The Myton Hospices

QUALITY ACCOUNT





Our Quality Account 2021/22

The Quality Account is an annual report that summarises how the organisation is working to improve the quality of its services, the progress we have made and our priorities for the coming year.

Contents

Statement from the CEO and Chairman of the Board of Trustees

Part 1: Welcome to The Myton Hospices

- Our Vision
- Our Mission
- The services we provide
- Continuing impact of COVID 19 on Inpatient activity

Part 2: Review of Quality Performance

- Patient safety
- Patient & relative's experience
- Care Quality Commission (CQC)

Part 3: Updates on Priorities set for 2021/22

Part 4: Other achievements during 2021/22

- Research Nurse
- Second Clinical Nurse Practitioner into Myton at Home
- Rugby Myton Support Hub
- Heart Failure Pilot
- Hospices Working together

Part 5: Planning for the Future - Our Organisational Priorities 2022/2023

- Staff Health and Wellbeing
- Maximising Bed Space
- Expanding Services in the Community
- Volunteering
- Income

Introduction from Ruth Freeman CEO



On behalf of the Board of Trustees, the Senior Leadership Team and everyone who works or volunteers at The Myton I am pleased to present The Myton Hospices

Quality Accounts for the period 1st April 2021 to 31st March 2022.

Our organisation is dedicated to ensuring that people with a life limiting condition living in Coventry and Warwickshire and their families have access to a range of high quality services at which they are the centre.

Our care begins from the moment a person is told their illness cannot be cured, at which time we aim to support them to live as well and independently as possible, and continues right until their last moments in one of our Inpatient units or at home. The care is holistic, and we see beyond the illness to the person and what's important to them and this includes supporting their families and loved ones.

Despite the on-going challenges presented by the pandemic throughout 21/22 our In-patient units remained open and our Wellbeing team supported as many day and out patients as we had done in 19/20 before Covid invaded our lives, albeit that many services were provided remotely rather than face to face. Over the last two years Myton has dealt with the worst crisis in its history but we not only survived Covid 19 we are stronger than we have ever been thanks to

the dedication of the people who work and volunteer for us who were galvanised by a joint purpose to support patients and their loved ones no matter what.

Regardless of the struggles with staffing and the necessary focus of every one on just getting through each day Myton's desire to improve was not diminished. We launched a number of new initiatives such as introducing Information Hubs into a number of GP surgeries and launching our Rugby Myton Support HUB, we've also introduced the role of Registered Nurses into our Myton at home team to extend the services we offer to patients in their own home making them more closely aligned to the services offered in the hospice.

Our mantra is always 'to do the right thing' which means we are flexible in terms of our service delivery—acting quickly to support the patient and those that love them and working collaboratively with other organisations to ensure that patients across Coventry and Warwickshire have equitable access to services.

To the best of my knowledge the information reported in this Quality Account is accurate and is a correct representation of the quality of services provided by The Myton Hospices.

Ruth Freeman

Quality Account - statement of Karl Demian, Chair of the Board of Trustees



The last twelve months have continued to challenge our organisation. Several times we have thought we were turning a corner only to find ourselves dealing with

a new outbreak of Covid and the resulting staff shortages and restrictions to the care we provide.

Despite all of the challenges throughout the last year, as in the preceding two, we have continued to focus on reaching as many patients as possible and we are starting to see patient numbers increasing to the point where we are confident that before the end of March 2023 we will be back to pre-Covid levels.

The future sustainability of Myton was, and continues to be, a priority. It was not only vital that we got through the immediate crisis we also had to ensure that the organisation was robust enough to be withstand the longer term impact of the Coronavirus. As a result not only did our Income Generation teams shoot into action from day one, we also made significant cost reductions by changing the way we organised some of our back office services.

Our quick actions undoubtedly strengthened the organisation financially and we are now fortunate enough to be able to invest in new services. We have also learned a great deal from the experiences of the last two years, as a result the Board of Trustees and I feel we can move forward to face the future with great confidence.

Myton is a people centred organisation, every member of the staff and volunteer team is committed to making a difference to our patients and their families. We are also extremely privileged to have the support of the local community who have been with us every step of the way over the last 40 years.

