from service users and the wider Multidisciplinary Team in the community, we have renamed the service to The Living Well Centre. The new name was launched at the open day on Monday 7 October. The open day was very successful and healthcare professionals from the community were invited in for a tour of the building and update of services. The Living Well Centre was well supported with the multidisciplinary team from Luton present on the day to promote Keech services and provide tours.

Invitation to the launch of the Living Well Centre

I would like to invite you and your colleagues to the official opening of our

Living Well Centre
Bedford

at Keech Hospice Care,
Gladys Ibbett House,
3 Linden Road, Bedford, MK40 2DD.

on Monday 7 October 2024

Please drop in anytime between 2 and 6pm

Referrals continue to increase, and the building remains busy, with 34 patients attending the cancer support group in December which is the highest number recorded in one session. Doctor and CNS clinics remain, with some home visits carried out by CNS prior to attending the centre, this is proving beneficial in relieving some anxieties within patients and families. Home visits are being carried out by the clinical team to support patients who may deteriorate and become unable to attend the centre for periods of time.

Community Liaison Team and My Care Co-ordination Team (MCCT)

We have recruited an additional Palliative Paramedic to support the development of planned outreach services and enable more consistent participation in collaborative working. We have continued to meet with the East of England Ambulance Service and are awaiting a start date for the 'Stack pilot' to commence; initially this service will be offered to patients with a Luton GP. The intention of this collaborative working is to reduce the number of palliative patients being conveyed to hospital, that can be effectively and safely managed and supported within the Community Specialist Teams. The pilot will be for a period of six months from the start date.

Patients will be registered, with their consent, to the MCCT caseload, which will help ensure safety in giving advice due to immediate access to clinical information through electronic records, and all visits will be recorded and shared with the appropriate professionals.

We have managed to maintain the number of patients registered with the MCCT each month.

The MCCT have been busy promoting their service within the hospital with excellent results and new links with various teams locally.

We have seen a steady increase in referrals for the in-patient unit and have been able to visit patients in the community to complete their pre-admission assessments. There is a great deal of value in this, as it gives insight into the patient's home situation, how they are coping, and any equipment that is in place. It also gives reassurance and an opportunity for the patient and their family/carers to ask questions, and they can be shown the virtual tour of the in-patient unit. Part of the admission initial assessment is completed which provides additional information for the in-patient unit team to prepare ahead for the patient's arrival.

Self-referrals received, remain at a consistent level. These continue to be important in giving patients/families/carers the choice of being referred to services at a time of their choosing.

> **Hi, I wanted to say thank you to the entire Keech team for everything you have done for us.**
>
> **We opened the memory box yesterday, and it was the most beautiful gift we have ever received. We absolutely loved the moulds of her hand and feet. I wish now we had done both hands and feet, but then remembered that she actually didn't like it when we were doing it.**
>
> **None of this would have been possible if it wasn't for all of you, you helped us capture as many memories as we could in the short time we had with her.**
>
> **Once again thank you so much from the bottom of our hearts.**

Children's Services

The team continue to work flexibly and responsively to deliver safe, high-quality care across all elements of the service.

The Play team continue to provide a range of activities across the Keech geographical area with lots going on during holiday periods. The group sessions are popular with groups for all age ranges taking place at different times and venues throughout the year. Drop-in sessions at Bedford continue during the school holidays. Coffee mornings for parents take place each month throughout the year in Hertfordshire and Bedfordshire, supported by the social work and children's teams.

There was significant pressure on the team over the summer for the provision of symptom management and end-of-life care, with all requiring considerable support to either facilitate them being in their place of choice or manage their symptoms and end-of-life care.

Clinical supervision is available for all the team on a regular basis, providing space for discussions and support. The compassion that team members show their colleagues enables ongoing support at such challenging times.

The Youth Group aimed at 11 to 19 year olds will now be combined with transition support as this feels like a more effective way to promote awareness of this element of the service amongst the young people and their families.

A new Clinical Nurse Specialist for Children's In-patient Unit (CIPU), joined the team at the beginning of July, followed by a new Band 6 nurse at the start of September and a further Band 6 and newly qualified preceptorship nurse joined the team later in the year.

Supportive Care Team and Social Work Team

The Supportive Care Team continues to operate at full capacity. There has been a significant decrease in our waiting list, and many patients are being seen within three months from referral, especially for bereavement support, despite referrals coming in at a similar rate. This is a continuing trend and a marked improvement from last year when patients were having to wait for over six months to begin a programme of emotional support. A big reason for this is the expansion of the team to meet the needs of our patients.

Our annual remembrance event, Light Up a Life was held on Sunday 1 December. This event was well attended, and the initial feedback has been very positive. One of the families known to Keech came to light the candle, and there were several readings of poems by members of staff as well as a reflection by our hospice chaplain. There was live music from a local choir and singers as everyone came together to remember their loved ones.

The Social Work Lead left at the end of May and the role was recruited into. The new lead started at Keech at the beginning of August. Overall activity appears to have been consistent throughout this period.

The Adult Services and Children's Services have continued to have high activity in face-to-face contact.

The difference in contacts with families between the adult and child caseload appears to be more reflective of how the contact is captured, the very nature of working with child patients will automatically involve their parents/carers but is not necessarily captured in separate data in the same way it is for adult patients & their carers. The carers offer in Adult Services continues to be well attended overall, with the Stepping Stones Bereavement Group being the most consistently well attended group. Both the face-to-face carers and the walking group have seen a slight decline in numbers more recently.

Hydrotherapy pool refurbishment of changing rooms

The hydrotherapy pool closed for refurbishment of the changing rooms in January. Swim schools continued to use the pool during this time. The pool was reopened at the end of June and pool users had a staggered start so that the booking processes into the accessible changing rooms went smoothly. There has since been a steady increase in users accessing the pool, with a dip in December. This is due to the pool being closed over the Christmas and New Year period. This is the time of year that maintenance and cleaning of the pool is carried out.

Summer events including a garden centre cream tea for the Buddies group for adult patients and carers, and the Shuttleworth picnic event for children and their parent/carers were both well attended, and both received positive feedback.

There continues to be a steady increase of adult patient and carer support referrals from our Bedford site. In response to the identified need for carers and to ensure equity across both sites, an additional carers group has now been set up and started in November.

Other groups continue to be generally well attended and on-going consultation with our data team colleagues will ensure future data is correctly captured.

Compassionate communities

The compassionate communities team continue to deliver a range of activities across Bedfordshire, Luton, and Milton Keynes.

As part of an innovative approach to Dying Matters Awareness Week during May, a new video was produced working with a group of children to talk about what death means to them. The video featured three children talking openly about their beliefs about when you die. They were fantastic and creatively talked about the topic. The theme for Dying Matters Awareness Week was 'The way we talk about Dying Matters', which focused on the language that we use, and conversations we have, around death and dying. The video challenged us to talk about what children can discuss but adults avoid #theDword. This campaign was picked up by PR Week and highlighted as an outstanding campaign. This video can now be used by teams with the wider work we do.

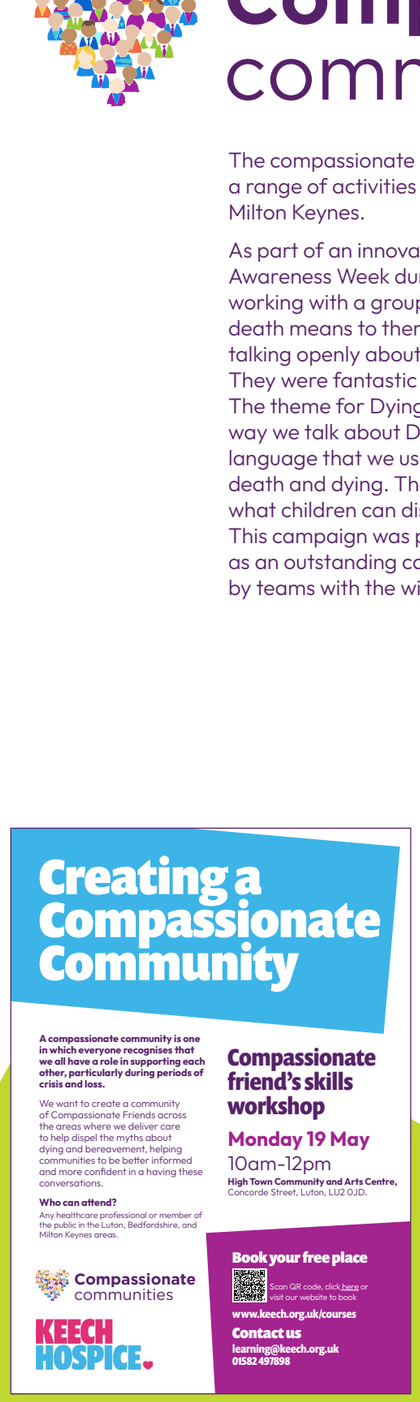
Workshop deliveries include:

Compassionate Friends Skills workshops delivered to a charity in Milton Keynes and at Luton Library.

An amended and **collaborative version with the Supportive Care team** was delivered to Bedfordshire Police at a leadership event.

Online **Digital Memories Matter** workshop.

Death Cafe recommenced in June at the Luton Library.



What happens when you die?

Keech Hospice was announced as the winner of Hospice UK's Improving Inclusivity Award at the Hospice UK conference in November.

This is such a prestigious award, and its special recognition celebrates our dedicated team's hard work in making sure that everyone in our diverse community knows that Keech is here for them – no matter their background, religion, or ethnicity.

We couldn't be prouder of our learning and community team whose work connecting with people across our region captured the judges' attention. The team goes out of their way every day to help people feel welcome and supported at Keech. Their work has already changed lives and improved how we offer care.

Our community is made up of people from many different ethnicities, faiths and groups, and we want to ensure everyone feels included and understood when they need our help.

Some of the fantastic achievements of our award-winning team include:

Organising community events: we have hosted discussions with faith leaders from many religions, including Islam, Judaism, Christianity, and Sikhism. This has helped us better understand how to support people from different cultures and faiths during end-of-life care.

Launching the 'No Barriers Here' project: Mohammed Rahman, our Community Connector, holds workshops and tours of the hospice for South Asian groups, including local doctors and faith leaders. These events have helped change perceptions about what a hospice is and who it's for.

