THE KIRKWOOD SUPPORT LIFE
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The Kirkwood
Introduction
This Quality Account has been prepared during the COVID-19 pandemic. A period of uncertainty, challenges, and unprecedented change, both for our community and for those delivering and working in healthcare.

Therefore, in part, the Quality Account for 2019/20 will be reflective of our learning from the COVID-19 crisis and a celebration of the successes we have achieved at a very testing and demanding time. It provides a focus for building on those successes, and to pay tribute to our employees and volunteers, without the support and commitment of whom this would not have been possible.

We had to make rapid and frequent changes in response to the Government and Public Health England Covid-19 guidance, which developed daily during February and March 2020. The Incident Response was largely successful, ensuring that we continued to support the maximum number of people possible under the circumstances.

This year’s Quality Account also tells the story and thinking behind our new identity. Back in 2019, we embarked on a journey to define and create a new brand for The Kirkwood. As part of our ambition to reach more people than ever before, our new brand identity brings all of our people and communities together by establishing us not as a building or an institution – but as a movement: a vital force for good, driven by a legion of passionate supporters from all across Kirklees.
The Kirkwood have always had a good reputation with stakeholders. This reputation is built upon the quality of our clinical services and the interactions that our community have with our charity. It is everything to us. It gives us the permission to keep developing and delivering important services to patients and families in Kirklees.

On behalf of The Kirkwood’s Executive Team and the Board of Trustees, it is my pleasure to introduce our 2019-20 Quality Account. This report is an opportunity to share with you how we are doing, how we got on delivering the improvement priorities we set for this year and the steps we take to confirm the quality of our services. We have also set out the actions we intend to take in 2020-21.

This report is produced for our patients, their families and carers, the local community and our NHS partners, who contribute to the success of our clinical services.

This year we have updated our identity. We have done this in order to strengthen the understanding of who we are and what we do. Whilst we have a good reputation locally, we know that the number of people that we care for and the number of people who support our care are held back by a limited understanding of our the vital services we offer.

We believe this new iteration of our identity will help our stakeholders to understand that we are more than a place, a building in Dalton, where people are cared for at the end of their life. The truth is that we are, and always have been, a movement of people who believe the same thing. We believe that people should be cared for as they approach the end of their life as well as they were at the beginning. Our entire focus is on quality of life, for our patients and those that are important to them. Everything we do is aimed at improving the life of someone who is affected by a life limiting illness, for however long that may be.

We are The Kirkwood and we support life.

The Kirkwood Support Life.
We are very proud of the impact that our services continue to have for local people. In 2019-20, we continued to provide care and support to a large number of patients and families, helping to meet their needs:

- Our team handled nearly **14,000 calls** through our Specialist Advice Line, which is available 24 hours a day - every single day of the year
- **1,154 patients** were given specialist advice and support in their own homes by The Kirkwood Nursing Team
- **568 patients** used our Support & Therapy Department
- There were **289 admissions** to The Kirkwood In-Patient Unit
- **601 patients** were supported by our Care Co-ordination Service
- **574 people** were supported by The Kirkwood Family & Spiritual Care Teams

We know that there are many people within Kirklees that would benefit from our care but aren’t being reached by The Kirkwood. We are determined to change that.

Our ambition is to double the number of people we care for in the next ten years, we want to become the ‘go-to’ charity for anyone who is affected by life limiting illness in Kirklees. We will not compromise on quality; we aim to continue to provide the best possible care for patients, carers and families, and we will generate the support we need by working even closer with our local community to improve the understanding of who The Kirkwood are and what we do.

I am pleased that we were able to make great progress against the Priorities that we planned for this year, and we have set ambitious objectives for 2020-21.

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 The Kirkwood. The safety, experience and outcomes for all those using our services couldn’t be more important.

**Michael Crowther**  
Chief Executive  
December 2020
The Kirkwood are here to support anyone affected by a life limiting illness, **every step of the way.**

Right now over 3,000 people in Kirklees are living with an illness from which they will not recover. Many of them are approaching the end of their life. The reality is that there are not enough services to help these people to live the best quality of life they can. We want to change that.

We have set ambitious goals for the future. The patients and families that could benefit from our services deserve nothing less. We owe it to all the people who are part of The Kirkwood movement across Kirklees, and beyond, to never stop until everyone affected by a life limiting illness has access to the best possible care and support.

In the next ten years we want to double the number of people we care for. We also want to become the ‘go to charity’ for anyone affected by a life limiting illness so that everyone who needs our support reaches out early enough for us to make a positive impact on their quality of life.

We will raise awareness about who we are and what we do and we will work hard to improve the understanding of The Kirkwood within our local communities. And we will continue to provide the best possible care for our patients, their families and those that care for them.
The Kirkwood currently support around half the people affected by a life limiting illness here in Kirklees. The stark reality is that the others who may benefit from our care don’t reach out soon enough, if at all.

Perhaps it’s because they aren’t aware of all the ways we can help. Perhaps they think we only care for people at the very end of life. Or perhaps it’s because they simply don’t think we are right for them. We need to change that. We want everyone who might benefit from our services to reach out early enough for us to make a positive impact on their quality of life. And to do it, we must be bold.

We need to challenge the perception that The Kirkwood is a building in Dalton; a place where people are cared for in their last few days; that our focus is on death. Whilst it’s true that those things are part of our important work – it is not all we do.

We’re here for local people across our community whenever they need us. We help them to improve their quality of life and make the most of the time they have left. Our patients, their carers and those closest to them all have their own needs, aspirations and expectations. So our support is built around their personal wishes and goals. Our focus is on quality of life for everyone in our care.

We believe that the impact of our care is profound, but that the limited understanding of our vital, life-changing work hampers our ability to reach more people who might benefit from care. It leads to confusion, and a misconception that other charities are providing the community services that, in reality, The Kirkwood are.

Too many people tell us the same thing; “I wish I’d known about all the different services you offer sooner.” With your support, The Kirkwood will reshape opinions and reach more people than ever before.
A brand rooted in and inspired by our history

Born out of our rich history, not as a place but as a community of people who set out to change the way local people were cared for at the end of their lives, our new expression is a bold step forward, heralding the start of an exciting future for The Kirkwood.

Things may look and feel a little bit different, but we are driven by the very same passion and belief that led our founder, David Stocks, to pen a letter to the Huddersfield Daily Examiner almost four decades ago. A letter which painted a picture of a better way to support local people affected by a life limiting illness, and urged like-minded people to join him.

In trawling the archives, we were inspired by the achievements of those who had come before us. From the honesty and integrity of the first appeal letter, to the hand-made, personally dedicated cornerstone, laid by David Stocks and Dr. Alan Barlow. Our charity was formed by honest, hardworking local people who wanted a better future for people in our local community. Raising funds to build The Kirkwood’s first in-patient unit at Dalton was a labour of love, and a powerful symbol of what The Kirkwood can achieve when we work together, with one goal.