This report outlines the work that has been made possible by the combined efforts of all of our team and everyone who has donated their time or their money to support our services and the patients and their loved ones that benefit from them. Myton is a unique and special organisation that I am proud to be part of.

Karl Demian

Part 1: Welcome to The Myton Hospices

Our Vision

Myton believes everyone in Coventry and Warwickshire should live well towards the end of their life and has 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

- ✓ RESPECT and dignity for all
- **✓ VALUE** every individual and ourselves
- **✓ ONE MYTON** One Team, One Goal delivering holistic care
- ✓ PROFESSIONALISM in all we do

1.2 The services we provide

The Myton Hospices are the only provider of inpatient hospice care in Coventry & Warwickshire. We have hospices in Warwick, Coventry and Rugby and specialist nursing teams that care for people in their own homes. We care for anyone with a terminal illness, aged 18 years and over registered with a GP in Coventry and Warwickshire.

- We support our patients and families' spiritual and emotional needs as well as looking after their physical symptoms
- We are a charity and all of our care is provided free of charge to patients and their families
- We support families, including children, before and after bereavement
- We provide education and training in palliative and end of life care to other health and social care organisations

1.3 Continuing impact of COVID-19 on inpatient activity

At the very outset of the COVID19 pandemic the Hospice made a strong commitment to continue to care for our patients, their families and carers. Early in 2021 a successful vaccination programme was in place for staff, we continued with the Lateral Flow Testing (LFT) for all patients and visitors through our testing clinics and, in February 2021, all staff and volunteers started to undertake twice weekly LFTs.

As the changing pandemic situation unfolded, Myton continued to review and, where appropriate, change our guidance to ensure we followed the latest government advice in maintaining a safe environment for staff, patients, families and visitors. We are extremely proud of our infection prevention and control practices and how these have been continually maintained to a very high standard throughout the pandemic.

Due to COVID related absences throughout 21/22 the bed capacity on both inpatient units has fluctuated, resulting in a drop-in activity when compared to pre-pandemic levels.

	Coventry Inpatient Unit	Warwick Inpatient Unit	Total
Pre-pandemic	273	383	648
01/04/19 to 31/03/20			
During pandemic	249	203	444
01/04/21 to 31/03/22			

In early 2022, following the emergence of the Omicron variant, we experienced significant challenges within all staff groups across the whole organisation. By deploying staff to the areas of greatest need, we managed to maintain our essential care services with minimal disruption to our patients and their families.

As COVID related absences continue to fall and government restrictions ease, we are confident of achieving a significant improvement in inpatient activity during 2022/2023.

Part 2: Review of Quality Performance

2.1 Patient Safety

Patient safety incidents

We encourage an open and transparent culture where reporting of accidents and incidents provides us with an opportunity to identify where we can make improvements.

Where an incident results in a patient sustaining a moderate/significant harm i.e. an injury following a fall or development of a Category 3 or 4 pressure ulcer whilst in our care, we undertake a full investigation using a Root Cause Analysis (RCA) methodology to identify any contributing factors and put measures in place to help prevent such an occurrence happening in the future.

Our Clinical Governance framework ensures that outcomes from RCA investigations are communicated widely across our clinical teams to ensure shared learning takes place; additionally, all incident reports are discussed at our Clinical Governance Committee and reported to our Board of Trustees.

To ensure full compliance with our Care Quality Commission (CQC) registration we submit timely notifications of all patient related incidents whereby significant harm has been sustained. Between April 2021 and end of March 2022 we notified the CQC of a total of 11 incidents. Of those, 9 related to the development of a Category 3 pressure ulcer, the remaining 2 related to harm sustained by patients following a fall.

During 21/22 Improvements have been made to the reporting structure for incidents of pressure ulcers and patient falls. Outcomes of such incidents are reviewed by the relevant working groups and where appropriate changes to guidance and practice are implemented.