Opening our doors for Friday prayers: Every week, around 25 members of the local community attend Friday prayers at Keech. This simple act of inclusion has made a huge difference in showing that Keech is a welcoming and safe space for all.

Introducing the Wellbeing Box for Muslim patients: This special box contains items like honey, scented oil, and prophetic sayings to help comfort our Muslim patients, and it's been warmly received.

Our team's efforts have so far inspired five other hospices in the UK to hire their own community connectors, spreading the message of inclusivity across the country.

Compassionate Neighbours

The Compassionate Neighbours Co-ordinator continues to connect with the wider Compassionate Neighbour Community by attending home shadowing visits with Garden House Hospice, Befriending Network and Community Development webinars.

The co-ordinator has been heavily involved in development of the Volunteero system. Five training sessions have been completed, and the review of content, forms, and joint working with the Volunteering team is currently underway. Onboarding of both Community Members and Compassionate Neighbours have been mapped and relationship management is now underway.

Externally, presentations have been delivered to the Social Justice Unit at Luton Council, Equality PCN`s and The Lewis Foundation, all have been very insightful and well received. Excellent feedback has been received and follow up activities will be taking place to reach Compassionate Neighbours into our communities.

We have now trained 40 Compassionate Neighbours, recorded 12 volunteers on Volunteero and have now made our first two new matches. There are a further four prospective matches in the pipeline and four more home visits planned. The team is now starting to accept referrals from the My Care Co-ordination Team and Supportive Care Team.

KEECH HOSPICE Learning

New Lecturer Practitioner

A new Lecturer Practitioner joined the learning team in April and has brought a wealth of knowledge and experience which is already having an impact on our education offer. The Lecturer Practitioner has an extensive background in palliative and end-of-life care within Bedfordshire with strong clinical and educational skills.

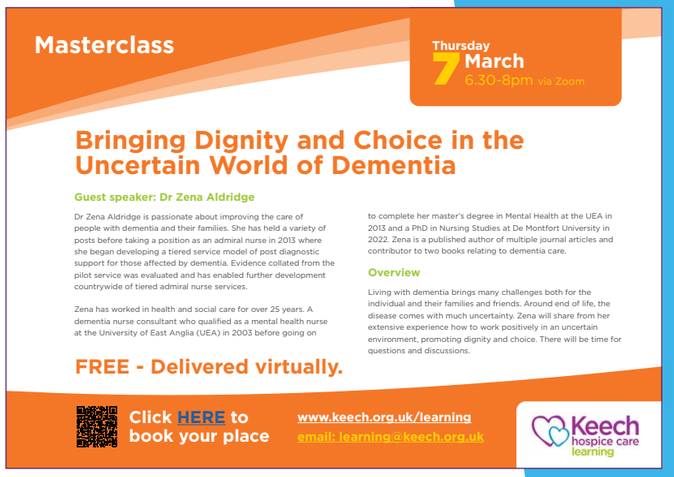
Careers Carousel

Working with the ICB and Central Bedfordshire College, a Careers Carousel was designed and delivered. The event hosted 20 stalls from across the local health and social care providers and attracted over 600 attendees. Working with the college, the team were able to map and highlight careers across the curriculum and created an associated careers video. This will be replicated in other colleges across Bedford, Luton, and Milton Keynes (BLMK) with conversations underway with Bedford College.

The team have also worked with Barnfield College and the Job Centre hosting a stand at their Inclusive Health Fair and presenting to groups of students regarding clinical and non-clinical career opportunities and next steps.

The team have led and taken part in key activities including:

- Launching coaching and clinical supervision support to the care teams.
- EDI work going from strength to strength with a new action plan in place and series of awareness events celebrating, Eid and Pride.
- Taking part in the Children's Research Network across the East of England.
- Commencing SharePoint and CRM training as part of the digital road map.
- Starting the practice education work including a series of practical and theoretical sessions across hospice sites and teams.
- Delivering a series of activities during Dying Matters Awareness Week to encourage conversations relating to death and dying.
- Introduction of Adult Services Away Days providing a day of learning opportunities.
- Undertaking annual emergency planning days training with our Operational Performance and Assurance Committee team on the roles and responsibilities within our emergency response team and providing resources to develop our plan and policy further.
- The introduction of a new induction programme to all clinical teams.
- New sessions for staff and volunteers including Dementia Friends and Integrated Palliative Outcome Scale (IPOS).
- Mental Health Champions training has been undertaken with 21 champions now in place.
- A draft Research Strategy has been developed.
- We were finalists for the Third Sector Awards for our partnership work with the University of Bedfordshire and KEEPNET study.
- Fantastic masterclasses have been delivered alongside our study days, rolling programmes and workshops.
- New programmes such as the Transition to Autonomous Practice, Care Induction and End of Life Champions programmes go from strength to strength.
- Our journey to become a University Teaching Hospice has reached a key milestone with both the Board of Trustees and the University of Bedfordshire approving our commitment. The next steps will be to agree a Memorandum of Understanding.
- Our Research Strategy has been approved and a Special Interest Group in place with representatives from across the organisation.
- Work is underway to develop our webpages to provide improved functionality and information to health and social care professionals and the community.
- We have continued to develop the support offer to our care teams including Professional Nurse Advocates and promoting the range of support available.
- Six staff attended the three-day Hospice UK conference in Glasgow. During this time, we were excited to receive the Hospice UK 2024 Improving Inclusivity Award.



Apprenticeships

It has been fantastic to see the Business Administration learners successfully achieving their apprenticeships and securing permanent roles within Keech Hospice. The Customer Service Level 2 apprentice has also successfully completed their Level 2 qualification and has now moved onto the Level 3 apprenticeship. The remaining apprentices continue with their studies. The Learning Team have successfully recruited into a Library and Learning Resources Apprentice who will complete Level 3 Business Administration and started in January 2025.

Kaval Hussain
Business Administrator Apprentice

Masterclasses

The education team continued to facilitate regular Masterclasses during this year, some of which were:

- Deborah Holman, an experienced Palliative CNS talking on, 'Caring Intensively – Finding the Person in the Patient.' This was extremely thought provoking and provided attendees an appreciation of wider role and difference made beyond the clinical.
- Dr Jo Brady, a Palliative Consultant, delivered another powerful session, entitled 'Dementia – Palliative Tips and Practice.' Allowing staff and wider health and social care professionals to take way practical tips to embed within their roles.
- 'Living with Dementia' delivered by Sara and Peter providing carer and patient perspective. Sharing experiences and opening the forum for questions provided an invaluable experience to hear from experts. The Learning team will continue to provide these insights with a new series of daytime lived experience sessions.
- Professor Fliss Murtagh spoke at our September masterclass about frailty. Prof Murtagh is a leading nationally renowned, Palliative Researcher. The session was well attended with representation from a range of organisations and job roles, and a good link made with Fliss's team of researchers – around 40 of them! We look forward to further collaboration with them.

KEECH HOSPICE.

Learning

The Learning Team are excited to move forward with the jointly funded Doctor of Philosophy (PhD) student with the University of Bedfordshire.

Following a round of recruitment and interviews in June, a new studentship was offered and commenced in the new academic year. The candidate comes with an impressive knowledge of the local area, groups, and demographics.

The study will focus on the experiences and outcomes of the Eastern European community currently growing across the region but not reflected across hospice care. This study will help us gather insights into the community to help shape Keech Hospice services.

Research

Connections with other researchers have been expanded through membership to the East of England Research into Children's Hospices Group and BLMK Integrated Care System (ICS) Research and Innovation Group. This allows the team to share the latest research and explore ways to work together.

With the continued commitment to health inequalities research, involvement in several events across health inequalities week took place. This included a research conference 'Integrated Care in Action: Tackling Inequalities via Research and Innovation' hosted by the University of Bedfordshire which presented sessions on Digital Healthcare, Eastern Partnerships for Innovations in Integrated Care (EPIIC), Frailty and ambitions across BLMK.

This also included Key notes speaker Professor David Croisdale-Appleby, an inspirational speaker who highlighted the power of research and it is as much about the journey as the outcome.

We presented research ambitions and activities to hospice colleagues within our Operational Performance and Assurance Group. As a research-active hospice we are keen to involve colleagues from across teams and will be launching a Special Interest Group and investing into a range of research skills development work-shops from colleagues at the University of Bedfordshire.

Our research policy has been updated to reflect our current position, and a toolkit is being developed to support those with an interest in research.

A new research strategy has been drafted outlining our commitment to becoming research active. Our Research Strategy supports our strategic ambition to become a University Teaching Hospice (UTH), leading and collaborating on research which will positively impact on hospice community and palliative and end-of-life care services.

Our strategic aim states:

> **"We will deliver leading education, innovation and research, improving knowledge and skills everywhere.**
>
> **The aspiration is to be a University Teaching Hospice."**

We have met with three University Teaching Hospices to explore their journey to reaching this status. Trinity, St Clares and St Columbus Hospice all confirmed that the partnerships with their universities were all built on a shared commitment and activities outlined in a Memorandum of Understanding. All engage in joint education and research and supporting student placements, all of which we do with University of Bedfordshire.

Our ambitions and work to date have been shared with the Board of Trustees and university Vice Chancellors and both boards have approved to partnerships to become a University Teaching Hospice. A Memorandum of Understanding with the formulated outlining or commitment to be approved and signed in 2025.

