



Strategy 2015-2020

For Health and Social Care
Professionals in Coventry
and Warwickshire

www.mytonhospice.org



Our Vision

The Myton Hospices believe everyone in Coventry and Warwickshire should live well towards the end of their life and have the right to a good, natural death, the way they want it to be and with their loved ones supported.

Our Mission

The Myton team provide high quality, specialist care to people whose condition no longer responds to curative treatment, from diagnosis to death. We aim to meet their physical, psychological, spiritual and social needs and ensure their families are supported both through and after this difficult time. We are also committed to training, supporting and encouraging other care providers to practise good palliative care.

Our Values

1

RESPECT and
dignity for all

2

VALUE every
individual and
ourselves

3

ONE MYTON,
One Team, One
Goal – delivering
holistic care

4

PROFESSIONALISM
in all that we do

Approximately 8000 people die in Coventry and Warwickshire each year, national research shows that over 75% of them will have had some form of palliative care needs to help them live and die well.¹ During 2014 Myton Hospice worked with 905 of those (11%) plus their families and carers. We know as a hospice, demand for our care is growing and that we need to do more to support NHS partners to ensure high quality care is delivered to the right patients, at the right time and in the right place.

Over the last 5 years our consultant-led inpatient beds have continued to deliver specialist palliative care to complex patients and support to their families. However, we have also made good progress in the development of our community services.

We launched our Myton@Home Nursing Service across Rugby, Warwick and Leamington for example, where 100% of families surveyed said that the confidence and reassurance of the skilled Myton team were the key component to them coping with the death of someone they cared for at home.²

Our 2015-2020 strategy aims to improve our reach, grow our services and influence and educate other providers of end of life and palliative care to do it brilliantly.

Reference:

- 1. How many people need palliative care. A study developing and comparing methods for population based estimates. Murtagh F, Bausewein C, Verne J, Groeneveld El, Kaloki YE, Higginson I. Palliative Medicine Jan 14*
- 2. 2014 Myton@ Home Bereaved Carers Survey Rugby 97% Leamington and Warwick Survey)*



Building our patients and families ability to cope

Our work is underpinned by the philosophy that resilient patients and carers are more likely to retain the sense of control that is essential to them realising their choices for care and death.

The 'Myton Daisy' assesses patients against the 7 domains³ which can affect their resilience throughout their illness and offers a wide range of services and support from discovering their condition is unlikely to respond to curative treatment to their end of life care.

The diagram opposite gives just a taste of some of the activities that Myton can offer from our three hospice sites, in patient's own homes and through other care settings.

We acknowledge that even once pain and symptoms are managed a patient may have an inappropriate emergency hospital admission due to feelings of depression or carer breakdown. The bereavement costs associated with poor death experiences are also significant and create pressure not only for G.P.'s but the wider community such as schools and employers.

This is why Myton is committed to always delivering holistic care, not only to the patient but also to their carers and wider family, to ensure they remain resilient. Our daisy model can also apply to them.

Reference:

3. Rock & Seigel Healthy Mind Platter NeuroLeadership Institute 2012
Adapted for Hospice Care Kate Lee 2014 with permission.



Good Sleep



Productive time and sense of purpose



Social time and making connections



Relaxing



Laughter and having fun



Having time to plan and reflect



Managing your physical health



WHY DOES MYTON BUILD RESILIENCE IN OUR PATIENTS AND CARERS?

MYTON HOSPICE BUILDS RESILIENCE IN PATIENTS AND CARERS

- Less carer breakdown
- Less hospital admissions
- Better informed with a sense of control and choice
- More likely to achieve preferred place of care and death
- More likely to handle bereavement successfully



Strengths and Challenges

Strengths

- Patient and carer experience is consistently high across every service
- We are a multi-disciplinary provider of holistic care that can support the patient and their family pre and post bereavement
- The way our services are funded allows us to enhance NHS investment by an additional £3.60 to everyone £1 spent
- We provide seamless health and social care, without boundaries across Coventry and Warwickshire
- We have an outstanding track record in advance care planning discussions and patient and family communication

Opportunities

- To grow our role as a provider of community-based care to support NHS goals to increase patient choice and ability to die at home
- To support with the co-ordination of cross-boundary health and social care provision at end of life
- To educate and accredit other providers of palliative and end of life care to do it to an outstanding level
- We still have additional bed capacity in Coventry Hospice

Challenges

- We are heavily reliant on small number of NHS referrers, changes in their service provision have a direct impact on Myton that we can't control or influence
- We are often not engaged in key NHS decisions about palliative and end of life care that directly affect our ability to do our work
- Our services are often refused by patients due to the perceptions of 'hospice'
- We don't always understand the work and pressures on other healthcare professionals or how we can support them better
- Our services are viewed as "gold standard" but exclusive and hard or complex to access

Threats

- Our voluntary income is plateauing after years of significant growth, whilst our NHS income is in decline. This is combined with spiralling costs such as employer NI and recruitment costs.
- The closure or limited provision of high quality home care across Coventry and Warwickshire is limiting our ability to discharge effectively
- Coventry & Warwickshire's population is growing faster than the national average
- We need to be better at understanding need so that we remain relevant and cutting edge in our care



Why should Health and Social Care Professionals Engage with Myton?

