

Enter and View Report: Overgate Day Hospice -18.09.19

Location of visit	Overgate Day Hospice, 30 Hullen Edge Rd, Elland, Halifax, HX5 0QY
Service provider	Overgate Hospice
Date and time	Wednesday 18th September 2019, 11.00-13.30
Authorised Representatives	<p>Katherine Sharp: Healthwatch Kirklees Volunteering and Engagement Officer (Enter and View Lead)</p> <p>Jo Budgen: Healthwatch Calderdale Engagement and Information Officer</p> <p>Lynne Keady: Enter & View Authorised Representative</p> <p>Frank Reddington: Enter & View Authorised Representative</p>
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<p>What is Enter and View?</p> <p>Enter and View is a visit to a health or social care setting by Authorised Representatives of Healthwatch Kirklees and Healthwatch Calderdale, as a means of gathering evidence of people’s experiences. Enter and View is one of the many tools used by Healthwatch to gather opinion. The visits are not a formal inspection or part of an investigation.</p> <p>Healthwatch Kirklees and Healthwatch Calderdale have a right to carry out Enter & View visits under the Health and Social Care Act 2012. Enter and View visits give service users, carers and staff the opportunity to speak to an independent organisation about their experiences of health and social care services. They may talk to us about things which they feel could be improved, but we also want to find examples of good practice so that we can recognise and promote things that are working well. The visits may look at a single issue across a few settings, may be in response to local intelligence about a single setting, or from an area we have not visited before to understand how services work.</p>	
<p>Acknowledgements: Thank you to all the patients and staff at Overgate Day Hospice who spent time talking to us about their experiences of using services or working there. Thank you to Tracey Wilcocks, Director of Clinical Services, for helping us to arrange our visit and for telling us about how the service operates.</p>	
<p>Disclaimer: Please note, this report relates only to a specific visit and the report is not representative of all service users (only those who contributed within the limited time available).</p>	

Welcome to Day Hospice

The Service

Purpose of the service

The day hospice provides support for patients aged 18+ with life limiting illnesses. The service is available to people who have a GP in Calderdale, although there are some out of area referrals, which could be to accommodate people with relatives in Calderdale.

The day hospice operates from Monday to Friday, with some evening groups to support carers and those suffering bereavement. The aim is to improve lives in a holistic way in a caring environment. The hospice is a registered charity that is partly publicly funded but relies heavily on charitable giving.

Referrals into the service

Referrals are made by GPs or the Community Palliative Care Team. Individuals cannot self-refer into the regular service. Patients can however self-refer to the new Thursday drop-in service which they can attend as and when they want to. Patients tend to access the service on one specific day a week.

Patients are initially referred to the day hospice for 12 weeks, with an assessment at six weeks, and then 12 weeks, to ensure their needs are being met. There are also weekly clinical review meetings. If patients are discharged after the initial 12 weeks they can be re-referred into the service again in the future.

Staffing and patient numbers on the day of the visit

On the day we visited there were 12 patients visiting the day hospice, and it was staffed by two sisters and a staff nurse, two nursing assistants, the activities coordinator, and three volunteers. They also have a complementary therapist and a social worker available, and when a Day Hospice patient dies the Chaplain can offer support to fellow patients. The staff names were on a magnetic whiteboard to show who was working on the unit that day. We visited on a Wednesday which is a 'traditional day', which includes transport to and from the day hospice, a hot meal, and a choice of activities.

The Visit

What we did

The visit took just over two hours to complete. During the visit we spoke to patients and staff, and we also provided a survey for staff and visitors to complete if they were unable to speak to us on the day. The survey was available for a short period after the visit for people to complete.

The visit was informal, and we spoke to as many people as we could, using a prompt sheet with questions relating to how the service feels, good practice or recommendations for change. We also asked patients if they knew how to give the service feedback about their experiences; what their favourite things

were about the day hospice; if they felt their needs were being met; whether they completed a personal profile when they first used the service; if they thought there were any barriers to accessing the service; and whether family members or carers were able to access any services at the day hospice.