Our mission remains the same today as it was then. And we know that where we’ve come from is as important as where we are going. So our brand is rooted in, and inspired by our history. It is an integral part of who we are, and an essential part of what we do. Our new expression takes us back to that original, pioneering spirit. To a community of people who believe the same thing, and who won’t stop working, advocating, lobbying, raising money, volunteering, donating and caring until everyone affected by a life limiting illness has the care they deserve.
The Kirkwood is not a building, an In-Patient Unit or place of care. We are a movement of people – motivated by the belief that everyone affected by a life limiting illness deserves the very best care. Care which helps us improve quality of life – for however long that may be.

Our movement is vast. We are clinical and medical professionals. We are patients, carers and families. We are employees, supporters and volunteers. Together, we are The Kirkwood. The Kirkwood exists to improve the quality of life for local people, against all the odds. It’s our reason for existing, and the essence of palliative care.

Together, we support those in our care to live well and make the most of every single day. Even when time is short. We make the complex simple by focusing on what is important. And we support families and loved ones to live on, and live well. The Kirkwood movement is united behind one common purpose – to Support Life.

Our new identity is a rallying cry. A call to arms to everyone in our community who believes people affected by a life limiting illnesses deserve the very best, compassionate care. Care which helps to improve quality of life, in ways that are important for the families relying on it.
Our existing identity works against us. It does nothing to challenge people’s traditional view of ‘hospice care’, limiting our ability to reach out to those people who might benefit from our help but don’t think ‘hospice’ is for them. And it prevents those in need from being told about and referred to our wide range of services.

The identity which we project must work harder for us, helping people to understand who we are and what we do, encouraging people to seek out our care and inspiring people to become part of our cause.

Today, more than ever, we need to tell the world who we are and reach out to local people with a renewed sense of clarity, consistency and purpose. As we seek to care for more people than ever before, we must be brave and express ourselves in a way which engages and inspires our entire community.

**What difference will it make?**
In the coming years, we will raise awareness about who we are and what we do. We will work day and night to improve the understanding of The Kirkwood within our local communities. And above all else, we will continue to provide the best possible care for our patients, their families and those who care for them.

In the future, we want more people to reach out for care directly or to signpost someone they know or care for to our services. We want to engage and inspire new supporters and volunteers from all walks of life to join The Kirkwood movement. And we want to become the employer of choice for all professionals who hope to make a positive difference in our local community. If we are to achieve our goals, we need to unite behind this exciting new identity, spread the word, reshape opinions and reach out to more people than ever before.

If you’re reading this, you’re already part of The Kirkwood, and we need your help more than ever. It’s going to be an exciting journey. Are you with us? #SupportLife
“Drew was desperate to be back in Huddersfield. As a massive Huddersfield Town fan, he didn’t want to be in a hospital ward in Leeds. We had to get him home no matter what”

Lesley Heppinstall
Andrew Heppinstall was diagnosed with a vascular tumour in his brain. He underwent the first of a number of planned surgeries to remove the tumour the following month, but sadly suffered a stroke which caused irreversible damage.

The medical team fought hard to bring Andrew back, but Lesley and his family knew after just a few days that he wouldn’t recover. Andrew was moved from the Intensive Care Unit to a Palliative Care Ward in Leeds General Infirmary, but he was insistent that he wanted to be in Huddersfield. A lifelong Huddersfield Town fan, he was being cared for in the city, which was home to their fiercest rivals. He was determined to get back to his home town.

“When we were moved to the Palliative Care Ward we met a nurse who said to us; “if there’s anything we can do to help you, please let us know.” said Lesley. I immediately asked her; “Can you get us out of Leeds?”

“Drew was desperate to be back in Huddersfield. As a massive Huddersfield Town fan, he didn’t want to be in a hospital ward in Leeds. We had to get him home no matter what. “When we found out that The Kirkwood might be able to help, we got in touch. The team found him a room and even told us they had reserved it for Andrew. We just needed to get him there.”

It was the first time that the Heppinstall family had been told The Kirkwood could help, and Lesley reflects that, at the time, there was no information or guidance about how hospices can support families affected by life limiting illnesses.

“Drew's uncle, Graham, had been cared for on The Kirkwood In-Patient Unit two years previously, so we knew a little bit about the care they offered. But our knowledge was really limited. If more people knew and The Kirkwood could get the message out more prominently, it could help so many more people.”

Lesley and her family were desperate to get him to The Kirkwood In-Patient Unit, but the team at Leeds were concerned about his condition and were understandably reluctant to move him.

“It was a really difficult moment, but to me, it was so important to help Andrew to fulfil this last wish. It’s about dignity and what he wanted at the end. We had to find a way to get him to Huddersfield.”
“It was rush hour and the roads were busy on the way from Leeds to Huddersfield, but with every mile we put between Drew and Leeds, my little Terrier fought. His breathing became more relaxed and stronger, his oxygen levels improved and his heartbeat steadied and never wavered.”

“The medic with us never said a word, just looked on in disbelief as I gave him a running commentary of the journey. No intervention was needed. Andrew Heppinstall had this.”

“I honestly don’t think Drew would have made it through the night if he’d been in Leeds.”

“Drew arrived at the doors on Friday evening at 6.30pm. Miraculously, Ben and Helen pulled in at the exact same time. They had to deal with cancellations, no show trains and overcrowding, but still made it in time.”

“Drew spent over 24 hours being cared for on The Kirkwood In-Patient Unit. He sadly died on the Sunday morning.”

“The support we received as a family in that short time was amazing. We couldn’t have asked for better care. “Looking back, Lesley is philosophical about the role The Kirkwood was able to play in Andrew’s care.”

“When we discovered that The Kirkwood could help us to fulfil Drew’s last wish, it was such a positive moment at a really difficult time.”

“I would have loved to have known how The Kirkwood could have helped us sooner. I didn’t realise that they had an advice line or that they support people at any stage of their illness.”

“Even though Drew’s uncle had been cared for on the In-Patient Unit, we still didn’t know about all the different ways The Kirkwood can help.”

“We went through a really difficult time in those last couple of weeks. Then we found a positive at the very end. The care our whole family received from The Kirkwood was amazing. They were the light at the end of the tunnel.”

“I want to tell my story because I want others to know that The Kirkwood are here to support patients and families throughout their illness, not just at the end. I want others to know that they can reach out for help whenever they need it.”

“Support Life”

The Kirkwood Stories
When 71-year-old Paul Lucker was admitted to our In-Patient Unit for help with his pain, he was anxious about what to expect. But with a little help from our team his fears were soon put at ease.

Originally from London, but having lived in and around the Kirklees area for many years, Paul has been involved in lots of overseas community projects over the years, putting his skills to use to help those less fortunate. Paul spent 50 wonderful years with his wife, Leny. The couple were married in 1971 and raised four amazing children together. Paul and Leny were dedicated to one another throughout their marriage, and shared the trials and tribulations of life together. In November 2018, Paul and Leny shared the pain of both being diagnosed with an incurable form of cancer together. Tragically, Leny died in June 2019.

