Pendleside Hospice
Enter and View Report

Contact details: Pendleside Hospice
Colne Rd
Burnley
BB10 2LW

Staff met during visit: Lynn Greenwood (Quality and Development Manager)
Carmel Wiseman (Clinical Services Manager)

Date and time of visit: Thursday 23rd March 2017 - 11am to 3pm

Healthwatch Lancashire authorised representatives: Amanda Higgins (Lead Project Officer)
Michele Chapman (Project Officer)
Beth Tildesley (Project Officer)
Gill Green (Volunteer)
Liz Housden (Volunteer)

DISCLAIMER
This report relates only to the service viewed at the time of the visit, and is only representative of the views of the staff, visitors and patients who met members of the Enter and View team on that date.
Healthwatch Lancashire Enter and View Report

Introduction
This was an announced Enter and View visit undertaken by authorised representatives from Healthwatch Lancashire who have the authority to enter health and social care premises, announced or unannounced, to observe and assess the quality of services and obtain the views of those people using the services.

This visit was arranged as part of Healthwatch Lancashire’s Enter and View schedule. The aim is to observe services, consider how services may be improved and disseminate good practice. The team of trained Enter and View authorised representatives record their observations along with feedback from patients, staff and, where possible, patients’ families or friends.

The team compile a report reflecting these observations and feedback, making comment where appropriate. The report is sent to the manager of the facility for validation of the facts. Any response from the manager is included with the final version of the report which is published on the Healthwatch Lancashire website at www.healthwatchlancashire.co.uk

General information
Pendleside Hospice is a charitable organisation providing a ten-bed inpatient unit, a day service and outpatient unit, a domiciliary “hospice at home” service and family support service. Information obtained from the dedicated website states “Pendleside exists to promote and enhance quality of life for people with life-limiting illnesses, their families and carers; by delivering specialist and holistic palliative care, which addresses their individually assessed physical, psychological, social and spiritual needs.”

For this report, representatives focused on the services provided within the hospice. There were six vacancies on the inpatient unit at the time of our visit; two of these were due to room refurbishment and the remainder were pending the arrival of new patients. The Chief Executive is Helen McVey.

Acknowledgements
Healthwatch Lancashire would like to thank Carmel Wiseman and Lynn Greenwood, together with staff, patients and visitors, for making us feel welcome and taking part in the visit.

Methodology
The Enter and View team visited Pendleside Hospice on Thursday 23rd March 2017. We spoke to seven patients, structuring our conversations around a questionnaire covering four themes (environment, care, activities and social life, food and drinks) designed to gather information concerning patients’ overall experience of the services at the hospice. In addition, we spoke to seven staff and two relatives of the same patient.

The team also recorded their own observations on the environment and facilities which are scored on a scale of 1 to 5:

1 = Poor       2 = Below Average       3 = Average       4 = Good       5 = Very Good
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Enter and View observations

Pre-visit and location
Prior to our visit, we established strong and effective communication links with the hospice team which were both helpful, informative, and cooperative. Representatives were able to browse a comprehensive and well-designed website detailing the services, latest news, training programmes, support and volunteering opportunities available at the facility. Similarly, the reception staff supplied us with a full complement of small A4 glossy leaflets detailing each of the services and a complaints procedure leaflet.

Pendleside Hospice is set back from Colne Road in an elevated position overlooking countryside. The hospice is convenient for local transport and shops and the hospice was well signposted and easy to find. On our visit, there were ample parking spaces and representatives noticed dedicated parking for ambulances and hospice transport at the front of the reception area.

The pre-visit and location was scored as 5/5

External environment
Representatives found the grounds to be well-maintained and thoughtfully provided with seating at different levels. The reception area was prominently and conveniently situated at a junction between the day unit and the inpatient unit. The reception area also was light and airy. It was clear where visitors should report to and we saw a signing in book and antibacterial gel. Access to each unit was secured by a keypad.

The external environment was scored as 5/5

Internal environment/reception - first impressions
The reception area was welcoming and informal with comfortable seating and a small shop selling gifts as well as providing free tea and coffee. We saw notices detailing fundraising events, news, and upcoming activities such as “creative writing” workshops. However, we did not see a noticeboard detailing key staff and their photographs. Likewise, although staff were identifiable by uniform not all staff wore name badges.