Strategic priorities

2024-2025 updates

Action	End of year report
To develop an Inclusive Health Service and provide a training programme for people working with the Luton Homelessness Board.	• Inclusive health Clinical Nurse Specialist (CNS) appointed. • Service developed and now established in Luton. Patients offered holistic assessment and follow up as required. Also, drop-in clinics are available. • Inclusive health education series developed and delivered to health and social care professionals. • Our CNS is a member of Luton homelessness partnership board. • Identified gap in service provision in Bedford and with many patients being transient it highlighted the need to offer services locally.
To deliver leading education, innovation and research, improving knowledge and skills across Beds, Luton, Milton Keynes (BMLK) and Hertfordshire.	• Extensive programme delivered to health and social care staff across BLMK. • End of life care champions programme delivered in collaboration with local authority to care homes in area. • Research continues with University of Bedfordshire. • Special interest research group in place. • Internal training and development programme for clinical and therapy staff in place.
To ensure we have robust policies and processes for Freedom to Speak Up Guardians (FTSU) as required by NHS England so that we can fully support staff to raise issues and concerns without fear of negative consequences. **Develop a speaking up culture in which the voice of staff is a vital driver of learning and improvement.**	• During 2024 we have been raising awareness of Freedom to Speak Up throughout the organisation, including at our all staff away day in September when we had an awareness stand that was 'manned' throughout the day by the Quality and Compliance Team and by one of our Freedom to Speak Up Guardians. • We advertised internally for staff FTSU Guardians to join our two existing Guardians. We had an amazing response to this, and we are pleased to share that we now have four FTSU Guardians (one Trustee, one Volunteer, one staff member from our Education Team and one staff member from our Retail Team). In addition to this we recruited two FTSU Champions to support the Guardians in continuing to raise awareness for speaking up at Keech. • We have updated our FTSU Policy and are currently undergoing a period of publicity for our new and existing guardians.
To further develop our services at Living Well Centre by offering a range of outpatient and day services that reflect the needs of Bedford residents with palliative diagnosis.	• Now offering a programme of outpatient and day services that is inclusive and wide ranging. • Launch of service in October 2024 saw name change to Living Well Centre to reflect offer.

> **"I have been to two recent meetings where other professionals have said what a flexible and professional service we are, providing families with the care in their homes when they need it. There were also comments on how the team make other professionals' lives easier as they know we can handle situations that are thrown at us, particularly with regards to a swift discharge and our out of hours service."**

2025-2026 priorities

Priority action	How was the action identified	How will this be achieved	How will this be monitored
Undertake annual audits in Nutrition and Hydration and Do Not Attempt Cardiopulmonary Resuscitation (DNACPR) conversations across care settings.	Recommendation from a Care Quality Commission (CQC) inspection.	New audit tools to be developed by Quality and Compliance Team. Clinical auditors identified. Audits completed across care.	Through Clinical Safety and Assurance Group.
To plan education and roll-out of Summary Care Record (SCR) access, initially to aid medicines reconciliation across adults and children's services.	Recommendation from a Care Quality Commission monitoring visit.	All staff that require access to SCR undertake the necessary training and are given access on SystmOne via their smartcard.	Monitored through Clinical Effectiveness Group. Access and training monitored through Quality and Compliance and Learning team.
The offer of a future planning conversation will become embedded in practice for all our service users; babies, children, young people, and adults.	Audit to review % of those offered an Advance Care Plan (ACP) conversation indicated a gap in service and a training need.	Review of current practice. Task and finish group to agree SystmOne recording, and training. Access to No Barriers Here.	Through Clinical Effectiveness Group. % ACP recorded Key Perfomance Indicator (KPI).
Launch and implementation hospice-wide of Ulysses, our new digital incident reporting solution.	Paper presented to Senior Leadership Team, previous manual system was labour intensive and time consuming.	Cascade training delivered to all staff. All staff know how to report incidents and accidents.	Will be monitored through Operational Performance Assurance Committee and Clinical Effectiveness Group. Quality and Compliance will monitor incident reporting levels.

Anchored in assurance

Statement of assurance from the Board

Our Board of Trustees are a group of volunteers who take overall responsibility for the hospice and act collectively to govern it.

Our Chief Executive and Senior Leadership Team run our charity on a day-to-day basis. However, our Trustees are ultimately responsible for our hospices' governance, its assets and activities – safeguarding our charity and making sure the needs of our patients come first.

Our Trustees are appointed because of the individual skills and experience they bring to Keech Hospice, helping us continue to achieve our vision – making the difference when it matters most.

During 2024-2025 Keech Hospice provided the following specialist palliative care services which are part funded through our standard NHS Contract:

Adult Service

Our services for adults with a life-limiting condition are provided to those who live in Luton and Bedfordshire

- In-patient unit (eight beds) – Luton Site
- Wellbeing Centre for Outpatient Services and Rehabilitation Services – Luton Site
- My Care Co-ordination Services – Luton Site
- Living Well Centre for outpatient and day services - Bedford Site
- Inclusive Health Service – to support the homeless community in Luton, Bedford and Central Bedfordshire

Children's Service

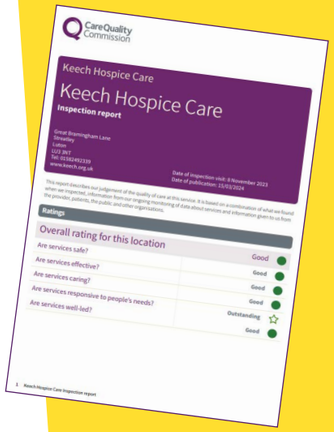
Our Children's Service provides specialist palliative care for babies, children and young people who have a life-limiting condition and live within Bedfordshire, Hertfordshire and Milton Keynes. The service is available to them up to their 19th birthday.

- In-patient unit (four beds)
- Play Services
- Children's Symptom Management Service

In addition, we have also provided the following shared services for adults and children, funded through charitable funding:

- 24-hour advice line
- Medical Team
- Supportive Care Team, providing:
  - Family Support
  - Music and Art Therapy
  - Complementary Therapy

Clinical Quality Commission (CQC)



Throughout 2024-2025 we have continued to work on actions identified during our last inspection in November 2023. We received a further on-site visit to review medicines management in July 2024. This assessment was carried out to follow-up on concerns identified at our last inspection regarding the processes of medicines reconciliation, prescription stationery management and clinical pharmacy service. This assessment was focused on the quality statement of medicines optimisation.

The CQC rated medicines optimisation as good during this assessment because they found that the service had robust processes in place for medicines reconciliation and prescription stationery management. A contract was in place to provide a clinical pharmacy service.

Please see our ratings below, the full CQC inspection report from November 2023 can be viewed here or scan the QR code:

Ratings

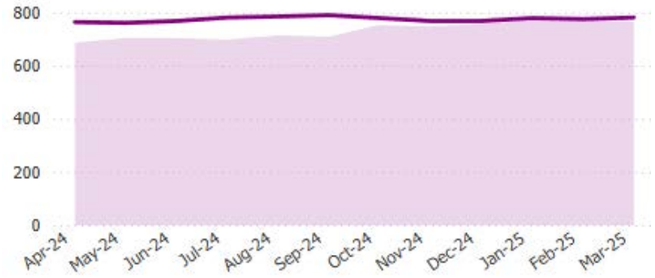
Overall rating for this location	**Good**
Are services safe?	Good
Are services effective?	Good
Are services caring?	Good
Are services responsive to people's needs?	Outstanding
Are services well-led?	Good