Paul underwent a procedure to help with his condition in late 2019. He didn’t feel well enough to go back to his own home afterwards. So our community nurse, Kathryn, stepped in to support Paul and his family, helping to get everything in place so he could live with his son.

“When my procedure, I have been living with my son, Richard, and daughter-in-law, Penny, who have been doing a wonderful job of looking after me,” said Paul.

“Before I moved in, The Kirkwood Nurse, Kathryn, helped to arrange everything I needed at Richard’s, including a bed and other equipment.” In the weeks following his procedure, Paul began to suffer from excruciating pain.

“The pain attacks were unbearable; my son Richard always comforted me. I felt like life was not worth living, I had no quality of life and I felt like a burden.”

“When Kathryn suggested that I spend some time on The Kirkwood In-Patient Unit, I initially felt anxious. People just assume that you go there to die. But I’ve realised it’s not just a place where people die.”
“I didn’t think The Kirkwood would have a piano. When I found out that they did I was so pleased. I used to play voluntarily in care homes and have also played for patients at another hospice.”

“I can have stimulating conversations with the team, who are all lovely and friendly. I’ve had Jacuzzi baths, and the food is great too; I just feel free to do as I please.”

During one of Paul’s conversations with our team, he spoke about his love for music and piano and how much he enjoyed playing – so they organised for a piano to be moved into his room.

“I didn’t think The Kirkwood would have a piano.” Paul explained. “When I found out that they did I was so pleased. I used to play voluntarily in care homes and have also played for patients at another hospice.”

It meant a lot for Paul to be able to play his favourite musical instrument again. “It is brilliant for me. It has been so nice to be able to play the piano. Music and piano is so important. Sometimes I play one or two songs, but when I feel well enough, I will play for longer.”

Paul’s playing proved so popular that lots of people popped into listen. And when his friends came up from Leicester to pay a visit, the group all gathered together to hear him play.

“Being able to play the piano distracts me from the pain. It is so uplifting to see that my piano playing can give pleasure to others.”

“I have also been able to engage with other patients and relatives visiting who are visiting.”

The week before Paul was admitted, he was feeling restless and struggling with his pain. Thankfully The Kirkwood team were able to help him.

“My pain management is improving and is more stabilised. I feel better in myself and I am able to eat solids again. Since being on the In-Patient Unit, my condition has changed and they have been able to adapt to this accordingly.”
When James Pratt’s condition deteriorated during the coronavirus pandemic, Kirkwood Nurse Fiona Marshall was on hand to support the family with whatever they needed.

18 months ago, James Pratt, of Bradley, was referred to Kirkwood’s Community Nursing Team by his GP, who though they could help manage the symptoms of his chronic lung condition until the end of his life. Kirkwood Nurse, Fiona Marshall, helped to manage his symptoms and supported both him and his family as his condition deteriorated.

James and his family had regular meetings with Fiona and visited Kirkwood’s Support & Therapy Centre where he was able to meet people in similar situations and access support. Kelly’s parents also both attended Breathe Better, a five-week course offering advice and support to help James and his family manage his symptoms and improve his quality of life.

Kelly’s daughter, Kelly Adams, reflects on their experience with Kirkwood.

Kelly said: “Dad was end of life, we knew he wasn’t going to get better and that his condition was going to deteriorate. He was ill for a while and started deteriorating about 18 months ago. That’s when his GP referred him to Kirkwood to help with his breathing and manage his symptoms.

“We had our first meeting with Fiona at home. Fiona visited us and put us in the picture of what her role and Kirkwood’s role was and told us that they were there as a support function. After the first meeting with Fiona, we then had either two weekly or monthly meetings with her and she kept us in the loop of what to expect, what was going well and what wasn’t, and how to manage it.

“Fiona was very supportive. I had asked her to be very blunt and honest with me from the start. Any questions or concerns that we had; we always got a very sympathetic but honest answer. She put us in touch with various people across Kirkwood if she wasn’t available. I could ring the Advice Line and there would be someone there to bounce an idea off or just to run something by.”

With Fiona regularly supporting the family, Kelly hadn’t needed to phone Kirkwood’s 24/7 Advice Line during James’s illness. But that changed on Sunday 7th June. As James’s condition started to deteriorate, Kelly got in touch with the team at Kirkwood via the Advice Line, who then facilitated a call from 111.

After discussing his symptoms with the 111 Consultant, James was admitted to hospital, and spent the next 10 days there before returning home.

“During those 10 days I think I spoke to Fiona four or five times. Fiona and the Palliative Care Team arranged extra oxygen at home, a hospital bed and everything we could have possibly needed for Dad to be able to come out of hospital. Fiona also organised for Carers and the District Nurse to start visiting. Dad came home on Tuesday 16th June and spent his last 10 days at home. Within those 10 days I had three consultations with Fiona, either over the phone or via video conferencing.
“Dad thought the world of Fiona. He said she was so nice, caring, honest and that’s what he needed.”

“All the way through, Fiona more than managed our expectations as a family and, if I’m being completely honest, if we hadn’t had that level of support, I would not have known what to do.

“During those 10 days, I was having to administer oral medication that I’d never heard of and didn’t understand. The Kirkwood Advice Line team and Fiona talked me through exactly what I needed to do, when to do it and what symptoms to look for. It was textbook, step-by-step, clear communication and we could not have asked for any more from the team.

“It was always Dad’s wish to pass away at home and we would not have been able to do that without the advice and support we got from Kirkwood. Fiona was always there. Even when we hit the pandemic and she couldn’t physically come and visit, she would do a video consultation and then relay it back to me in a phone consultation about what steps we needed to take next.

“If we hadn’t of had a pandemic, I actually think we would’ve had the same level of consistency from the team. I don’t think doing it over the phone has impacted in any way shape or form. I could not fault the communication or the level of care that we got.

“Dad thought the world of Fiona. He said she was so nice, caring, honest and that’s what he needed. But I think it was more so because she made me and mum feel at ease to be able to deal with what was going to come.

“On Monday 22nd June, Fiona advised me that it would be a good time to take leave from work. Then on the Friday dad passed away. I knew as soon as she subtly told me, she was indirectly telling me that he wasn’t going to see six weeks. The way she delivered stuff; it was amazing. We wouldn’t have been able to carry out dad’s wishes if Fiona and the team hadn’t been there.

“As a family, we are so thankful that we had the opportunity and the exposure to experience that, because I think now, when I talk to other people, I can talk from experience that Kirkwood is not just a place associated with death. They actually care, they are just amazing people that are so good at their job, I just don’t think they get recognised enough.”
In 2014, Harold Greenwood, of Honley, was diagnosed with Dementia. Here, his daughter, Cathryn James, tells us about the difference The Kirkwood Specialist Dementia Nurse made for her Dad.