Medication incidents

During the period April 2021 and March 2022, a total of 32 patient related drug medication incidents were reported. This shows a reduction from the previous year where concerns had been raised due to a significant number (48) of incidents being reported. As a result of which a number of quality improvement measures were put in place. These included:

- Raising awareness amongst nursing staff of the number of errors being reported
- Development and introduction of a Drug Administration Policy for Registered Nurses
- Review and introduction of a Drug Room Standard Operating Procedure (SOP)
- Additional guidance issued for the use of Drug Trolleys
- Increased number of Controlled Drug 'Spot check' audits
- Introduction of Medicine Management Link Nurses with a dedicated Role Description
- In-depth Medicines Management Audit conducted during 2021 with an action plan to address any concerns / learning that was identified

The majority of incidents resulted in No or Low Harm to patients.

To continue to improve our medicines management a collaborative approach has been undertaken with the medical and nursing teams, supported by the Clinical Education department to develop a number of guidelines and protocols to enhance the quality of patient service delivery and improve patient safety. The decision to introduce these has been the result of learning from incidents, changes within palliative care service delivery and national guidance.

- Introduction of Sepsis Bundle
- Guidelines for Identifying Patients at Risk of Adrenal Insufficiency
- Guidelines for Intravenous (IV) Drug Administration and care of Vascular Access Devices and a Protocol for IV and Subcutaneous (SC)Flush
- Guidelines for the Management of Delirium
- Enhanced guidance for the management of Steroids

2.2 Patient and relatives experience



As with any healthcare provider analysing feedback, whether positive or negative, enables us to gain a better understanding of the experience our patients and their relatives receive across several aspects of our care provision. Included in this year's report are a number of comments from across the majority of our care services.

Bereavement Support

"I just wanted to say a huge Thank You for this afternoon, you helped me in so many ways today. My 'memory box' is awesome, and I have lots of ideas from you to fill it. I am also less afraid now......"

Inpatient Services

"Everyone we met was kind and totally understanding of the situation, showing empathy, whilst allowing us the space to absorb all that was developing. I know dad took pleasure from watching the animals in the garden, here he was stuck in a room unable to even look out of the window, such was the pain and discomfort he was in. Myton gave him a final few weeks of being able to step back from the pain he was in, for this, I will be eternally grateful".

"Whenever I visit I was always amazed at the compassion and care that my father received and to all others at the hospice. I will always be so grateful for all the work that you did to give my father a dignified end to his life. I wanted you to know what you do every day touches hearts and really matters to all the families"

Message from a patient's son – 'he wanted everyone to know that he could not be more grateful for the are that we had given his dad. He stayed with him throughout the days since he had been here, and the last couple of nights and said we had treated him and his dad with the upmost respect and dignity, and he could never thank us enough. His dad would have been so very thankful for the care, and he wanted us (Myton) to know'.

Patient & Carer Wellbeing Service (PCWBS)

"A big, big thank you all for the lovely tea party today at Myton. I cannot put into words how wonderful it was to see people and chat in real life. Thank you also to everyone who put so much effort into making the afternoon so enjoyable and providing refreshments to us all".

Myton at Home

"We have been struggling to help him with thinks like going to the toilet, positioning in bed. I'm 78 too and there's only so much I can do to help. Thank goodness for Myton – they were guardian angels. You could see him brighten up when the Myton at Home nurses arrived; they treated him like family and he warmed to them. The Myton at Home nurses kept us informed with what was happening and knew when he was nearing the end. They were sensitive about it all. And then they were on hand when we needed them for the practical stuff like registering the death - I don't think we could have done all of it without them"

Lymphoedema Service

I just wanted to thank you so much for the medical & emotional support you gave my husband those last few months. Although we never got to meet you, due to the Pandemic, we thought of you as a good friend. Bob always cheered up after your phone calls. He endured so much for over a year & I am glad he is now free of pain. I'll always be grateful for everything you did. X

Counselling

"You were brilliant helped me with my way through grief. I realised that it never goes away and that it is very normal. It was such a shame it all had to be done remotely, but I was helped very much, it allowed me permission to grieve....."