Essential data

Last 12 months' total

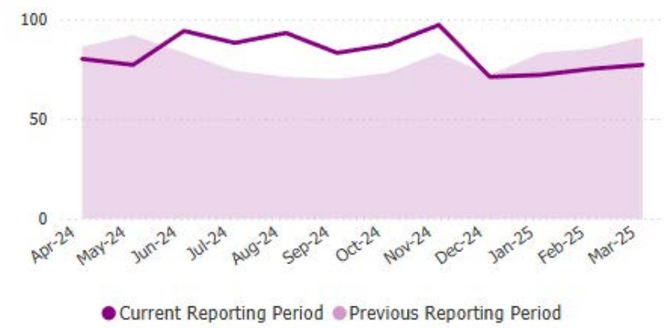
1482

Adult Service Patients



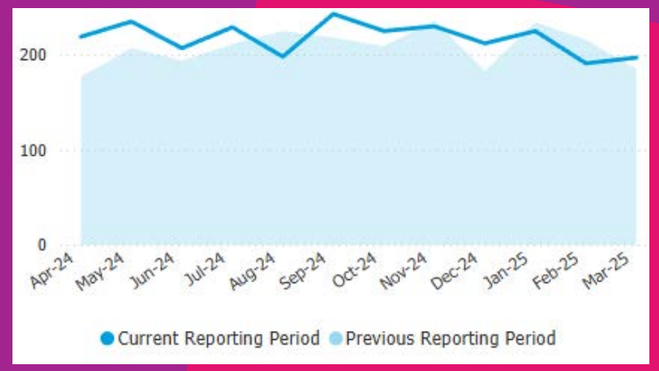
208

Adult Service Friends and Family



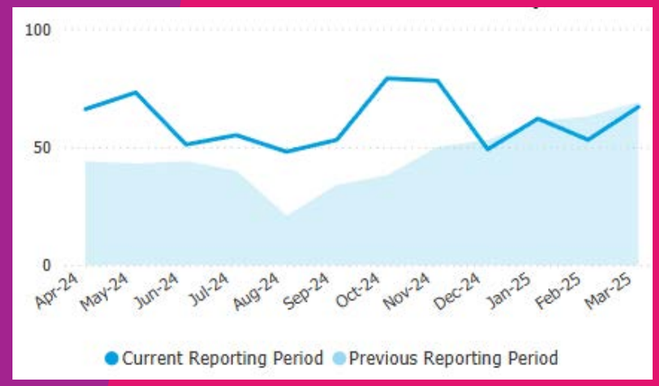
398

Children's Service Patients



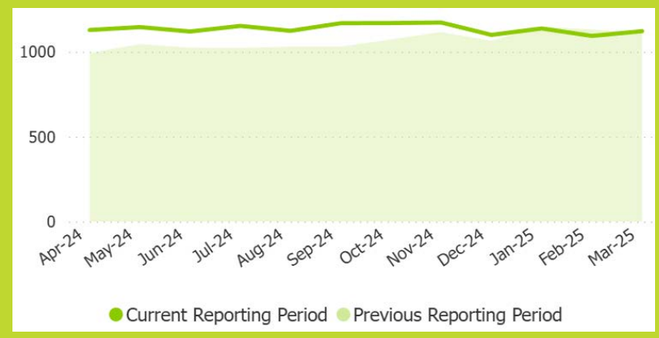
164

Children's Service friends and family



2242

All services benficiaries



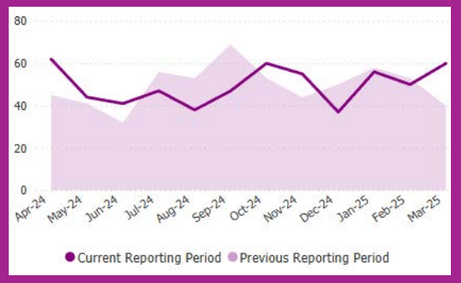
Adult Service

Last 12 months' total

Referrals

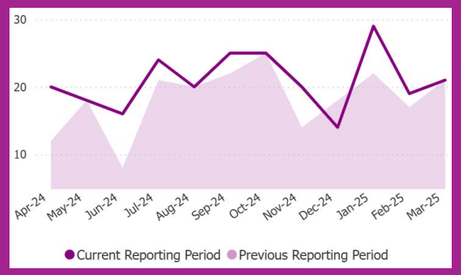
597

External professional referrals



251

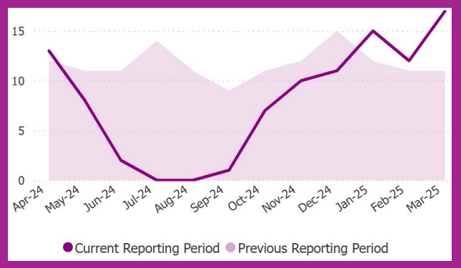
Self-referrals



Adult in-patient unit

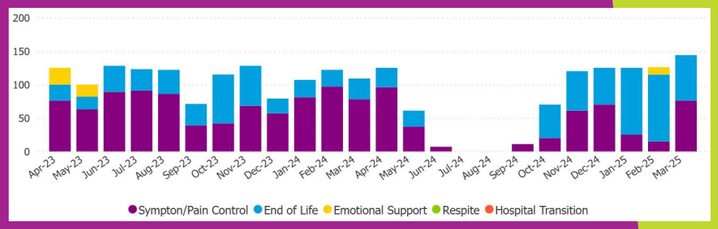
68

Users



418 Symptom/pain
485 End-of-life
11 Emotional support
0 Respite
0 Hospital transition

Adult In-patient Unit (AIPU) bednights by admission reason

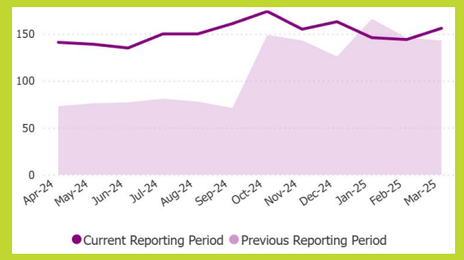


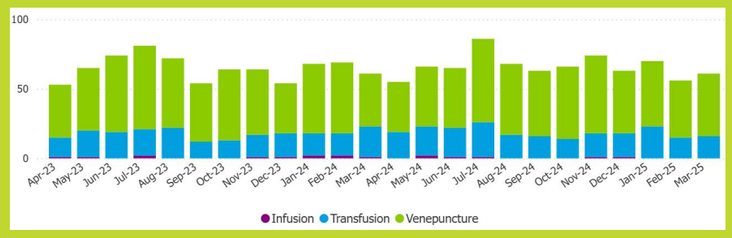
Outpatient services

Wellbeing Centre (WBC)

410

Users





Number of treatments provided

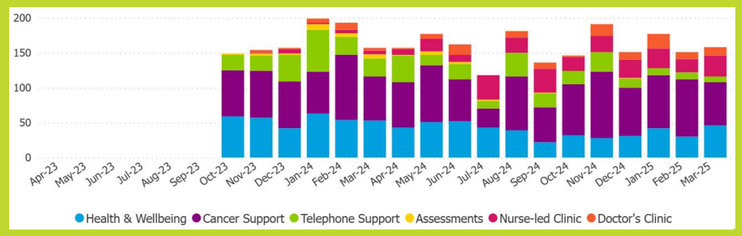
Living Well Centre

In June 2023 Keech Hospice merged with Bedford Day Care. Since then, we have been working with the team to increase the services offered to patients living in Bedford. We aim to improve the quality-of-care support provided to the existing patients. This incorporates professional development, as well as changes and improvements required structurally to safely care for patients. Emphasis has been put on collecting service user feedback and we have continued to explore service improvements tailored to the feedback received.

We started collecting data for Bedford services in October 2023.

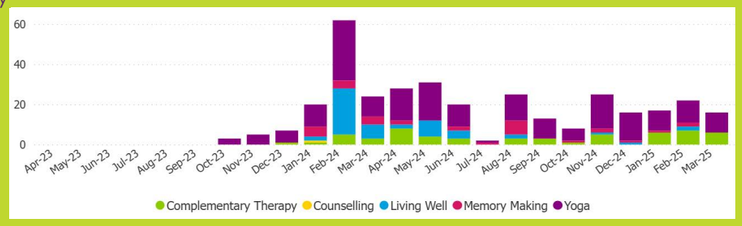
459 Health and wellbeing
817 Cancer support
228 Telephone support
13 Assessments
273 Nurse led clinic
115 Doctor's clinic

Attendance



46 Complementary therapy
0 Counselling
20 Living well
19 Memory making
138 Yoga

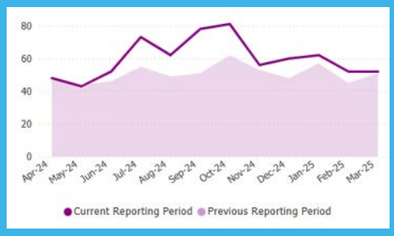
Supportive care attendance



Rehab Service

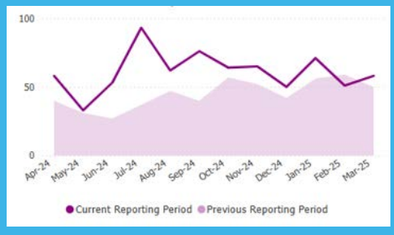
196

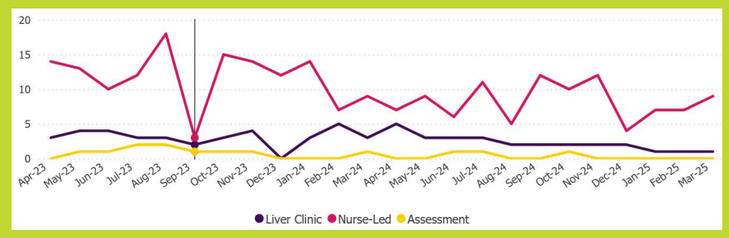
Users



196

Group sessions





Specialist Clinic patients

Children's Service

Last 12 months' total

Referrals

92

New referrals

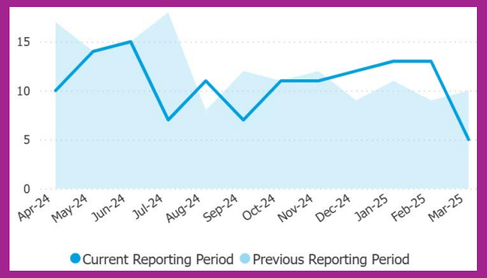
112

Deaths and discharges

Children's in-patient unit

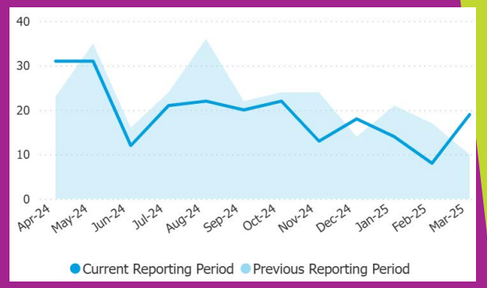
92

Users

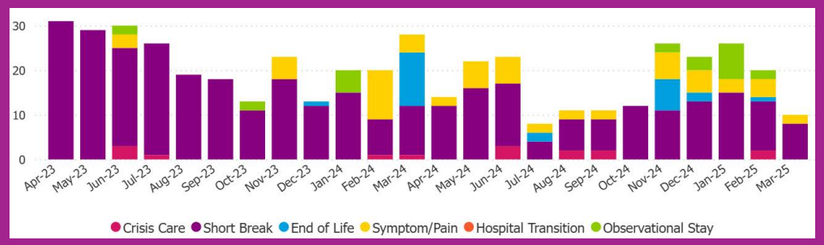


231

Care admissions



9	Crisis care
130	Short break
12	End-of-life
40	Symptom/pain
0	Hospital transition
15	Observational stay

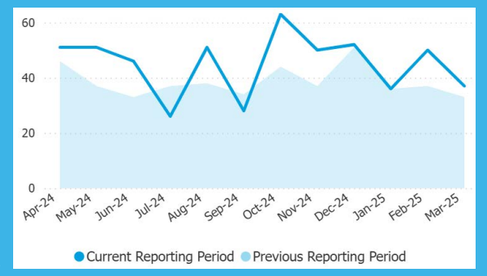


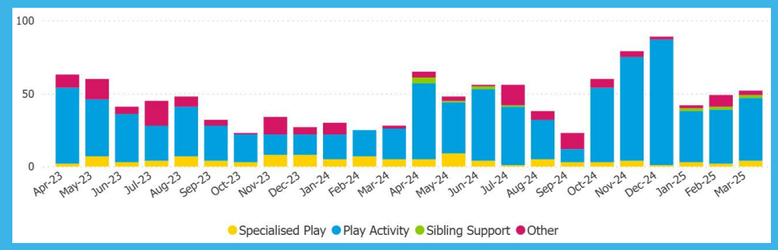
CIPU bednights by admission reason

Outpatient services

170

Play services users





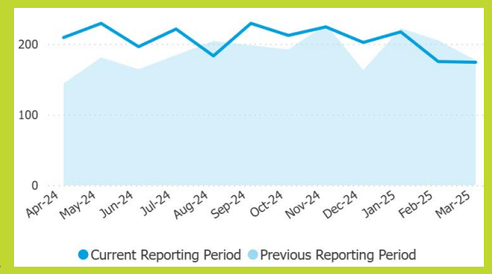
535	Play activity	**14**	Sibling support
44	Specialised play	**64**	Other

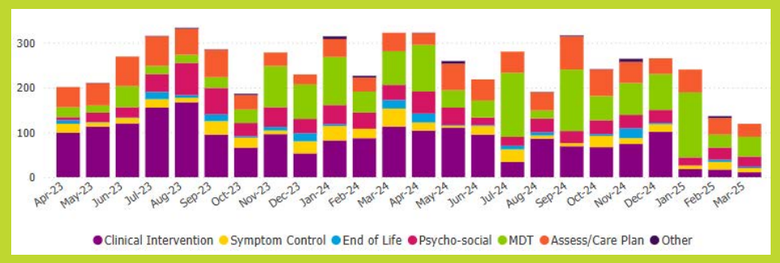
Play services 1-1 sessions

Community services

389

Families supported in the community





786	Clinical intervention	**341**	Psycho-social	**22**	Other
172	Symptom Control	**902**	MDT		
76	End-of-life	**551**	Assess/Care plan		

Reasons for Community Nurse and Palliative Care Support Worker visit

Supportive Care Services

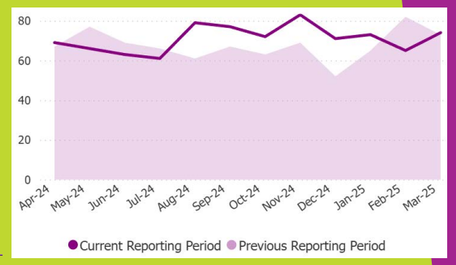
Last 12 months' total

During 2023-2024 there have been staffing challenges within the Supportive Care Team, hence a reduction in some of the services offered.