During the first three years of living with Dementia, Harold was cared for in his own home in Honley by his wife, and supported by children, Cathryn, and her three brothers. Over the years, Harold began struggling with the symptoms of his condition including multiple falls, frailty and challenging behaviour, so the difficult decision was made for Harold to be moved into a Care Home.

Cathryn said: “For us as a family, Dad’s comfort was an absolute priority. He would not have wanted to go to hospital and would, like many of us, not have wanted to end his days in a care home or hospital bed.

“After nearly three years in the care home, we noticed Dad was sleeping more, eating less, and generally deteriorating overall. Knowing that Dad was now probably nearing the end of his life, I decided to seek support from The Kirkwood.

“In November 2019, I called The Kirkwood 24/7 Advice Line. I was so surprised when I was told that The Kirkwood had a dedicated Specialist Dementia Nurse who would be able to support my Dad.”

A few days after Cathryn first made contact with The Kirkwood, Specialist Dementia Nurse, Rachel Guest, arranged a meeting with Cathryn where they discussed Harold’s current condition and wishes. Cathryn said: “After Rachel assessed Dad, she helped to co-ordinate lots of things including the palliative medication that he might need. Rachel helped us revise and reinforce care plans and the wishes of how Dad would spend his final days.” Going the extra mile, Rachel supported the care home staff to enable them to provide the very best care for Harold.

“Rachel was a big support for Dad and me. She was a fixer, a co-ordinator and was always available, friendly and helpful. Rachel kept me well informed, answered difficult questions as best she could (although we agreed nature had to take its course), I was reassured and informed about Dad’s care at all times.”

Six years after his diagnosis of dementia, Harold died peacefully, aged 90, on Friday 10th January 2020. Cathryn said: “The fact that there is a specialist role for Dementia at The Kirkwood is wonderful.”

“The care and support was there for not only my Dad, but for our family and the care home staff too. I would say to anyone, don’t be frightened to start to have discussions at an early stage for anyone with or anyone caring for someone living with dementia. The Kirkwood now has a nurse to help you through it all and will put plans in place in line with your wishes.”

The Kirkwood Stories

HAROLD
OF HONLEY

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“The fact that there is a specialist role for dementia at The Kirkwood is wonderful”

Cathryn James
51-year-old Eugenia, who has worked as a domestic cleaner and home carer, was initially diagnosed with breast cancer in 2012. At the time, her illness was manageable. Then in April last year, Eugenia was involved in a road accident and was immediately sent to Hospital for a check-up. During her visit to hospital, tests found that Eugenia’s cancer had spread to many other places around her body. “Ever since the summer, I have been struggling with my mobility and I haven’t been able to go out and enjoy the things I usually like to do,” said Eugenia.

“I have had regular visits at home from Kirkwood’s Community Nurse, Fiona Marshall. Fiona recommended several times that I should visit, but I just wasn’t ready to go at the time, The Kirkwood just meant death to me.” As the months went by, Eugenia’s symptoms worsened, and after another prompt and reassurance from Fiona, she was admitted to The Kirkwood In-Patient Unit, where she received round the clock care and support. Eugenia said: “I just felt at breaking point with my pain, and I was feeling down. Fiona asked me again to spend some time at The Kirkwood, and although I was very apprehensive and scared, I said I would try it.”

After spending her first night on the In-Patient Unit, all Eugenia’s fears were taken away. “The next morning when I woke up, I was asked what I wanted for breakfast. I had the option for a full fried breakfast! The food is just delicious there. “When I was at home and in pain, I never usually wanted to get up. I didn’t eat a lot and I just felt like I was giving up. But after a few days, I was getting up in a morning and getting dressed. I was also having three meals a day!”

During her stay, Eugenia was also introduced to other services such as Complementary Therapies and Physiotherapy – which helped her to improve her mobility. She also attended one of Kirkwood’s newest programmes, ‘Keep your Sparkle’, which supports ladies in dealing with the visible signs of illnesses.

“I’ve had Reiki, a massage, a Jacuzzi bath, and more; I feel like I’ve been treated like a queen!

“I was even able to invite eight of my friends to have breakfast with me one Saturday morning; it really cheered me up. “I just feel like a different person in comparison to how I felt before coming to The Kirkwood. I am back to being me.”

With Eugenia being cared for on the In-Patient Unit in the run up to the festive season, there were many events going on, including our annual Light up a Life celebrations and a visit from a local Choir, which sang Christmas carols for patients.

“Christmas is such a special time at the Hospice itself, the unit is beautifully decorated. I was able to watch the Light up a Life service in December, which was held in the Hospice gardens. It was a very moving and lovely event.” After receiving support from the whole team on the In-Patient Unit, Eugenia was able to go home again just before Christmas.

“I just feel like a different person in comparison to how I felt before coming to The Kirkwood. I am back to being me”
Quality Overview
The Kirkwood were faced with unprecedented challenges due to the COVID-19 pandemic. All our services were affected by the coronavirus crisis.

We embraced the opportunity to transform the way we delivered our clinical services during this period - using digital technology, zoom and video consultations to continue to support those who need us. The changes we have implemented will help us to come out of the crisis in a strong position, to continue to achieve our clinical services’ objectives in the future.

As an organisation, we have rapidly adopted new technologies and working practices so our employees and volunteers are able to support patients and families in a different way. Our whole organisation has switched to working more flexibly and agile, radically reducing the demand on our premises at Dalton and Empress Works. It has provided us with opportunities to think differently about the resources we may need in the future and we continue to explore and trial new ways of delivering services.

We have managed specific areas of work which have considered the following:

- Public Health Guidelines – regularly reviewing and implementing changes to keep patients as safe as possible
- Business continuity and service developments in response to the crisis
- The health, well-being and availability of our workforce
- Managing the risks presented by the crisis and initiating plans to mitigate risks
- A comprehensive programme of communications with every stakeholder group

This Quality Account has been prepared during the COVID-19 pandemic. A period of uncertainty, challenges, and unprecedented change, both for our community and for those delivering and working in healthcare.

Therefore, in part, the Quality Account for 2019/20 will be reflective of our learning from the COVID-19 crisis and a celebration of the successes we have achieved at a very testing and demanding time. It provides a focus for building on those successes, and to pay tribute to our employees and volunteers, without the support and commitment of whom this would not have been possible.

We had to make rapid and frequent changes in response to the Government and Public Health England Covid-19 guidance, which developed daily during February and March 2020. The Incident Response was largely successful, ensuring that we continued to support the maximum number of people possible under the circumstances.
The Kirkwood: Vision

All people affected by life limiting illness have free access to the best possible care where and when they need it and everyone works together to ensure these people are supported to live the best quality life they can.