When a concern is raised about any aspect of our care we take that concern very seriously and do our upmost to put measures in place to improve. Complaints are responded to in an understanding and sympathetic way. Full investigations take place and explanations are given in writing, and where appropriate arrangements are made to meet with the complainant in person to address their concerns. Our Chief Executive reviews all investigation reports once they have been completed and responds to the complainant via a formal letter of apology.

2021/22 4 Complaints 2020/21 1

During 21/22 a total of 4 complaints were received which related to clinical care within the organisation.

- 1. Wife of patient explained she had not been happy with her husband's discharge from Warwick Myton Wife was contacted by the Medical Director, following which a full investigation into the circumstances relating to the patients' discharge was undertaken. Identified shortcomings were shared with wider team members, a letter outlining the investigation findings was provided to the patients' wife along with a sincere apology for the anxiety and distress caused.
- 2. A patient's husband raised concerns with regards to his wife's management in Myton prior to her transfer to Warwick Hospital Medical Director undertook a full investigation and changes to practice were introduced as a result of this. Including introduction of Guidelines for Identifying Patients at Risk of Adrenal Insufficiency. A full apology was provided to the patient's husband.
- 3. An inpatient made a complaint about the 'abrupt manner 'in which a member of the nursing team had spoken to her. A full apology was given to the patient and her husband at the time, followed by a formal letter of apology from the Chief Executive. The patients concern was shared with staff member involved, who was extremely concerned that the patient had felt her behaviour to be abrupt. She was very sorry as it would never have been her intention to cause any upset/distress to her patient.
- 4. A patient and his family raised a concern with regards to the poor attitude of a staff member who was caring for the gentleman at the time. A verbal apology was provided at the time of the complaint, followed by a formal letter of apology from the Chief Executive.



During 2019 a complaint was received concerning a patient related incident at Warwick Myton. A full investigation was undertaken at the time which revealed no concerns in relation to patient care.

The findings were shared with the patient's husband and son, a copy of the incident report was also provided to the family. The patient's husband was not satisfied with the response from Myton and consequently sought a review from the Parliamentary and Health Service Ombudsman during 2021.

The organisation co-operated fully with information requests; in November 2021 we were advised that following an initial investigation and based on clinical advice there were no indications of failings by Myton. Therefore, the Parliamentary and Health Service Ombudsman closed the complaint.

2.3 Care Quality Commission (CQC)

The Care Quality Commission (CQC) is an independent regulator of health and adult social care service providers in England.

They work with providers to make sure health and social care services provide people with safe, effective, compassionate, high-quality care and where the need for improvements are identified the CQC will support and monitor to ensure improvements are achieved



During 2021/22, due to the continuing Pandemic, the CQC have continued to pause routine inspections. In February 2022, we participated in a direct monitoring call wherein the CQC made enquires in relation to key elements our service provision. The call was an opportunity for the CQC to gain insight into the quality and safety of our care delivery, understand what had been our greatest challenges and hear how we had responded to those challenges. They were very supportive and have, to date, raised no concerns in relation to the information shared.

Part 3: Updates on Priorities set for 2021/22

3.1 Health and Wellbeing of our staff and volunteers

Supporting staff and volunteers is essential to the individuals own health and wellbeing; the hospice environment is often difficult, and in particular, the last two years have been extremely challenging. Myton recognises the dedicated commitment of its staff/volunteers and understands the need to ensure help and support is available to them.

We have endeavoured to engage with and support staff through various activities during 21/22. Maintaining morale proved particularly difficult during January and February of 2022, following an extremely difficult Christmas and New Year period due to staff shortages, high COVID related absence and high complexity of patients.



As a Senior Leadership Team, we had struggled to understand how we could best support individuals and teams going forward. We therefore decided the best approach to take was to ask our staff. In early March we asked all staff across the organisation to share their thoughts and ideas about

"How can we make you feel valued and supported".

There has been an enormous response from staff with thoughts and ideas of how this can be done. This work is being taken forward with a number of workstreams to offer a wider range of support options.