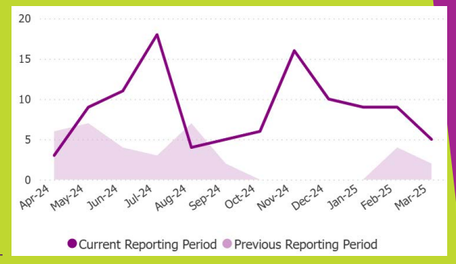
A Supportive Care Workforce Business Case was submitted and approved to increase capacity within the team. The Therapies Manager/Art Therapist resigned at the end of August 2023 and the initial focus was to recruit into this position before recruiting additional staff. As of March 2024, the Supportive Care Team is very close to operating at full capacity and in most areas we can see activity picking back up.

Adult Service

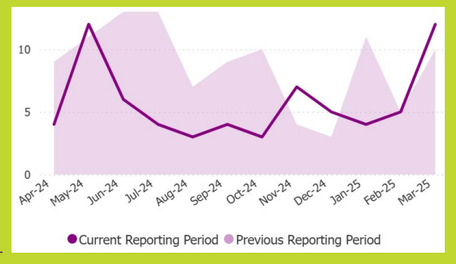
242
Social Work users



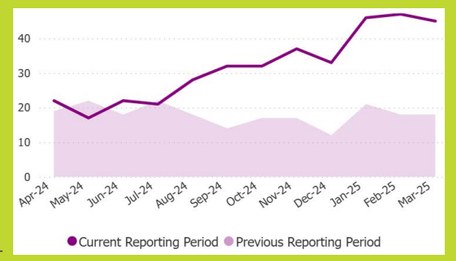
33
Art Therapy Users



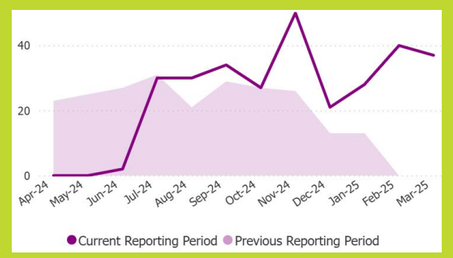
31
Music Therapy Users



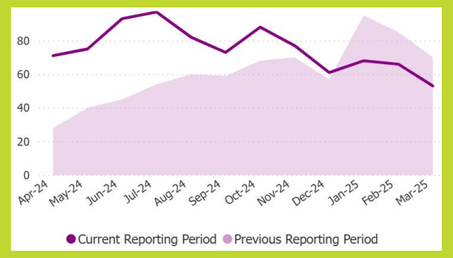
139
Complementary Therapy Users



299
Hydrotherapy Pool Sessions

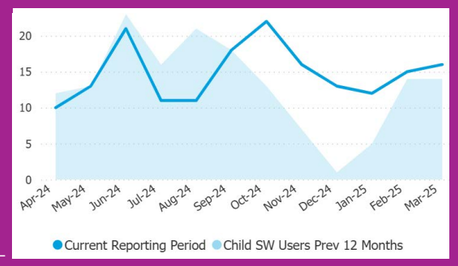


904
One-to-one Bereavement Sessions

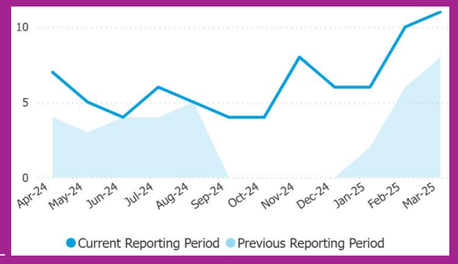


Children's Service

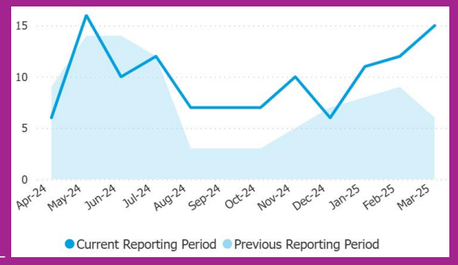
80
Social Work users



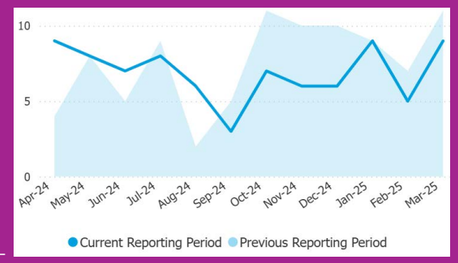
28
Art Therapy Users



56
Music Therapy Users

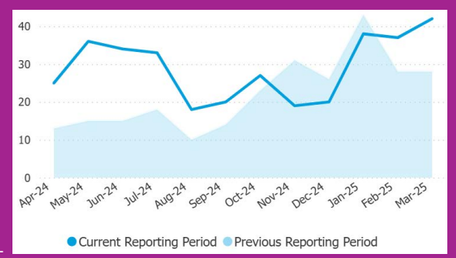


32
Complementary Therapy Users



172
Hydrotherapy Pool Sessions

349
One-to-one Bereavement Sessions



Required statements

Research

The number of patients receiving NHS services provided or sub-contracted by Keech Hospice in 2024-2025 that were recruited during that period to participate in research approved by a research ethics committee was NONE.

Data Quality

Keech Hospice did not submit records during 2024-2025 to the Secondary Users Services for inclusion in the Hospital Episodes Statistics which are included in the latest published date because it is not eligible to participate in this scheme. We do however have our own system for monitoring the quality of data.

We continue to use SystmOne, electronic patient record system, which is also used by many healthcare professionals in the community meaning that we can share information from and with other services (with given consent from the patient). SystmOne is also linked with the NHS spine which makes for an easier registration process when a patient is referred into the service, it also means that our doctors can access test results online.

Use of Commissioning for Quality and Innovation (CQUIN) payment framework

We receive NO CQUIN funding. This is in line with changes to the NHS Standard Contract, shorter form, commissioning arrangements.

Clinical coding error rate

Keech Hospice was not subject to the Payment by Results clinical coding audit during 2024-2025 undertaken by the audit commission.

Participation in Clinical Audit

- During 2024-2025 there were no national clinical audits or confidential enquiries that covered NHS services that Keech Hospice provides.
- During 2024-2025 Keech Hospice participated in no confidential enquiries as it was not eligible to participate. However, we ensured that key audits were identified and completed.
- The local clinical audits that were reviewed in 2024-2025 are listed within this document.

Data Security and Protection Toolkit (DSPT)

As a condition of our NHS commissioning contracts, we are required to demonstrate we uphold high standards of data security and protection by completing an NHS assessment called the Data Security and Protection Toolkit (DSPT) once per year. Keech Hospice submitted a completed DSPT assessment in March 2023 with 100% compliance against all mandatory criteria.

Audits

Controlled Drugs

	Overview	Score (%)	What went well	Learning from teams
CIPU	The aim of this annual audit is to review the safe storage and security, procurement, stock, documentation, prescribing, administration, and destruction of Controlled Drugs (CD) on the adult and children's in-patient units at Keech Hospice using the Hospice UK CD audit tool. Below are the audit results for 2024-2025.	**98.4**	• The audit received a total compliance score of 98.4% • This compliance score is a 7.6% increase from last year's audit. • The audit received no major non-conformities. • 6 out of 7 sub-topics received 100% compliance overall.	Ordering/requesting medications in the Controlled Drug Requisition (CDR) book must be carried out by nursing staff instead of doctors; nursing staff should be trained on how to use the book to place orders. Entries made in error should not be crossed out; instead, an asterisk should be placed next to the entry, with corrections noted in the margin or, preferably, at the bottom of the page and to refer to training for further guidance. Ensure that entries in the CDR are entered in red ink, to include the full name of the person destroying the drug, the signature of the person destroying the drug, the full name of the person witnessing the destruction of the drug, the signature of the person witnessing the destruction of the drug etc. and to refer to training for further guidance.
AIPU		**97**	• The audit received a total compliance score of 97% • This compliance score is a 1% increase from last year's audit. • The audit received no major non-conformities. • 5 out of 7 sub-topics received 100% compliance overall.	A reminder to staff to ensure that the requisition book number and page number are included under the serial book number in the CDR. Entries made in error should not be crossed out; instead, an asterisk should be placed next to the entry, with corrections noted in the margin or, preferably, at the bottom of the page and to refer to training for further guidance. Ensure that entries in the CDR are entered in red ink, to include the full name of the person destroying the drug, the signature of the person destroying the drug, the full name of the person witnessing the destruction of the drug, the signature of the person witnessing the destruction of the drug etc. and to refer to training for further guidance. A reminder to authorised witnesses regarding documentation of name alongside signature.

Medical Gases

The aim of this external audit is to measure the quality of the medical gas cylinder management against the criteria of the Medical Gas Cylinder audit tool.

Following the audit in Q1 2024-2025, a quality improvement plan was created; the completion of which is being monitored through the Quality & Compliance Team on a monthly basis.