Double the number of people supported by The Kirkwood at the very end of their lives

Become the ‘go to’ charity that supports people as they approach the end of their lives

Increase giving from people and businesses to meet future demand

Increase funding from the NHS to facilitate future services

The above strategic aims were supported by a clinical services strategy with the following key service development outcomes:

- Establishing a Care Co-ordination Service
- Hospice supported Care Home Beds
- Using technology to support agile working and improvements in patient care and support
- Improving reach to ensure equity of access to palliative care
- Workforce planning

We have been consistent in managing policy and strategic decision making through the crisis. We are pleased to report that by managing to continue most of our services and implementing changes rapidly to transform the way we work, we have supported more patients and families each month than before the pandemic.

The Kirkwood: Strategic Aims

- All people affected by life limiting illness have free access to the best possible care where and when they need it and everyone works together to ensure these people are supported to live the best quality life they can.

- Double the number of people supported by The Kirkwood at the very end of their lives.

- Become the ‘go to’ charity that supports people as they approach the end of their lives.

- Increase giving from people and businesses to meet future demand.

- Increase funding from the NHS to facilitate future services.

- Our strategic plan is focussed on a number of priorities that we believe will prepare the ground for future success.

The above strategic aims were supported by a clinical services strategy with the following key service development outcomes:

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- Hospice supported Care Home Beds
- Using technology to support agile working and improvements in patient care and support
- Improving reach to ensure equity of access to palliative care
- Workforce planning

We have been consistent in managing policy and strategic decision making through the crisis. We are pleased to report that by managing to continue most of our services and implementing changes rapidly to transform the way we work, we have supported more patients and families each month than before the pandemic.

The Kirkwood: Values

We are:

- Respectful and Inclusive
- Passionate and determined
- Open and Honest
- Kind and Compassionate
- Forward Thinking
- We strive for Quality and Excellence

The Kirkwood: Purpose

The Kirkwood support anyone that is affected by any life limiting illness every step of the way.

Patients, families and carers are the focus of everything we do. Our values are what we live and work by.

The Kirkwood: Who We Are
The Kirkwood help local people who are affected by an illness that cannot be cured, to live well and die with dignity in a place of their choice, where this is possible. We provide services, free of charge, to people in Kirklees affected by life limiting illnesses that focus on their quality of life.

We provide care for people affected by life limiting illnesses including cancer, neurological conditions, advanced heart and lung diseases and dementia. We also provide services to patients’ families, carers and anyone who is important to them. Most patients use a combination of The Kirkwood’s services as their illness progresses and draw on the specialist skills of our multi-professional team, who work in collaboration with colleagues in all care settings to provide continuity of care.

The Kirkwood also provides programmes of education to other professionals who are caring for people with life limiting illnesses. In this way, we seek to improve the quality of care experienced by all people who have palliative care needs. Our services are continuously monitored, evaluated and reviewed to meet the changing needs of patients and their families. All our services are delivered taking into account current national guidance, quality statements and standards.

Our services are provided by a multi-professional team comprising of:

- Doctors, including Medical Consultants
- Registered Nurses and Healthcare Assistants
- Therapists to support independence and promote comfort, including: Physiotherapy, Occupational Therapy, Speech and Language Therapy, Dietician and Complementary Therapy
- Social Workers, to provide a wide variety of support to both the person and those that are important to them. This can include: sourcing practical help at home, accessing other services, advice around debt or income maintenance, help with housing, advocacy, working with schools or employers, or offering psychosocial support
- Spiritual Care Services supporting patients and their families
- Psychotherapists and Counsellors
- Support services providing maintenance, cleaning and catering for patients
- Volunteers providing a range of support to our patients and the clinical teams

During 2019 - 20 The Kirkwood provided the following clinical services:

- **In-Patient Unit**
  Provides 24-hour care and support by a team of specialist palliative care staff at our main site in Dalton.

- **The Kirkwood 24/7 Advice Line**
  Healthcare professionals, patients and their carers can contact The Kirkwood using this line for expert advice at any time of the day or night, seven days a week. The Advice Line provides access to specialist nursing and medical advice at any time on symptom control, syringe driver and drug use, appropriate place of care and management of palliative care emergencies. It enables more patients to be supported and, as their illness progresses, to have their needs met as soon and as fully as possible.
The Kirkwood Support & Therapy Centre
Includes a range of self-management programmes to give patients extra support to manage symptoms, gain confidence at home and maximise quality of life.

Bereavement Service
A team offering counselling and psychotherapy, pre and post bereavement, to anyone who has a life limiting illness or has been bereaved due to a life limiting illness.

Out-Patient Services at the Dalton Site
These provide a consultation with a Consultant in Palliative Care or Hospice Speciality Doctor.

The Kirkwood Community Nurse Team
A team of nine Kirkwood Clinical Nurse Specialists, including an End of Life Care Admiral Nurse and a Clinical Nurse Specialist dedicated to supporting care homes in north Kirklees. Our Community Nurses offer advice on all aspects of pain and symptom control, and provide emotional and psychological support for patients at home and in care homes. Our Clinical Nurse Specialists also provide advice to Healthcare Professionals and deliver education on all aspects of palliative care. The team are also supported by The Kirkwood’s Medical Team and will be welcoming a Community Consultant in Palliative Care at the end of 2020.

Care Co-ordination
The Kirkwood Care Co-ordination service commenced in July 2019.

The team operate a telephone support system and work hand in hand with our Community Nurses to support people with a range of non-medical issues, including organising equipment, care packages, blue badges and benefits advice. The service helps patients and families navigate the complexities of the health and social care system, providing peace of mind and support to those that care about them too.

The Kirkwood Companions
The Kirkwood Companions service provides a trained volunteer service for patients in their homes and offers friendly companionship and a listening ear. Due to COVID-19 and the subsequent restrictions concerning home visits, this service has continued to successfully support our patients by telephone.
In the last five years, the money we have spent on our charitable purpose has increased by over 40%. In that time, we’ve taken opportunities to expand our care into the community, and added new skills and experience to the team to help us meet the needs of people with many different palliative care needs. If we are to sustain our services and realise our ambitions, we may need to increase expenditure significantly in the future.
## We are there when you need us

<table>
<thead>
<tr>
<th>Metric</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Phone calls made to our 24/7 Advice</td>
<td>13,813</td>
</tr>
<tr>
<td>Drop-In sessions attended by patients</td>
<td>2,587</td>
</tr>
</tbody>
</table>