Staff were very welcoming and after “signing in” we were promptly attended to by the quality and development manager who offered refreshments and showed us the well-equipped training rooms at the facility. Staff were clearly well-informed and happy to discuss their commitment to multi agency and integrated working practice.

Representatives observed that the Healthwatch Lancashire posters had been displayed at several prominent points in the facility.

Internal environment/reception - first impressions scored as 4/5

Observation of corridors, public toilets and bathrooms
The inpatient unit and the day services unit are served by two separate wings of the hospice, both accessed by keypad from the central reception area.

The public areas of the inpatient unit were characterised by a quiet but relaxed atmosphere, with corridors punctuated by resting points of comfortable seating and tables alongside information leaflets. Bedrooms were uniformly positioned on one side of the corridor and treatment rooms on the other. Similarly, public
bathrooms in all areas of the hospice were clean and supplied with sufficient towels, soap and toilet rolls. The atmosphere in the day unit was relaxed, pleasant and appeared to be well-used by patients. Corridors and public areas experienced heavier traffic, therefore corridors had become somewhat cluttered.

Representatives also noticed that bathroom areas were appropriately adapted for people with disabilities and that corridors throughout the facility had colour-contrasting handrails. Signage throughout the facility was clear, each door labelled public or private to aid navigation. However, representatives did not notice dementia specific signage, although we felt this must be seen in the context of the hospice not being dementia specific.

**The corridors, public toilets and bathrooms and were scored as 4/5**

**Lounges, dining and other public areas**

The lounge and dining area servicing the inpatient unit was pleasantly furnished with sufficient homely seating areas and coffee tables. The lounge area also contained a dining table and chairs suitable for the number of patients on the unit. To the side of the inpatient unit was a small conservatory with a side view of the grounds. There were few people using the public area at the time of our visit although visitors came and went and one inpatient was asleep enjoying the sun in the conservatory. There were additional public facilities attached to this unit and staff showed us an allocated relative “stay over” area complete with two beds and en-suite. However, as this could only be accessed via a flight of stairs, we were shown a further multipurpose visitor facility which was in the process of adaption in the former visitor lounge. The clinical services manager was also able to show us the result of other ongoing improvement works whereby the bedrooms were in the process of redecoration, with provision of full length patio doors to the side aspect.

The day service public areas were very popular and there was a positive “buzz” of conversation. The lounge had sufficient comfortable seating arranged to reflect a domestic setting. Representatives observed books including audio books, CDs and games, and heard a low level of restful music. Houseplants and other decorative items created a homely feel.

The dining room was attractively set with crockery and glassware and we noted that the table centrepieces had been made by patients. Although a menu was not on display, the coordinator was able to tell us that ordering was restaurant style and that the menu was discussed and detailed at the table. It was clear to us that the menu was extensive (at least six choices), of good quality, and that refreshments were freely available.

The day unit was further served by a large and sunny conservatory at the rear of the building with an elevated patio balcony enjoying views of the hills. The team could see that patients had been planting daffodils and other spring flowers, and the conservatory area was generally focused on crafts and relaxation. The activity coordinator was sat in the conservatory with several patients and we could see they were decorating “shabby chic” plant pots. Other craftwork was in evidence such as cards and paper animals and we saw a computer station and a box of musical instruments for the use of patients. Further patient amenities were offered in the small gym /assessment centre. The hospice offered individual exercise plans on request and the area was staffed by an occupational therapist, physiotherapist and rehabilitation assistants. Representatives found the area to be clean and well equipped with weights, treadmill and exercise bike.

**The lounges, dining and other public areas were scored as 4/5**
Observations of patient and staff interactions
Patients reported high satisfaction levels with the facility, and positive relationships with staff. We observed great efforts made to include patients in day to day activity; for example, we observed one lady requesting to be taken to the onsite shop, she was gladly assisted, along with her chair and heavy oxygen tank.

Staff had time to chat and it was clear that they knew their patients well. Visitors and relatives were made equally welcome and the hospice atmosphere was warm and congenial. We observed that a particular feature of the hospice was the enormous contribution of volunteer staff, for example, helping in the kitchen and driving the minibus.