Audits

General Medicines

	Overview	Score (%)	What went well	Learning from teams
CIPU	The aim of this annual audit is to review the safe storage and security, procurement, stock, documentation, prescribing, administration, and destruction of non- controlled drugs in the clinical areas at Keech Hospice using the Hospice UK audit tool. The audit results are for 2023-2024, due to the audit for 2024-2025 being on-going during the completion of the Quality Account.	**99.2**	• This year's audit received a total compliance score of 99.2% with no major non-conformities. • This is a 0.3% increase compared to last year's results. • 6 out the 7 sub-topics received 100% compliance.	To ensure staff members read and acknowledge updated or new Standard Operating Procedures (SOPs), implement a formal acknowledgment process using digital or manual signatures, where employees confirm their review by a set deadline. Notifications should be sent via email or internal communication tools, with reminders to emphasize the importance of compliance. A centralised log should track all acknowledgments for easy verification, while follow-ups address any outstanding signatures. This approach ensures accountability, clear communication, and an audit trail for SOP compliance across the organisation.
WBC		**100**	• 7 out of 7 sub-topics received 100% compliance,	N/A
AIPU		**98.7**	• This year's audit received a total compliance score of 98.7% with no major non-conformities. • This is a 0.1% increase compared to last year's results. • 5 out the 7 sub-topics received 100% compliance.	To begin documenting the patient's weight on the drug charts. This is currently under review with the Management of Medicines group. Please remember to record the administration of medicines immediately after the admission of a patient onto the unit.

Infection Control

The Infection Control Audit is a monthly audit deriving from the National Standards of Healthcare Cleanliness. The audited areas include AIPU, CIPU and WBC and a trial period is currently being undertaken in the Living Well Centre. The areas are measured against a variety of factors, these vary from the overall cleanliness to subcategories of the rooms and are given a star rating out of five.

The overall compliance score from these monthly audits is displayed on the feedback boards in the clinical areas of the hospice. Actions arising from these audits are shared with the relevant teams on the publication of the audit results.

Q4 2024-2025 audits are currently underway, with results being shared in April. These are the results for Q3 and Q2 2024-2025.

Q2 - 2024-2025

99 AIPU

98 CIPU

99 WBC

Q3 - 2024-2025

99 AIPU

97 CIPU

98 WBC

Hand Hygiene

The Hand Hygiene Audit is a quarterly audit of the World Health Organisation's 'My 5 Moments for Hand Hygiene' in all care units. This is completed by the clinical teams every quarter, with results reviewed by the Clinical Governance & Patient Safety Nurse and at our monthly clinical meetings.

We received 100% completed audit tools for Q4 from the clinical areas at Keech Hospice and the Living Well Centre, with no highlighted concerns on the completed audit tools.

Safety Thermometers

The Safety Thermometer audit is a clinical audit tool used to measure and monitor patient safety by providing a snapshot of the proportion of patients who are free from specific types of harm at a particular point in time. The data collected through this audit tool helps us identify areas of learning and enhance overall patient care. These audit tools are reviewed monthly by our Clinical Safety & Assurance Group, with any identified learning shared with the relevant teams.

Audits

Clinical Information Sharing (NG138)

	Overview	Score (%)	What went well	Learning from teams
Notes	The aim of the audit is to establish whether adult patients at Keech Hospice are being given enough information in relation to their care by the healthcare professionals they have contact with, in accordance with section 1.4 of National Institute for Health and Care Excellence (NICE) Guideline 138 (“Patient experience in adult NHS services” - hereafter referred to as NG138). The audit also examines whether enough relevant information about the patient and their families is being shared amongst the professionals involved in their care to improve the patient experience, in accordance with NG138. These are the audit results for 2023-2024, due to the audit for 2024-2025 being on-going during the completion of the Quality Account.	95	The evidence of audited handover sheets highlights that the nurses on the in-patient unit are scoring high on recording most of the required information for the handover sheets, which should have a positive impact on patient care. Patients are given relevant information prior to discharge, with opportunities to discuss any concerns they have with both nursing and medical staff. Adult in-patient staff are introducing themselves during the initial meeting with the patient’s during admissions - allowing the patients to understand who will be caring for them during their stay.	• To ensure information shared on supportive care services offered to patients and next of kin. • Nursing Team to regularly review the handover sheets, ensuring all relevant information has been updated on the patient status. • More details required on key factors even if staff recently worked with patients to ensure all information accurate, including any discharge planning documentation that has been completed. This is to be completed using a Discharge Planning Board on the units.
Children’s Service and Supportive Care	This audit took place during July – August 2024 using a holistic record keeping standard based on Keech policy and historic CHKS accreditation scheme standards.	99	31 of the 36 criteria which were compliant scored 100%. 0 were non-compliant and 0 were partially compliant.	Reminder to staff: • The importance of completing all patient details and amending these, if known. If not known, to select “Not known” or “No religion” on patient details. • The importance of having the Next of Kin (NOK) /parental responsibility labelled within SystmOne. If the details of the nominated person are there, the NOK column still needs to be selected. • To complete all sections of the discharge letter prior to uploading the document to SystmOne, as once it is up, it cannot be amended. • To ensure that if the conversation is undertaken, to document the outcome of the conversation and, if it was not appropriate to hold the conversation, to document this on the tabbed journal. • To ensure that the ACP is always available on the patient’s notes.
MCCT	This audit is still underway for 2024-2025			
Adult Services and Supportive Care	This audit took place during February – March 2025 using a holistic record keeping standard based on Keech policy and historic Care and Healthcare Knowledge Systems (CHKS) accreditation scheme standards.	98	1% increase from the last audit, 33 of the 39 criteria which were compliant scored 100%	Reminder to staff: • That this detail can be added into SystmOne by any clinician. If ‘no religion’ applies or it is ‘unknown’, these options are also available under the dropdown selection. • That this detail can be added into SystmOne by any clinician. If the patient’s language is unknown, this option is available to select. • The importance of having the NOK labelled within SystmOne. If the details of the nominated person are there, the NOK column still needs to be selected. • Make staff aware of the importance of scanning the completed document to the ‘record attachments’ in the patient’s S1 record.

Audits

Falls Records

Overview		Q4 2024-2025		Last 12 months	
		Number	%	Number	%
Patient Falls is a contemporaneous audit of clinical management of patient falls. This is completed for every reported fall.	Moving & Handling assessment completed on admission.	2/2	100	5/5	100
	(per patient)	2/2	100	5/5	100
	Moving & Handling assessment reviewed during admission.	2/2	100	5/5	100
	(per patient)	2/2	100	5/5	100
	Falls Assessment completed on admission (per patient)	2/2	100	3/5	60
	Use of Bed Rails template completed on admission (per patient)	2/2	0	3/5	60
	Use of Bed Rails template updated and reviewed (per patient)	2/2	100	5/5	100
	Post Fall Assessment completed (per fall)	2/2	100	5/5	100
	Post Fall Observation chart completed (per fall)	2/2	100	4/5	80

Pressure Ulcer Records

		Number	%	Number	%
Pressure Ulcers is a contemporaneous audit of clinical management of pressure ulcers. This is completed for every reported pressure ulcer.	Patients had a Surface, Skin inspection, Keep moving, Incontinence/moisture, and Nutrition (SSKIN) Bundle on Admission	20/21	95	25/27	93
	Patients had received a Waterlow Assessment on Admission	20/21	95	25/27	93
	Pressure Area Care Plan in place with evidence of it being followed and reviewed	21/21	100	27/27	100
	Wound Care Plan in place with evidence of it being followed and reviewed	18/19	95	24/25	96
	*2 patients had passed away or been discharged before a review could take place.	20/21	95	26/27	96
	MUST (Malnutrition Universal Screening Tool) Completed on admission	12/14	86	17/19	89
	Evidence of a review of the MUST (Malnutrition Universal Screening Tool) *7 patients had passed away or been discharged before a review could take place.	45/47	96	64/66	96
	Photograph taken (per Pressure Ulcer (PU) or skin damage)	20/21	95	25/27	93

FP10

This is a weekly audit conducted by the medicines link nurses in CIPU and AIPU of the Private Controlled Drug Prescription Form (FP10PCD) stationery used or spoiled during the week.

Results of each audit are documented centrally on a monitoring spreadsheet overseen by the Accountable Officer. Any issues or concerns are investigated immediately.

DNACPR

The aim of the DNACPR audit is to assess the quality of the documentation around DNACPR at Keech Hospice. This audit has been created using the following document: NHS Northeast and Yorkshire Palliative and End of Life Care Strategic Clinical Network DNACPR Audit Tool.

Currently underway for 2024-2025.

Audits

Hydrotherapy Pool

	Overview	What went well	Learning from teams
	The Hydrotherapy Pool Audit is to monitor compliance with the hydrotherapy pool standard operating policy, infection control policy and procedure and Control of Substance Hazardous to Health (COSHH) within the health and safety policy.	Considerable improvements and refurbishments have taken place over the last year and the pool changing rooms are accessible and all have showers. The area is noticeably clean, with excellent record keeping of testing results.	Add wound information to policy (covering wounds with waterproof dressing). Reception desk to have under desk storage for folders etc. Chemical alarm needs to be turned back on. Recruit into lifeguard vacancy. Update signage in toilets and accessible changing rooms - Hand washing signs to be put on display by all hand basins. Fix the cracked tiles on poolside shower walls. Plant room to be decluttered and the refurbishment leftovers to be removed.

Safeguarding Records

Safeguarding is a contemporaneous audit of Safeguarding Discussion Forms and Safeguarding Alerts reporting and management and is completed for every reported concern. At Keech Hospice, there are two ways to raise a concern, there is a Safeguarding Discussion Form which looks at concerns, situations for advice or information sharing or a Safeguarding Alert Form for direct safeguarding concerns.

Both of which are emailed through to the safeguarding team and an MDT (Multi-Disciplinary Team) meeting is arranged as required to discuss risks and plan outcomes. Not all Safeguarding Discussion Forms will need a full MDT.

Hydration and Nutrition

The aim of the Hydration and Nutrition audit is to assess the quality of the documentation and assess observations around Nutrition and Hydration at Keech Hospice. This audit has been created using the following documents: Keech Hospice Nutrition and Hydration Framework and CQC's Regulation 14 for service providers and managers on meeting nutritional and hydration needs.

Currently underway for 2024-2025.

On-call

This is a contemporaneous audit of clinical on-call telephone calls or visits completed by the Children's team. This audit is monitored by the Quality and Compliance Co-ordinator and the Associate Director of Patient Services (Children's). Results from this audit are shared on an annual basis to the Clinical Safety and Assurance Group.