## We focus on what matters to you

<table>
<thead>
<tr>
<th>Metric</th>
<th>Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>People supported in their own homes by The Kirkwood nurses</td>
<td>1,154</td>
</tr>
<tr>
<td>Discharged from our In-Patient Unit after their symptoms were managed effectively</td>
<td>100</td>
</tr>
<tr>
<td>Patients attended a Drop In session at our Support &amp; Therapy Centre</td>
<td>357</td>
</tr>
<tr>
<td>Patients admitted to our In-Patient Unit</td>
<td>289</td>
</tr>
<tr>
<td>Home visits made to patients by The Kirkwood nurses</td>
<td>3,101</td>
</tr>
<tr>
<td>People supported by our Care Co-ordination team</td>
<td>601</td>
</tr>
<tr>
<td><strong>We provide the best care for you at the end of life</strong></td>
<td><strong>We support families during illness and in bereavement</strong></td>
</tr>
<tr>
<td>--------------------------------------------------------</td>
<td>--------------------------------------------------------</td>
</tr>
<tr>
<td><strong>289</strong> Patients admitted to our In-Patient Unit</td>
<td><strong>1,379</strong> Out of Hours calls made to our 24/7 Advice Line</td>
</tr>
<tr>
<td><strong>686</strong> The total number of people we cared for at the end of life</td>
<td><strong>181</strong> People cared for at the end of life on our In-Patient Unit</td>
</tr>
<tr>
<td><strong>93%</strong> Of people in our care who died without needing a hospital admission</td>
<td><strong>574</strong> People helped by our Family Care Team through pre and post Bereavement support and counselling</td>
</tr>
</tbody>
</table>
Total Raised by all our Shops

£2,213,729

How we all help other people on their journey
Walkers laced up for our Midnight Memory Walk in 2019
Participants got covered in paint at our 2019 Colour Rush
Dedications were made in memory of a loved one as part of Light up a Life
Was raised for The Kirkwood at Light up a Life
Was raised for The Kirkwood at the 2019 Colour Rush
Christmas Trees were collected and recycled in support of The Kirkwood
Players took part in our weekly Lottery draw
Was raised through The Kirkwood Lottery in 2019-20
Donated as part of our Christmas Tree Recycling campaign
Midnight Memory Walk Total Raised
Supporters chose to support The Kirkwood
People chose to support us with a regular monthly donation
Priorities for Improvement
Priority one: Patient Safety

Just Culture

The fair treatment of employees supports a culture of fairness, openness and learning, by making employees feel confident to speak up when things go wrong, rather than fearing blame. Supporting employees to be open about mistakes allows valuable lessons to be learnt so the same errors can be prevented.

There is an ongoing commitment to embed a ‘Just Culture’ and review errors using a Just Culture approach. This will build upon initial work that has started to develop a Just Culture here with The Kirkwood from the previous year.

The priorities set last year were ambitious and a key objective had to be put on hold due to the COVID-19 pandemic.

This remains important and to ensure this will carry on into next year’s priorities, the following objectives have been identified:

- Carry out Just Culture assessments to measure and improve safety culture
- Hold Just Culture workshop/awareness sessions
- Work closely with the Lead for Safety at the Clinical Commissioning Group (CCG) to share good practice
- Review The Kirkwood’s Incident Response Plan against the new NHS Patient Safety Incident Response Framework in preparation for the publication of this in 2022 (please note the launch of the revised NHS framework has been delayed due to COVID-19)
Priority two: Clinical Effectiveness

Reviewing deaths in hospital of patients known to The Kirkwood Clinical Services

One of our priorities is to support patients to remain at home at the end of their life and 93% of people in our care died without needing a hospital admission. However, some patients known to our teams are admitted to hospital appropriately and some sadly die as part of a hospital stay. It is important to recognise if this was necessary or if anything further could be done to manage patients outside hospital to prevent any potential unnecessary hospital transfers.

Over the next 12 months, we will be carrying out robust analysis of these deaths to inform the learning and development of our clinical services to ensure as few people as possible known to us die in hospital.

Priority three: Patient Experience

Improving mechanisms for capturing patient and service user feedback

We currently collect friends and family feedback from our In-Patients and also Day Services feedback from patients, families and carers. We have a number of volunteers who collect this feedback and we proactively ask people to identify areas where improvements can be made.

For community services such as our Community Specialist Palliative Care Team and Bereavement Service, we have posted out questionnaires to service users. However, historically the return rate for these has been poor. The COVID-19 pandemic has also impacted on our ability to gather feedback effectively as we move to telephone and virtual platforms for service delivery as well as limiting volunteer support on the In-Patient Unit.

While the comments are very positive, we wanted to increase the quantity of feedback received and extend this to all our service users, thereby ensuring we reflect feedback in developing and improving our services.

Our objectives over the next 12 months are:

- To improve numbers of patient experience feedback received, particularly from those who have been in receipt of our community services
- Review the mechanism for collecting real-time feedback from families and carers who are using our services and engaging with us virtually
- Explore software to enable service users to feedback in a range of languages
- To use feedback in a planned and managed way to inform and improve services
Progress Against Priorities for Improvement 2019 - 20

Priority one: Patient Safety

Just Culture

An organisational ‘Just Culture’ creates the conditions necessary for safe patient care and employee wellbeing. The following dimensions of Just Culture include:

- Feedback and communication
- Openness of communication
- Quality of event reporting processes
- Continuous learning and improvement
- Trust

This has been an ambitious objective and there is more work to do. Therefore, this objective will be carried forward next year.

The assessment of current reporting and safety culture planned for February was put on hold due to the COVID-19 pandemic but will be re-scheduled for later in the year.

Actions and progress to date include:

- The Director of Clinical Services is a member of the West Yorkshire Just Culture Network and attends twice-yearly network meetings
- Incident Investigation Training incorporating the principles of Just Culture provided by Calderdale and Huddersfield NHS have been attended by the In-Patient Unit Sisters, Director of Clinical Services, Support and Therapy Manager and Clinical Services Manager
- The development of a three-year clinical safety plan
- Detailed objectives over three years have been identified to embed Just Culture has been created within the clinical safety plan document
- Vantage - the electronic database for reporting incidents - is now live
- A Clinical Incident Review Group has been formed which reviews all clinical incidents, identifies learning and ensures feedback from learning forums are captured, shared and uploaded onto Vantage
In line with the development of the Kirklees End of Life Provider Alliance, The Kirkwood have brought together all community and primary care providers that offer care and support to people at the end of their lives. The alliance is now well-established and has resulted in more joint work between these organisations. The alliance work together to identify people who are in need of palliative care support, care co-ordination at the end of life and provision of high-quality education and training for health and social care professionals across Kirklees. The group initially focused on strengthening partnership working and integration within community care and has jointly created a Patient Charter which sets out our intentions as an alliance, both within our own organisations and within wider stakeholders.