3.2 Measuring the impact of the changes we made in 2020 and making adaptations where necessary

As the pandemic continued for longer than we had all anticipated measuring the impact of certain changes proved difficult in some areas, these mainly related to patient services where face to face activities were unable to resume. In other areas the majority of the changes made have been sustained with little impact on service provision. In some areas, such as retail, some adaptations have been made to lessen the impact on the team and service delivery.

3.3 Taking our Services outside of the hospice walls

The Patient and Carer Wellbeing Services (PCWBS)

Whilst continuing to offer support to patients and their carers by providing telephone calls and

virtual group calls during the pandemic, we took the opportunity to review the service, and to develop an implementation plan supporting and enabling people

with life-limiting illness to live as fully and independently as possible; we continue to develop and enhance the service. We are developing an individualised plan provided by the hospice services to meet the individual needs following a thorough assessment carried out by senior staff nurses. The initial assessments and on-going reviews will be provided by a face-to-face outpatient appointment, home visits, virtual and telephone support. The service model will deliver a more educational-based approach alongside the benefits of social interaction and support. A programme of activities which will focus on physical, emotional, spiritual and social aspects of need will be available and delivered face to face at each Hospice site.

The Myton at Home Service

The service continues to deliver care in a person's own home working alongside the district nurses (DN's) and General Practitioners (GP's) as the main key workers. The introduction of Clinical Nurse Practitioner (CNP) roles has strengthened clinical leadership, and supporting the nursing team in developing, delivering and maintaining high quality palliative care to patients and their families.

Myton at Home is currently working with NHS Specialist Palliative Care Teams, other Hospice providers and District Nursing Teams within South Warwickshire to strengthen the current process of transfer of care co-ordination for patients in the last 6 weeks of life. Daily conference calls are enabling efficient and effective hospital discharge to preferred place of care and facilitating a community based response to avoid hospital admission for those patients already at home who become unstable and require an increase in care.



Information Clinics (Hubs)

In October 2021a pilot programme of Information Clinics in GP Practices in Coventry was launched – over 100 patients and carers have now been seen in the Information Hubs, more than 30 referrals have been made to Myton's services and more than 30 people have been signposted/referred to external services/providers. It is highly unlikely that any of these referrals would have been made without the Information Hubs, so there is no doubt that they are having a positive impact.

A formal mid-point review of the programme is underway and a final report will be submitted to the Senior Leadership Team in June 2022. We are considering how we can deliver and develop this service provision going forwards.

3.4 Increasing the number of, and supporting our, volunteers

During the pandemic a number of our volunteers, for a variety of reasons, decided to stand down from their volunteering role at Myton. In 2021 we had planned to undertake a recruitment campaign in the hope of attracting new interest across the whole organisation. Unfortunately, this was delayed due to the ongoing pandemic. Whilst routine lateral flow testing of all staff, volunteers and visitors gave a number of our existing volunteers the confidence to return, the uncertainty about the risks associated with working in a healthcare environment had prevented some from doing so.

In January 2022 a new Head of Volunteering joined the team; since her arrival we have experienced significant improvements to our volunteering service, which includes a full review of our recruitment process. We anticipate this service will go from strength to strength over the coming year, we anticipate overall number will reach pre-pandemic levels towards the end of 2022/23.

3.5 Measuring demand for services

We consistently measure demand but during COVID assessing a true picture was hampered because the access to some services was restricted. Relaxation of COVID restrictions will enable services to recover to pre-pandemic capacity levels, and as the confidence of referrers, patients and carers grows we should see this reflected in an increased demand on all services, enabling us to measure 'true' demand.

3.6 Developing a digital strategy

Work on the strategy was commenced in early 2022, with an expected completion by autumn 2022.

Part 4: Other achievements during 2021/22

4.1 Research Nurse

Myton received funding from the local Clinical Research Network (CRN) to support a Research Nurse post one day a week for a 12-month period. The nurse started in post in July 2021, and we have been able to secure funding for a further year.

The introduction of the post has raised awareness and encouraged interest in research amongst our clinical teams and, raised Myton's research profile across the region.



We have been able to take part in research, successfully recruiting a significant number of both patients and staff onto the ICOH research study ('Impact of Covid on Hospices') We are hoping to be chosen as a site for the Clinically-assisted Hydration at End of Life (CHELsea 11) study.