Care safety weeks

Supporting you to support others

Summary

- Inform and educate stakeholders on the wellbeing support available.
- Ensure that standards of professional responsibility are high and can be evidenced.
- Obtain feedback from service users and staff.

Activities

Emails sent out from the Learning Team to the clinical teams for informational purposes.

A display board in Valerie's on wellbeing support available, promoting the Wellbeing SharePoint Site.

Clinical Involvement through our Practice Educators to ensure development of knowledge to the clinical teams.

A Wellbeing Session, hosted by selected Mental Health Champions.

Freedom to Speak Up (FTSP)

Summary

- Inform and Educate stakeholders on the FTSU Guardians, their roles within the hospice and how they can be contacted.
- Obtain feedback from service users and staff.
- Promote the FTSU Guardians posts that have been made available across the hospice.

Activities

Emails sent out from the Learning Team to the clinical teams for informational purposes.

Visit to the Hospice (Luton site) from one of the FTSU Guardians, Pam Garraway, who spoke with various stakeholders on our current processes including patients and staff.

A display board in Valerie's on FTSU, promoting the FTSU Guardians and how they can be contacted, pledges for managers and staff were taken and a quiz was created for the stand.

A display stand at the staff away day on the Wednesday 18 September, promoting the FTSU Guardians and how they can be contacted. Pledges for managers and staff were taken and a quiz was created for the stand.

Clinical Involvement through our Practice Educators to ensure development of knowledge to the clinical teams.

Delivering safer care

A PSIRF approach to developing and maintaining effective systems

We have completed our first year of reporting and learning from incidents under the Patient Safety Incident Reporting Framework (PSIRF).

The Patient Safety Incident Response Framework (PSIRF) sets out the NHS's approach to developing and maintaining effective systems and processes for responding to patient safety incidents for the purpose of learning and improving patient safety. The PSIRF is a contractual requirement under the NHS standard contract and as such is mandatory for services provided under that contract. (NHSE, 2022)

Our Patient Safety Incident Response Plan (PSIRP) sets out the local response at Keech Hospice to specific types of patient safety incidents that occur within our organisation. Our reporting data enables us to review and reflect on any emerging trends and themes and promotes systems-based learning and improvement in line with the fundamental principles of PSIRF.

Individual incidents are monitored and discussed monthly at our Clinical Safety and Assurance Group (CSAG) who provide assurance to the Clinical Effectiveness Group (CEG).

MHRA alerts

There was one MHRA National Patient Safety Alert that was relevant to the hospice over this 12-month period.

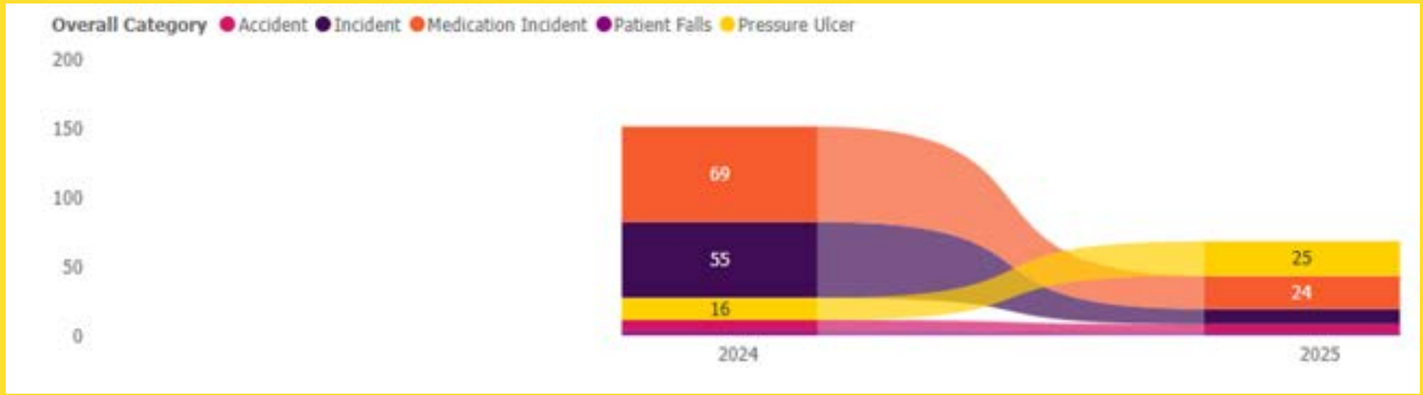
In April 2024 the Medicines & Healthcare products Regulatory Agency (MHRA) issued a National Patient Safety Alert regarding the risks of transfusion-associated circulatory overload. The alert can be found via the following link: National Patient Safety Alert: Reducing risks for transfusion-associated circulatory overload (NatPSA/2024/004/MHRA) - GOV.UK (www.gov.uk)

Transfusion-associated circulatory overload (TACO) is defined as acute or worsening respiratory compromise and/or acute or worsening pulmonary oedema during or up to 12 hours after transfusion, with additional features including cardiovascular system changes not explained by the patient's underlying medical condition, evidence of fluid overload and a relevant biomarker.

TACO is one of the most common causes of transfusion related deaths in the UK and cases have increased substantially in recent years. Identifying risk factors for TACO prior to transfusion allows initiation of appropriate mitigating measures. TACO deaths are potentially preventable. TACO can occur in any individual of any age, including elderly people, children, and neonates.

The NPSA alert explained the identified safety issue with actions required by Friday 4 October 2024. The alert was reviewed through our internal Clinical Safety and Assurance Group (CSAG), deemed relevant to our adult services and a task and finish group was set up to review the alert and undertake the identified actions. The task and finish group met twice to review the alert in more detail and create and review the action plan. Actions were completed by the due date.

2024-2025 twelve month view



Duty of Candour

Duty of Candour is a legal duty to be open and honest with patients and their families when mistakes in care have led to significant harm. It applies to all health and social care organisations registered with the Care Quality Commission. At Keech Hospice we promote a culture of openness and honesty throughout the whole organisation. We have a culture of safety and commitment to transparency in all we do.

What you told us

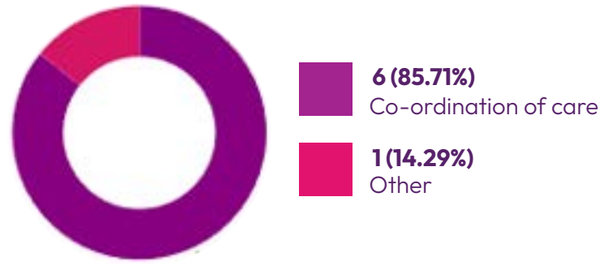
Complaints

In the last 12 months, we have received a total of seven complaints related to our adult care services. Four of these complaints related to our Adult Inpatient Unit and the remainder to our Living Well Centre.

When we receive a complaint, we aim to have the complaint fully resolved within a 25 working-day period or an agreed period with the complainant. Of the seven care complaints received in 2024-2025, four complaints were acknowledged within three days, with the remaining four resolved during the initial communication. Of the four that were acknowledged within three days, all were fully resolved within the 25 working-day period.

The categories of these complaints include: the co-ordination of care delivered to patients and communication of sharing pictures on social media.

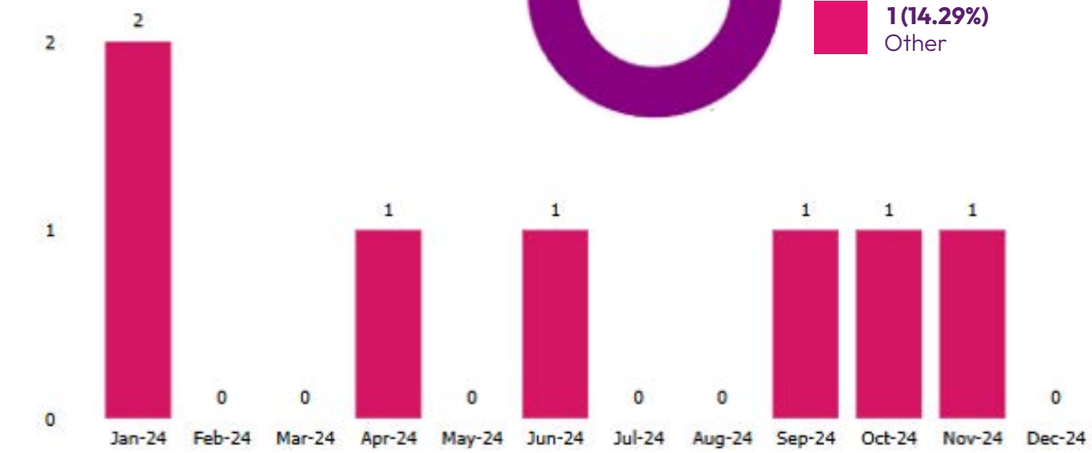
Category of complaint



6 (85.71%)
Co-ordination of care

1 (14.29%)
Other

Overview profile - Care complaints



Friends and family questionnaire and experience survey

We are in the process of procuring a new process, I Want Great Care, to capture further feedback from service users of the hospice.

All feedback we receive is shared with the relevant department leads and discussed at a monthly clinical meeting, to ensure that we can improve our services with your suggestion in mind.

One of the questions that we ask on our survey

> **"If a friend or family member required similar care in the future, how likely would you be to recommend Keech Hospice?"**

100%

Adult Services

100%

Children's Services

I Want Great Care (iWGC)

I Want Great Care is a trusted site for healthcare reviews that makes it easy for patient to provide meaningful feedback on their care. It is a service that is independent, secure and trusted by patients, staff and healthcare providers.

I Want Great Care makes it simple to collect meaningful, detailed outcomes data direct from patients about an organisation, its locations, and its clinical teams.

We have signed a contract for the next two years to work with I Want Great Care to collect all of our patient feedback in one secure place. The feedback questions are designed to include the NHS Friends and Family questions and are available digitally or via a paper copy. There will be bespoke questions for children and an easy-read questionnaire. Questionnaires are translatable into many languages via our landing page on the I Want Great Care website.

We are currently working with the I Want Great Care team to configure our landing page and questionnaires and will launch across care during Q1 2025-2026.

Making the difference

I want to sincerely appreciate the hospice and the two wonderful staff who contributed to the research by sharing their lived experience as a healthcare professional in children's palliative care.