Patient and staff interactions were scored as 5/5

Overall the Enter and View Project Officers rated the environment and facilities as 4.5/5

Additional information

The clinical services manager also told us the following:
- The hospice has a volunteer base of over 100 volunteers working in the hospice and over 350 volunteers in the community and hospice shops.
- There are nine hospice shops in local towns.
- The hospice owns two minibuses for the transport of patients.
- The facility is undergoing a schedule of update and improvement.
- The hospice work cooperatively with GP surgeries, community services and hospitals.
Environment

Summary of responses from seven patients:
- All felt the hospice was clean and tidy.
- All felt the hospice provided them with enough privacy.
- Five out of seven patients liked the outdoor space.
- All liked using the facilities at the hospice.
- All told us they found the atmosphere in the hospice pleasant.

Quotes from patients:
“Only use the reflexology group.”
“The atmosphere is very pleasant.”
“I will use the garden area when the weather is better.”
“I like socialising and talking to people in the same predicament.”
“The people are great here.”
“I always feel well-looked after.”
“There is enough privacy but I prefer the company.”
“I haven’t used the outdoor space yet, but I will when the weather is better.”
“I like using the facilities because I like talking to others and doing exercises. I need help from staff to do all the activities.”
“The hospice is very clean and tidy.”
“There is a quiet room for privacy.”
“I would use the outdoor space if the weather improves.”
“I like the reflexology, crafts and tai chi.”
“The atmosphere is lovely.”
“The outdoor space is lovely subject to the weather.”
“I definitely think there is enough privacy.”
“I really like using the facilities here.”

Care

Summary of responses from seven patients:
- All felt they were treated with dignity and respect.
- All felt they had continuity of care between their GP, the hospice and other health care providers.
- All felt there were an adequate number of staff at the hospice.
- All felt that the hospice meets their individual needs.
- All said they could talk to a member of staff if they had any concerns or suggestions.

Quotes from patients:
“They are very good.”
“When I was diagnosed, they referred me to different departments, including psychology. The doctors got in touch after the diagnosis.”
“It is tailored around what I want to do. They advise me about what is going on and I have the choice to get involved as much or little as I want.”
“You can’t get any better than what these ladies offer.”
“If there’s anything I require, they’ll fix me up. I’ve been taken to the hospital from here in an ambulance once before.”
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“There are the highest standards always from staff, even when patients are bad tempered.”
“All of the services I use are joined up, it is excellent.”
“It is a personal treatment here, they listen to me and my needs.”
“I feel like I am in good hands. I need toileting; I can’t do anything without their help and I’m always treated with respect.”
“The nurses visit me at home and also see my GP and hospital. There is good communication between them all.”
“I am dependent on the staff here because I can’t do anything, but I am always well-treated.”
“There are enough staff between the staff and volunteers.”
“I can ask them anything. If they don’t know the answer they’ll find out, they have even phoned me at home to let me know an answer, they go above and beyond.”
“They are pushed for staff at times but I think there are adequate numbers.”
“If they had the money they could make it bigger to care for more people. I’ve been an inpatient for a week and it was second to none, it’s like being in a five-star hotel, the staff were tremendous.”
“The staff are brilliant, nothing is too much trouble.”
“There are good communications with other health professionals.”
“There are plenty of staff.”
“I am always treated as an individual.”
“I could certainly talk to staff if I had any concerns.”
“It is a shame that more people can’t get to use the facilities, I feel privileged to be able to come.”
“When I’ve had minor injuries, and need advice (advisory service) I have come here and asked the nurse. It has stopped me from going to A&E.”

Activities and social life

Summary of responses from seven patients:
- All but one patient knew about all the activities at the hospice.
- All but one patient told us they used the services available at the hospice.
- All said they had enough opportunity to socialise with other residents.
- All said they felt welcomed and that the hospice had a community feel.
- All said that attending the hospice and using its services had helped them.

Quotes from patients:
“I don’t know what is happening and when; I just go off what other people tell me.”
“I enjoy all of the activities.”
“The other patients are chatty and friendly.”
“I look forward to coming.”
“I enjoy the activities.”
“I come mainly for health checks and to keep an eye on me. If I can’t see a GP I know I can come here.”
“I have made some friends whilst I’ve been here.”
“I definitely feel the activities have helped me.”
“I am doing a 10K fun run in Newcastle in July to raise money for the hospice.”
Food and drinks

Summary of responses from six patients:
- All said they like the food provided at the hospice.
- All said they were happy with the choice of food.
- All said that if they needed it, help was available for patients that struggled to eat.
- All said they always have drinks available.