4.2 Second Clinical Nurse Practitioner into Myton at Home.

It is the hope of the hospice that not only can more people die at home, if this is their preferred place but also that when being cared for at home patients can have their pain controlled more effectively and in a timely way.

In Partnership with Charity of Thomas Oken and Nicholas Eyffler, we have secured funding for an additional Clinical Nurse Practitioner (CNP) into our Myton at Home team (Warwick). This coincides with work we are undertaking with SWFT, Shakespeare, Shipston Home Nursing and Marie Curie with regards to 'piloting' a single point of access (SPA) for Hospice at Home services in South Warwickshire. The purpose of this is to strengthen the current process of transfer of care co-ordination for patients in the last 6 weeks of life to enable efficient and effective hospital discharge to preferred place of care and facilitate hospital admission avoidance.

4.3 Rugby Myton Support Hub

At the outset of the pandemic in March 2020 our Rugby Day Unit service was stood down in line with government restrictions. The organisation has since taken the decision not to reinstate the 'traditional' Day Hospice offer in favour of a more blended approach provided through our Patient and Carer Wellbeing service (as described in section 3.3), designed to reach a broader range of people much earlier in their illness.



During the latter part of 2021 a small task and finish group, which involved colleagues from the acute trust, other local groups and providers, worked together to redesign our Rugby Myton offer.

The Rugby Myton Support Hub is a new service aimed at anyone aged 18 years and over who is living with or caring for someone with a life limiting illness. A community-based service working with local partners, all support/advice provided is free of charge, and no referral is needed.

The Hub launch will take place in May 2022 and will be open Monday to Friday, 9.30am to 4pm. People will be encouraged to drop in and meet our friendly staff and volunteers who will assist them by;

- providing information
- signposting to other services/organisations
- providing information and encouraging participation in one of our groups or wellbeing classes
- Where a need is identified, onward referral to another Myton service.

Alternatively, people can just pop in to one of our drop-in sessions for a cuppa and to meet people who understand what they are going through or just spend sometime in our relaxing environment to just 'take a minute'.

Funding for the first 12 months of the project has been generously given by the Rugby Group Benevolent Fund.

4.4 Heart Failure Pilot

Successful introduction of the Heart Failure Pilot Programme in collaboration with South Warwickshire Foundation Trust Cardiac Rehabilitation Nurse was achieved in early 2022, with the first clinic taking place in our Warwick Day Unit. The programme consists of exercise and educations sessions and is supported by Myton's Physiotherapy Team. Patients will have an opportunity to identify their goals and what they would like to achieve from the programme with progress and outcomes monitored to inform the effectiveness of the intervention. A review of the programme will take place in March 2023.

4.5 Hospices working together.

The Hospice CEO's continue to look at ways of working together with the joint intent to improve services for our patients and their families. The first workstream which was commenced in early 2022 is focusing on Hospice at Home services and how these can be delivered in a more joined up way to ensure equity of access for all patients across Coventry and Warwickshire. This work is contributing to a system wide improvement programme for Palliative and End of Life care – 'Getting to Outstanding' a national initiative led by the NHS, Myton are extremely proud to be part of this work.











Part 5: Planning for the Future - Our Organisational Priorities 22/23

5.1 Staff Health and Wellbeing

We have identified through employee feedback that additional wellbeing support, particularly in relation to financial and mental health, would be valued by many people. To help with this, we are broadening the remit of our Health and Safety Manager to expressly include employee wellbeing-their new job title will be Health, Safety and Wellbeing Manager, and plan to recruit a part time Wellbeing Co-ordinator to work with the manager. In conjunction with our recently re-formed employee forum, a range of financial and health related initiatives are being considered, costed and reviewed to identify which would be of most benefit to employees across Myton.

The Health, Safety and Wellbeing Manager and Wellbeing Co-ordinator will actively work with and support our team of Mental Health First aiders and identify any emerging trends or areas where targeted awareness or support may be beneficial, including bringing in on-site professional psychological support for staff if and when appropriate.