I hope to keep you updated with the results of our research.

Anonymous - Children's Service

I was offered telephone counselling for bereavement support as I live out of area. (name redacted) was incredible: calm, wise, knowledgable, thoughtful, collabortaive, encouraging, non-judgemental. Therapy with her has undoubtedly changed my life for the better.

(Name redacted) has guided me through a painful, challenging, enlightening, healing journey of self-reflection and acceptance. (name redacted) has supported me to attend to my grief for my dad and to my own needs.

I will forever be grateful to her and to Keech. Thank you doesn't seem enough.

Supporter - Supportive Care

Thank you so much for the amazing care you have given (name redacted) and her family over the weekend. Being able to go to Centre Parks meant a lot to them and they wouldn't have been able to this without your support. Please could you extend our thanks to the whole team at Keech.

Thanks and best wishes.

External Professional - Children's Symptom Management Service

Took a phone call from (patient), she wanted her compliment passed on .

(Patient) rang to say thank you to the MCCT for helping her out this week she said absolutely excellent service, exspecially the help from (staff member).

Patient - MCCT Service

I just wanted you to pass a message onto the carers that worked over the weekend including Friday this was a very emotional birthday but the care team at home and Keech really held up (patient) and were an integral part in keeping momentum up and making her 13th birthday special.

All the gifts and balloons also from Keech were amazing and (name redacted) and the ladies.

(Name redacted) had a pamper day and done what she wanted to do which was sleep lol

But the nail tech came and she had her first professional pedicure at home and her nails done.

So we all done good so thank you to all who made an effort and treated her as special as she is so thank you to you all.

Our Empress Warrior (patient) Turned 13!!!!!!

And yes don't worry (patient's sister) of course got her nails done too.

With great gratitude.

Parent - CIPU

(Name redacted) and (name redacted) had observed that the patient's wife appeared distressed at drop off. They provided emotional support, and this resulted in further actions, such as referral to social work for ongoing support, and weekly one to ones with the patient.

The relative returned that day with flowers for both (name redacted) and (name redacted) as the support they provided by listening to her had meant so much to her.

Colleague - Living Well Centre

We just wanted to say thank you from the bottom of our hearts. You made (name redacted) last couple of weeks so comfortable and pleasant for him and all of us.

We honestly could not have asked for anything more thank you all gave him.

You are truly amazing or as (name redacted) said you are all ANGELS!

Family member - AIPU

I know you know how grateful I am - but I just wanted to say, once again, thank you!

Your support has been incredible and my gratitude is, quite literally, boundless. I know I'm a bit of a bundle, both of words and emotions at the moment. But you also know the reasons.

I honestly don't think I could have coped with all this added nonsense had you not stepped in to put up with me, haha.

So believe me when I say, you've made an old man very happy.

I'm sure we will speak soon, possibly Buddies, just let me let the dust settle. In the meantime, I hope the Universe brings magic to you.

My genuine gratitude.

Supporter- Social Work Team

Brand refresh

Reflecting who we are today

At a time when hospices across the UK are under increasing financial pressure, choosing to invest in a brand refresh might seem bold - even risky. But for us at Keech Hospice, staying still meant standing in the way of the care our communities deserve.

Keech has grown beyond what many people remember. We started as an adult-only hospice. Today, we support babies, children and adults - sometimes even before birth - right across Bedfordshire, Hertfordshire and Milton Keynes. We've merged with Bedford Daycare Hospice, introduced self-referrals, and brought care into homes, schools and hospitals. But our brand hadn't kept the same pace. And that meant some people didn't realise the full extent of the support we offer.

So we took action - not to reinvent Keech, but to reintroduce it. We've kept the warmth and compassion people know us for, while evolving the look and feel to reflect who we are today. That includes a refreshed logo, simplified name, and clearer messaging. This is about being bold enough to challenge perceptions of what a hospice is, while staying true to the heart of Keech.

Our brand now better reflects our purpose: helping people live well until the very end. Because hospice care isn't just about dying well - it's about living fully. And we want everyone to know they're welcome here.

A celebratory brand

Keech Hospice is an inclusive brand that celebrates everyone. We have created a life affirming and joyful identity that differentiates us in a sector that can sometimes feel bleak.

Keech celebrates:

life | love | family | community | our team
our work | teaching | learning | volunteers
dignity | supporters | everyone | choice
patients | a good death | a life well lived

Commissioner statements

Bedfordshire, Luton and Milton Keynes Health and Care Partnership

NHS Bedfordshire, Luton and Milton Keynes Integrated Care Board

Statement from Bedfordshire, Luton and Milton Keynes Integrated Care Board (ICB) to Keech Hospice Quality Account 2024-2025

BLMK ICB acknowledges receipt of the 2024–2025 Quality Account from Keech Hospice. The Quality Account has been shared with BLMK's Executive Directors, Contract, Performance and Quality Teams and systematically reviewed by key members of the ICB's Quality Committee & Performance, as part of developing our assurance statement.

BLMK ICB would like to thank Keech for hosting the Luton Place Team on 9th October 2024. The ICB has continued to work together with Keech Hospice Care over the last financial year - gaining assurance on the delivery of safe and effective services. Across Bedfordshire and Luton we have worked closely with Keech Hospice and Partners (Local Authority, Healthwatch and community providers) in ensuring patient safety and quality of services. In line with the NHS (Quality Accounts) Regulations, BLMK ICB has reviewed the information contained within the Keech Hospice Quality Account and, to the best of our knowledge, is an accurate reflection.

BLMK ICB would like to thank Keech Hospice for their commitment to provide specialist care for babies, children and young adults and adults with life limiting conditions.

The ICB recognise the challenges of staff recruitment and the impact this had on admissions to inpatient services. The ICB are grateful that Keech were able to accommodate two short-term admissions during this difficult time and feel assured that the staffing levels will be at full capacity imminently. It is positive to hear about the recruitment of newly qualified nurses, and the investment in the future workforce.

BLMK ICB recognises the challenges faced by all organisations in delivering cost effective high quality care with in the current funding envelop. We commend Keech with their ongoing work regarding sponsorship and charity-based income and the decision to investment to ensure IT resilience and a brand refresh.

It is positive to hear about the ongoing work with homeless communities which link the 2024-2025 quality priorities. It is reassuring to hear about the positive feedback from patients, friends and family.

It is positive to hear of the refurbishment and increasing referrals for the Living Well Centre, in line with last year's ambitions. BLMK feel assured that the aim to recruit more Freedom to Speak Up Guardians has been achieved.

The ICB have reviewed Keech Hospice's priorities for 2025 - 2026. Undertaking annual audits for hydration, nutrition and Do Not Attempt Cardiopulmonary Resuscitation (DNACPR), which are common themes for improvement across BLMK health services. We hope that the patients and families see the benefits of Advanced Care Planning over the next year, too.

The ICB were reflecting on the challenge of staff recruitment Keech Hospice's investment in the newly qualified workforce and therefore advocate that there could be a plan embedded for 2025 – 2026 in relation to sustainability of the workforce, too.

As Strategic Commissioners and System Partners we recognise the ongoing improvement of services to support the ever-increasing demands, complexities and challenges of meeting the needs of the population. The ICB look forward to continuing the work with Keech Hospice in improvement of patient safety, quality and patient experience.

We trust Keech Hospice finds these comments helpful and anticipate continuous improvements throughout the coming year. BLMK ICB looks forward to working with Keech Hospice across our Integrated Care System in 2025-2026 and beyond.

Sarah Stanley
Chief Nursing Officer Executive Director Nursing and Quality

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) response to the Quality Account of Keech Hospice for 2024/2025.

NHS Hertfordshire and West Essex Integrated Care Board (HWE ICB) welcomes the opportunity to provide this statement on the Keech Hospice Quality Account for 2024/25. The ICB would like to thank Keech Hospice for preparing this Quality Account, developing future quality priorities, and acknowledging the importance of quality at a time when they continue to deliver services during ongoing challenging periods. We recognise the dedication, commitment and resilience of staff, and we would like to thank them for this.

HWE ICB regard Keech Hospice Care as a key partner in the delivery of integrated palliative and end of life care for the children and young people of Hertfordshire. During the year the ICB has been working closely with Keech Hospice in gaining assurance on the quality of care provided to ensure it is safe, effective, and delivers a positive patient experience. In line with the NHS (Quality Accounts) Regulations 2011 and the Amended Regulations 2017, the information contained within the Quality Account has been reviewed and checked against data sources, where this is available, and confirm this to be accurate and fairly interpreted to the best of our knowledge.

It is encouraging to see the progress made on the 2024/25 quality priorities, alongside the consistent positive feedback received from patients and their families across all services. The hospice's strong commitment to equality, diversity, and inclusion and its system-wide collaboration, particularly in palliative and end-of-life care, position it well to shape responsive, person-centred care. This is recognised with Keech's receipt of Hospice UK's Improving Inclusivity Award. The hospice's education programmes and public workshops on end-of-life are valuable in raising community awareness and offering meaningful support.

The hospice is recognised for its effective response to recruitment challenges through a comprehensive, organisation-wide strategy that has strengthened workforce capacity. The continued emphasis on the Freedom to Speak Up agenda is welcomed, reflecting a strong commitment to transparency and staff voice. The approach to combine the Youth Group for 11 to 19-year-olds with transition support is notable, offering a more effective way of promoting this aspect of the service among young people and their families.

The ICB acknowledges Keech Hospice for their dedication in implementing the Patient Safety Incident Response Framework (PSIRF), strengthening how the NHS learns from patient safety incidents to enhance care and outcomes. We will continue our joint working with Keech Hospice and system partners as part of continued progression with PSIRF and the National Patient Safety Strategy and recognise that evidencing key principles such as compassionate engagement, proportionality, and system-wide approaches will be vital to ensure its ongoing success.

Looking forward to 2025/26, the ICB supports Keech Hospice quality priorities and we look forward to a continued collaborative working relationship, including through building on existing successes and collectively taking forward needed improvements to deliver high-quality services for this year and thereafter.

Nadean Marsh
Assistant Director of Nursing and Quality Herfordshire and West Essex ICB

KEECH HOSPICE

01582 492339

If you have any questions or would like to find out more about getting involved, email us at:
info@keech.org.uk

Visit our website
www.keech.org.uk

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