The charter is a commitment as a health and social care system to meet the following aims:

Ensure that people are as informed as possible about the approach of end of life to enable informed decision making about their preferences

Care is timely, compassionate and reflects their needs and wishes as far as possible

People remain in their place of preference where possible, avoiding unnecessary hospital admissions, and are able to die with dignity

People and their carers are engaged in the co-production of services and feel supported during end of life and after the person has died

The charter has been signed off by all organisations within the alliance

An implementation plan has been drafted which includes a focus on internal roll-out of the charter

The charter has been shared with The Kirkwood Management Group and Clinical Leads with plans to discuss further. The charter will be shared with Community Palliative Care Team and Care Co-ordination Team, so they are aware of the wider strategic work underway and the implications for the patients they support

High-level training aligned to the charter is in development

Examples of best practice and case studies continue to be collected and shared with the alliance members
The Kirkwood recognise a greater focus is required to meet the needs of hard to reach people and groups within Kirklees, who may not readily access services. Everyone living with a life limiting illness should have access to high-quality palliative care and be treated with dignity and respect. People who identify as LGBTQ+ may have specific experiences, needs and preferences that health and social care professionals can be aware of so they can provide the best end of life care.

A key part of our Clinical Services Strategy is improving reach into different groups and ensuring equity of access to palliative care. The focus for the next 12 months will be around the needs of LGBTQ+ people. LGBTQ+ people have all the palliative care needs that other people have, including symptom management such as pain, spiritual and emotional needs. However, they may face additional challenges and barriers to getting the care they need and may not access services if they feel there is a risk of being discriminated against.

What have we done so far?

A small working group was established to progress the agreed objectives. This has included reviewing existing policies from an employee and service-user perspective.

Existing data relating to service users has been reviewed, however this is minimal given current information collected. Information from the Kirklees Joint Strategic Assessment has provided further understanding on local data.

Visible symbols such as stickers and pin-badges have been designed, printed and displayed across the hospice site. Further work is required to understand how this could link in with our retail premises.

Patient information has the LGBTQ+ symbol evident.

Attendance at Batley Pride.

Mapping of local stakeholders and external events is underway. There is scope to work with other local organisations such as Locala and Kirklees Council who also wish to engage with LGBTQ+ people and organisations - appropriate links have been made.

As this work progressed and as one of the overall strategic objectives is to improve reach to ensure equity of access to palliative care, it was determined that an organisational wide approach was required. As part of The Kirkwood’s ongoing commitment towards maintaining and developing a working and caring environment that is welcoming to people of all backgrounds and abilities, we are embarking on a journey with the National Centre for Diversity that will lead us to achieving the Investors in Diversity Award.

It is our ambition that this award will provide confidence and send out a clear message supported by our brand that we are here to support anyone with a life limiting illness, regardless of social circumstances, age, disability, gender reassignment, race, religion or beliefs, sex or sexual orientation.
Quality of Service
Review of Quality Performance

We have Multi-Professional Champions in all these areas supported by our Practice Development Sister, who is involved in auditing the safety data, reviewing incidents, identifying learning and implementing any changes to practice.

Whilst none of our incidents in 2019/20 have been classified as a serious incident, we have undertaken serious incident investigator training with senior staff identified to be investigators. We have also reviewed the Clinical Incident Management Standard Operating Procedure.

Drug Errors

There were 24 patient related drug errors during the period. Any error that involves a controlled drug is reported to the Controlled Drug Local Intelligence Network.

There were 31 near miss/non-patient incidents recorded. Examples include, broken drugs ampules, dropped medication and documentation errors.

Slips, Trips and Falls

It is very important that we support our patients to remain as independent for as long as they are able to be and sometimes the desire a patient has to continue to be independent means that falls occur. There were 24 patient falls on the In-Patient Unit during 2019-20 and all were low harm/no harm.

Pressur Ulcers

There were 24 hospice acquired pressure ulcers. None were category 3 or required reporting to Care Quality Commission.

Infections

<table>
<thead>
<tr>
<th>Infection</th>
<th>Hospice Aquired</th>
</tr>
</thead>
<tbody>
<tr>
<td>Carbapenemase producing Enterobacteriaceae carrier</td>
<td>0</td>
</tr>
<tr>
<td>Enteritis due to norovirus</td>
<td>0</td>
</tr>
<tr>
<td>Methicillin resistant staphylococcus aureus</td>
<td>0</td>
</tr>
<tr>
<td>Vancomycin-resistant enterococcal septicaemia</td>
<td>0</td>
</tr>
<tr>
<td>Extended spectrum beta-lactamase resistant bacterial infection</td>
<td>0</td>
</tr>
</tbody>
</table>
**Duty of Candour**

We continue to have an open policy of reporting all our near misses and clinical incidents, whether they cause any harm or not. This includes informing and apologising to patients and/or their families in keeping with the ‘Duty of Candour’ regulations when there is a notifiable incident (where there is moderate harm, even if this is unavoidable).

**Audits**

During 2019-20, The Kirkwood participated in 0 National Clinical Audits and 0 National Confidential Enquiries as it was not eligible to do so. However, we have an extensive internal audit programme, we deliver a programme of patient safety audits using national and locally developed audit tools. There is a multi-disciplinary approach to audit with dissemination of reports, monitoring of action plans and re-audit where necessary.

During 2019/20, we developed an electronic platform on Vantage (our risk and safety database) as a repository for our audits and to track when audits are due along with what actions and learning are required.

The Kirkwood completed the CQC Infection Control and Prevention Board Assurance Framework and to add further scrutiny during the COVID-19 crisis, we have also had an external review of our infection control procedures. We are grateful to Carole Hallam of ACIN Consultants for volunteering her time and expertise to support us with this.

Healthwatch Kirklees carried out an 'enter and view' visit to the hospice site in July 2019 and the report has been published on the Healthwatch Kirklees website. It is a very positive endorsement of the quality of care delivered by The Kirkwood's In-Patient Team.
The Care Quality Commission (CQC) independently assesses hospices, hospitals, care homes and other health and social care services. They have five key lines of enquiry—safe, effective, caring, responsive and well-led services. The CQC inspect at least once every five years. An inspection was carried out in September 2016 and the rating awarded was ‘Good’ overall with an ‘Outstanding’ rating for Care.

More information is available on the Care Quality Commission website: [www.cqc.org.uk/location/1-115011048](http://www.cqc.org.uk/location/1-115011048)

This rating is an endorsement of the quality of care that The Kirkwood continues to carry out.

Our Registered Manager, Director of Clinical Services meets regularly with our local CQC inspector to provide updates on performance indicators and developments.

The Kirkwood’s services are regulated by the Care Quality Commission.

The CQC changed the assessment framework for health care services and the detailed inspection format for Hospices. The CQC inspect Hospices as independent health care services. They no longer use the adult social care inspection approach. The CQC suspended their inspection programme because of the pandemic.
Comments from Healthwatch Kirklees

“Healthwatch Kirklees have worked in partnership with The Kirkwood on a regular basis for the past six years. The feedback we regularly receive from patients about the service is hugely complimentary, particularly about their caring staff and the range of services they offer to our community.

“In July 2019, Healthwatch Kirklees was invited to complete an Enter and View visit at the hospice and found that there was a clear and ongoing focus for patient centred care. Family members and carers were regularly involved in their loved ones care plus the support staff offered was invaluable.