Quotes from patients:
“The food is brilliant.”
“There is a patient that needs some help eating, so they cut the food up for her and help when needed.”
“We can get a drink anytime.”
“The food is very good.”
“I cannot feed myself. I feel like people care for me and always treat me respectfully.”
“Drinks are available all the time and help to drink.”
“The food is amazing.”
“The choice is very good.”
“We can ask for a drink or get one ourselves.”
“The food is very nice.”
“The variety of food is very good.”
“I don’t need any help eating, but there is a patient here that is fed.”
“There is alcohol available which I like.”
“I’m not sure if there is a choice of where to eat, I haven’t seen anyone eat a meal in the lounge.”
“We eat in the dining room.”
“Yes, there is a choice of where to eat.”

Relatives and friends’ views

Summary of responses:
Two relatives completed a friends and family questionnaire who were visiting the same patient.

The relatives said they:
- were satisfied with the support and care their relative receives.
- felt their loved one was treated with kindness, dignity, respect and compassion.
- felt the hospice had helped them.
- felt informed about their relative.
- felt listened to and their contribution valued by staff at the hospice.
- could not think of anything that would improve the service.
- were aware of the social activities at the hospice and felt welcomed to participate.
- knew how to provide feedback to the hospice if they had a compliment, suggestion or a complaint.
- would recommend the hospice to other people in a similar situation.

Quotes from relatives and friends:
“The staff here have been brilliant. We were having meetings with counsellors because we were struggling but we’re enjoying our time with her now. We definitely feel involved in her care. We call it five star; I don’t think it could improve. She spent five weeks at Airedale Hospital; it was so busy there, but they have time for her here.”
Staff views

We had an opportunity to speak to seven members of care staff about their experience of working at Pendleside Hospice.

Summary of responses from seven members of staff:

- All but one staff member said there were enough staff when on duty.
- All felt supported to carry out person centred care.
- All felt they had enough training to enable them to carry out their duties well.
- All reported being happy working at the hospice.
- All said they would be happy to recommend the hospice to a close relative.

Quotes from staff:

“I’m one of the bank staff so they pull me in when there is sickness or holidays.”

“I only work here as a bank nurse but they have helped with extra training which is good, such as living with dementia.”

“Sometimes we can be called on to the inpatient units. I run the groups but if we felt someone needed a one to one that will be arranged.”

“The manager supports me if I identify specific training.”

“I wish my family lived in the area so they could come here.”

“It is better staffed than other places I have worked, however, we used to have extra time to sit with patients, particularly if they were dying. Now we don’t have that time. I don’t think there can ever be enough staff because there is always more to give, like using the jacuzzi bath. I think patients open up to us more when they are relaxed.”

“We do have a lot of training particularly compared to hospitals. Plus, we have to keep up to date with research and policies.”

“I think we have enough staff on duty generally, but if we get higher dependency patients, they will reassess and get more staff if needed.”

“Of all the places I have worked, I am really impressed by the person-centred care here. I’ve never worked anywhere that it is more in use.”

“There is a lot of training and I can always ask if I want more.”
1. Have you learnt anything new about the experiences of your patients as a result of this exercise?

The exercise helped to reaffirm positive satisfaction with the service. Whilst the Hospice aims to provide individualised care it was good to note positive observational feedback from Healthwatch staff and feedback from patients and carers that reaffirmed this.

Where actions were identified e.g. staff notice board and dementia signs these had already been identified as actions but has prompted follow up on these actions.

It was good to receive positive feedback on the environment and to note that the atmosphere that the Hospice aims to create is being achieved.

2. What was your impression of Healthwatch Lancashire during this exercise? Do you think they could have done anything better?

Feedback was positive from patients and staff.

Overall impressions were that Healthwatch staff were very professional, unobtrusive and approachable. The report was found to be balanced showing areas for improvement but also very positive feedback.

Although the Hospice had been informed prior to the visit it seemed surprising that Healthwatch staff were unable to see patients in private rooms and it felt that this somewhat inhibited the exercise as they were unable to see patients in their own individual bedrooms on the inpatient unit, even though patients may have consented to this.

Healthwatch Lancashire response to item 2 above:
Thank you for your feedback which we take on board. However, it is currently Healthwatch Lancashire’s policy that representatives will not enter any non-communal areas such as bedrooms or staff quarters and not be alone in private with a patient or service user, but remain in communal areas and work in pairs if asked to speak in confidence.