- We do much more than cancer and more than end of life care. In 2013 we provided over 3000 days education and training in palliative and end of life care to other Health and Social Care organisations. Last year 33% of our inpatients received symptom control and were discharged. 17% had conditions other than cancer, 32% were under 65.
- The "Imminence of death among hospital inpatients study" (Clark et al, Palliative Medicine, 2014), found that a third of inpatients from 25 Scottish hospitals (March 2010) died within 12 months of admission Myton's education sessions can help healthcare professional recognise patients in the last year of life and plan accordingly.
- A day patient may spend as many as 20 hours getting to know us before we start to talk about their preferences for their care and death. This makes for high quality advance care plans that are well communicated and understood. Myton's day hospice services can support GP's by working with patients to develop advance care plans and CPR decisions and communicate them back to the GP practice (with appropriate consent).
- We spend over £10m on care. The NHS funds 22% of all care provided at Myton. The communities of Coventry and Warwickshire fund the rest, £8.0m (2014/15).
- 14 GP practices areas in Coventry never had a patient referred to Myton by any health or social care professional despite covering a population of over 100,000 people. Myton provides specialist palliative care across Coventry and Warwickshire so that all patients can access our support.

We know we can make a difference, but we need to work collaboratively with all our partners and stakeholders to get it right



The Journey Ahead Our 2015 - 2020 Strategy

We have identified 5 key strategic challenges that we want to focus on responding to:

1 Creating more accessible and patient centred services and guaranteeing our quality as we grow

For example by 2020 we will:

- Be an outstanding provider of care (judged by the Care Quality Commission and others)
- Create a central Myton co-ordination hub and work more closely with a wider range of referrers to ensure the right patients get the right care, in the right place at the right time.
- Reduce our focus from the services we provide to meeting more individually planned and personally tailored care packages

2 Ensuring Equity of Access to Myton Services

For example by 2020 we will:

- Relaunch our day hospice provision in a way that encourages patients to access our care early in their journey and therefore strengthen the outcomes of our work with them
- Strengthen our education offer to external health care professionals so that more understand what we can do for their patients and refer with confidence

3 Grow and improve the services we offer to improve the lives of more patients and families

For example by 2020 we will:

- By listening to patients, families, health and social care professionals and using tools such the Carers Support Needs Assessment Tool we will assess and respond to need, with both services and better co-ordination of palliative and end of life care
- Focus on increasing our role with patients with palliative dementia and palliative neurologic conditions
- Educate a wide range of other providers, including those working with the frail elderly to ensure more people die with dignity and respect, pain free and with their loved ones supported

4 We will work in collaboration with NHS, Social Care and other providers to build Myton's influence as a leading provider of specialist and general palliative care across Coventry and Warwickshire, solving their problems and improving the whole pathway for patients and families

For example by 2020 we will:

- Aim to have built a number of new partnerships and collaborations as a provider, funder and co-commissioner of care
- Be represented on a wider range of partner forums and be more active in the health and social care community



5 We will strengthen our financial position to make sure we're a sustainable organisation

For example by 2020 we will:

- Protect and grow our voluntary income (the money we raise ourselves) through working more closely with our local community
- Ensure that our NHS commissioners understand the financial contribution Myton makes to the local health economy understand how Myton's service can help them achieve their own cost efficiency targets
- Look for opportunities to bring in new sources of income so that we can meet the challenges we have set and grow our organisation in the future

To help us achieve our strategic aims, we will commit to:

- Developing our staff and volunteers
- Improving our data and use of information technology
- Focussing on reducing costs and improving efficiency
- Strengthening our marketing and communications
- Building relationships and working more collaboratively



A Quality Service for Patients and Professionals

96%

of patients and families say our doctors and nurses listen to what they have to say

99%

would recommend us to family and friends (although we hope they never need to)

100%

of patients and families say we treat them with dignity and respect

Reference:

From Myton 'real time' patient feedback between April and June 2015 (229 patients & visitors surveyed.)

"We wanted to keep Dad at home but he kept getting in such a mess. We didn't want him to die dirty so we decided hospital was going to be the only option. Your Myton @ Home team transformed our lives. From the minute they arrived he was peaceful, clean and even had a shave. He died looking like my Dad, I can't thank you enough for that."

Family Feedback Rugby Myton@Home

Note to Dr. Jude Raper, Our Palliative Care Consultant and Educator

"You are a marvel and have changed my consulting approach since your talk yesterday @ Myton!

I have seen several patients today (none palliative) that have had pain/anxiety and I applied the total pain principle to consulting and actually fed back to them how other factors influence their experience of pain and anxiety. It felt really good, was a very satisfying day's consulting and I felt a better connection with the patients. I am a fairly holistic sort of person when consulting (so I thought) but actually I was a bit quick to jump to medical diagnosis. You've made me look afresh at my style.

Today I have felt less pressured to deliver answers and enjoyed more exploratory consultations and patients have left the room very satisfied.

Thank you for enlightening me, as what you have taught is applicable way beyond palliative care."

Dr Jenny Martin from Whitnash Medical centre.



4 ways you can help as a healthcare professional

- Feed in your comments on this strategy, does it meet your needs as a health or social care professional?
- Arrange for us to visit you and your team to tell you more about the work of Myton Hospices and recommend us to others
- Speak to us about our education agenda and how we can help your team improve their end of life care
- Encourage patients and families to find out more about us. If in doubt make a referral (see the back page of this booklet on how) and always encourage those that may not have had a positive experience to get in touch.



Please share your views, concerns, compliments or complaints: CEO@mytonhospice.org

Healthcare Professionals Helpline for 24 Hours Consultant Led Advice and guidance **01926 492518**

For referral forms for all services see our website:

www.mytonhospice.org/referrals.

Our referral fax number is **01926 495 455**

Warwick Myton Hospice
Myton Lane
Warwick, CV34 6PX
01926 492518

Rugby Myton Hospice
Barby Road
Rugby, CV22 5PY
01788 550085


Coventry Myton Hospice
Clifford Bridge Road
Coventry, CV2 2HJ
02476 841900

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