“Healthwatch Kirklees hope to continue working in partnership with The Kirkwood in the future so that patient focussed care can continue to be at the heart of our local NHS and social care services.”
Medical Team  

It has been another successful year of achievement for our medical team. March 2020 proved a particularly intense time for the team with a number of developments having to occur at very short notice due to the COVID-19 pandemic first wave.

These included:

- The initiation of The Kirkwood COVID-19 Palliative Care Toolkit for community professionals managing palliative patients in their usual place of residence (with or without COVID-19 as a diagnosis)
- The rapid development and integration of video calling and video conferencing with patients either through their SystmOne electronic record or as a multidisciplinary teams review
- Providing senior medic in-reach to the end of life COVID-19 ward at HRI via virtual technology

Prior to this urgent need resulting from the COVID-19 pandemic, the team worked on a number of priorities. These included:

- Further developing the Associate Specialist role for senior doctors. This allows more community team input for the most complex patients and greater autonomy/flexibility for these senior doctors
- Undertaking further development of SystmOne to provide better quality patient care for in-patients and community patients
- Supporting other clinical team members with non-medical prescribing
- Undertaking voluntary peer review with Barnsley and Overgate Hospices for appraisal and revalidation of hospice doctors
- Involvement with the RESOLVE study related to outcome measure reporting
- Continuing to produce and develop service activity audits and medical guidelines
- Continuing teaching of fourth year medical students from Leeds University and various other clinical groups including the Locala End of Life Champions
Research

We continue our journey towards being a ‘Research Active’ Hospice in Partnership with the University of Huddersfield. In July 2019, we were proud to sign a Memorandum of Understanding (MoU) with the University of Huddersfield which formalised the working relationships between The Kirkwood and the University’s School of Human and Health Sciences.

Learning & Development

The Kirkwood welcomed our Learning and Development Manager, Chellie Stevenson, in 2020.

Below is a summary of the progress to date:

Chellie is supported in her role by our ‘Education Champions’. These are our clinical and non-clinical employees who have specialist skills for example in Advanced Communication Skills, Bereavement, Advance Care Planning, Moving and Handling, Health and Safety

We have continued to develop our internal Learning and Development training, and competencies as well as provide Palliative Education to external healthcare professionals, Community Nurses, GP’s and Care Home employees.

Learning & Development cont.

Progress in 2019 - 20:

Complete revision of the training ‘matrix’ and the procurement of an eLearning platform to improve the delivery of mandatory, role-specific and enhanced training across the workforce.

Non-clinical and clinical training matrices mapped against role descriptions.

Facilitated the development of virtual delivery for internal learning sessions as well as for external education such as the Locala End of Life Care Champions programme and the Care Home Champions programmes.

Implemented formal Fire Marshal training across the whole organisation

New PDR structure with clinical competency framework mapped against Health Education England’s Learning Outcomes for Palliative Care

Implemented the Volunteers Learning Platform and defined the mandatory digital learning required for all volunteers throughout the organisation – to be rolled out in November 2020.

Maximised the Apprenticeship Levy

Supporting Specialist Palliative Care education of the next generation of healthcare professionals by offering student placements in all service areas, including medical students.
Cyber Essentials

Cyber Essentials and Cyber Essential Plus are UK Government backed schemes to enable organisations to protect themselves against online threats. Find out more by visiting: [www.gov.uk/government/publications/cyber-essentials-scheme-overview](http://www.gov.uk/government/publications/cyber-essentials-scheme-overview)

We achieved the standard required to attain Cyber Essentials and we are validated for 12 months. We will be looking to retain the accreditation in 2021 and build on this by working towards the higher accreditation and standards of Cyber Essentials Plus in 2022 - 2023.

It is highly likely that organisations such as NHS will require partner organisations such as ourselves to have Cyber Essentials Plus at some point in the future.

We successfully completed the NHS Data Security and Protection (DSP) Toolkit for the 2019-20 reporting period.

The DSP Toolkit sets out the National Data Guardian's (NDG) data security standards. Completing this Toolkit self-assessment, by providing evidence and judging whether we meet the assertions, demonstrates that the Charity is working towards or meeting the NDG standards. There were no reportable data breaches during 2019 - 20.
Support throughout the pandemic

We are fortunate that we are able to provide employees with Complementary Therapy treatments at the hospice. Whilst some of this has had to be suspended due to COVID restrictions, at a time of increased pressures for all, alternative support has been provided.

The Complementary Therapy Team have provided our workforce with the following support:

- Mindfulness sessions via email
- Wobble rooms
- Spirit for Kirkwood daily emails

CIC Confidential Care service

The CIC Employee Assistance Programmes offers our employees access to 24/7 independent and confidential support and advice services.

Risk assessments

During the pandemic, we have proactively risk assessed any of our employees and volunteers who were classed as vulnerable, and supported those who were required to shield.

Clinical supervision

For our clinical teams, we provide clinical supervision where clinicians describe important recent experiences from their work. Together, the participants reflect on these experiences, consider alternative ways of approaching them and discuss what they have learnt from them. They are then able to apply what they learn back at work to improve the care they provide.

Clinical supervision is an important way of developing professional skills and attributes which is separate from any management structure.

We are also exploring implementing Shwartz rounds to further support the clinical teams.

Clinical team away days

We have offered away days for all our clinical teams with the aim of looking back on the achievements made over the last year and setting team objectives for 2020 – 21. It was important for employees to spend time together to develop creative approaches to care delivery, identify issues and problem solving.

These away days have helped build resilient, cohesive teams within The Kirkwood and the outcome has helped shape the Clinical Strategy for the next three years.
Compliments

During 2019-20 we received 110 recorded written compliments. Comments left by patients and families are anonymised and reported to the Clinical Governance Committee and summaries are also available for staff to look at.

Complaints and Concerns

Feedback, good and bad, is vitally important for us as it allows us to make improvements where they might be needed. In the last year (April 2019 to March 2020) we received 4 complaints and 9 concerns.

The complaints and concerns were all discussed with the parties involved and have been resolved.

We discuss themes from our complaints and concerns at the Care and Quality Group. We hold forums to ensure any learning is implemented and changes to practice/processes are identified and progressed. All complaints, concerns and compliments are also reported to the Board of Trustees.

The Kirkwood Experience

What patients, families and carers say about us

There were 381 instances of feedback from service users. These included:

Quality of Care

- Treated with dignity and respect: 98%
- Felt safe: 95%
- Enough support: 93%

Felt safe

- 100% Always

Enough support

- 95% Always

Strongly agree or Agree: 95%

Kind and sensitive manner

- 98% Always
- 2% Always

Recommends The Kirkwood

- 93% Strongly agree or Agree
- 7% Always
Getting in touch

24/7 Specialist Advice Line
01484 557 910

The Kirkwood Main Reception
01484 557 900

Fundraising
01484 557 911

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