In addition, we will commence a review of all our people related policies and procedures to ensure that those that relate to absence, flexible working, recruitment, and people management reflect the specific workforce demographics of Myton and provide scope to actively support employee wellbeing while still managing our operations effectively.

5.2 Maximising Bed Space

As demand starts to increase we want to be in a position whereby we can provide a timely response to referrers when requesting an admission into one of our inpatient beds. We have capacity and equipment to increase overall bed numbers on both our Coventry and Warwick sites. Fundamental to achieving this will be recruitment of additional nurses over and above those we currently have in post.

Whilst we continue with our ongoing recruitment campaign, we are also exploring ways in which we can change our current nursing model. The introduction of Nurse Associates and enhanced Nursing Assistants, are roles that are proven to compliment that of the Registered Nurse. These additional roles will not only enhance the overall knowledge and skills within our nursing team but will also aid retention of our existing staff who wish to progress their careers.

5.3 Expanding Services in the Community

The lifting of government restrictions will enable us to fully 'open up' our community services in the coming months. Once face to face appointments/group sessions increase, we anticipate a growth in demand on our outpatient services. We are starting to experience an increase in numbers of people accessing our counselling services and expect this upward trend to continue during 22/23. Ongoing review of all service level activity enables us to determine where additional resourcing will need to be focused.

We are especially keen to reach out to carers, who we know will benefit greatly from the support our Wellbeing Team can offer along with signposting to other organisations such a CAVA, Citizens Advice Bureau etc. Our Wellbeing Team staff are currently undergoing training in relation to the Carer Support Needs Assessment Tool (CSNAT).

The CSNAT is an evidence-based tool that facilitates tailored support for family members and friends (carers) of adults with long term life-limiting conditions. Introducing the assessment tool will allow our Wellbeing Nurses to identify carers needs in a more structured and planned way to ensure they receive the support that is important to them at a time when it will make the most difference.

We would like to continue and build upon the work we have started in relation to the GP Information Hubs, with the potential to extend this service to other localities within our local communities such as the Myton shops, community centres etc.

The work we are undertaking with partners in relation to the Hospice at Home service will look to increase the number of patients who choose to die at home. Whilst this work is still in its infancy we are aware this will require additional resource and investment going forward.

5.4. Volunteering

The first priority for our new Head of Volunteering is the recruitment of 2 new Volunteering Development Officers – one with a specific focus on developing clinical roles for volunteers. Once her team are fully recruited to, she intends to

scope and source a new Volunteer Management System that allows us to keep more accurate volunteer records, provides a self-service platform for volunteers and volunteer managers, enables access to more powerful analytics and a platform to better communicate with our volunteers

Additionally, working with our existing managers there are plans to create and deliver a suite of Volunteer Manager support tools to provide information, advice, guidance and training to our Volunteer Managers across Myton. This will ensure both our existing volunteers and any new recruits are appropriately supported at a local level within the specific areas in which they volunteer.

Something new to Myton will be the development of an enhanced support framework for volunteers with disabilities and poor mental health, through the piloting of a new Accessibility Passport and Wellness Action Plan for volunteers where needed. Something we are looking have in place by the end of 2022.

We remain fully committed to working alongside partners and completion of the work commenced during 21/22 on the Volunteer Passport Scheme with the UHCW Compassionate Communities Team, will make transition between organisations smoother for volunteers and enable sharing of volunteer resource to greater meet the need of our patients and their loved ones.

5.5 Income

Despite the restrictions on face to face fundraising caused by the pandemic and the closure of shops The Myton Income Generation team's out-performed all expectations during the year. This added to cost savings implemented at the beginning of the pandemic and the grants awarded from the NHS via Hospice UK meant that not only did the organisation survive the crisis we ended the year in a very positive position; £ 1.3 million ahead of where we thought we would be without touching our reserves.



Coventry

Clifford Bridge Road, Coventry, CV2 2HJ 02476 841900

Rugby

Barby Road, Rugby, CV22 5PY 01788 550085

Warwick

Myton Lane, Warwick, CV34 6PX 01926 492518

mytonhospice.org

■ ■ ② ② @MytonHospices