Questions were not asked in a specific order, nor were all questions asked of all people. Patients were asked if they would like to speak to us at the time of the visit. We noted people's comments as they spoke to us, after getting their consent to do this. In addition, we used the 'five senses' approach to report on the overall impression of Overgate Day Hospice; this approach considers the atmosphere, smell and appearance of the environment and whether patients seem comfortable in their surroundings. We were not able to speak to all patients at the time of the visit as some were too unwell, or were busy having their lunch, but we did get feedback from the majority of the patients.

Why we did this visit

We completed the visit of Overgate Day Hospice at the request of the hospice, following an earlier Enter and View visit to their In-Patient Unit which they found to be a valuable experience. They wanted to know if there might be things they could do to help improve patients' experience and the focus for this visit was to observe and gather comments. They also wanted Healthwatch to take a look around and give their own account of the service. We were told that the Healthwatch visit had not been announced to staff and volunteers before the day so that no advance preparation could be planned and the hospice would run as it normally would.

Who we spoke to

Patients had the opportunity to speak to us directly, and also took home the details of an online visitor's survey so that their friend or family members could share their thoughts about the day hospice with us. Staff and volunteers also had access to a survey about working at the service which they were able to do via an online survey or return to us at the time of the visit. We also spoke to some staff members directly.

Overall Impressions

The Premises

First impressions - Visitors to the day hospice enter through the grounds which are beautifully maintained. As I walked into the day hospice it felt pleasant and airy, there was a quiet buzz of chatter and soft music, and the relaxing scent of aromatherapy oils. (Healthwatch rep)

The day hospice is set in beautifully tended grounds with views across Elland, with places to sit and relax among the trees and borders full of plants. There is a well-constructed smoking shelter which can be accessed easily from the day hospice via a wheelchair friendly path with handrails, and also a greenhouse which can be used by the patients for horticultural activities. When the weather is good visiting singers and musicians perform can outside in the garden so the patients can enjoy them in the open-air.



There is also a memory tree on the outer wall close to the main entrance which is used to remember loved ones who have stayed in the hospice, with a small charge to add a name of a loved one to help fund the hospice.

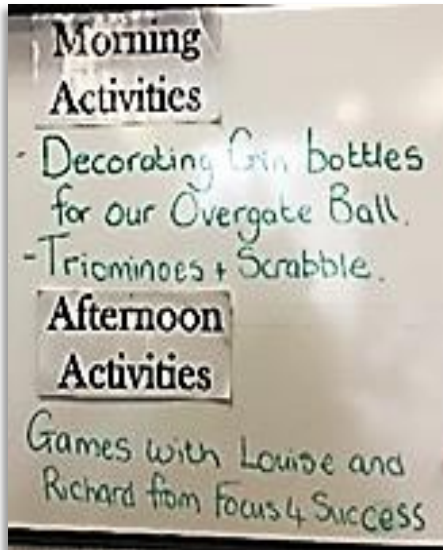
On our arrival we were welcomed by the reception staff and asked to sign in. The reception area has information about the hospice, the services it provides and forthcoming events, plus a well-stocked fridge for purchasing sandwiches and snacks for visitors, and a selection of gifts and greeting cards for sale. There is a seating area with a coffee machine to purchase drinks, and visitors' toilets and office spaces are also in this area.

Tracey Wilcocks, the Director of Clinical Services, met with us and gave us an overview of the way the day hospice operates, along with details of some new patient centered initiatives they were trying out. She also informed us that the hospice has just received planning permission to extend the In-Patient Unit (IPU) which currently has 12 beds including a respite bed, to accommodate 16 beds, all in individual side rooms, and all ensuite.

To do this there will be a complete change of the building configurations, with the new build in the current car park for the new IPU unit. The day hospice will then move into the building which houses the IPU at present, and this will give the day hospice a lot more room so that it will be able to develop and extend the services it delivers. A great deal of fundraising will be needed over the next five years to deliver this planned extension.

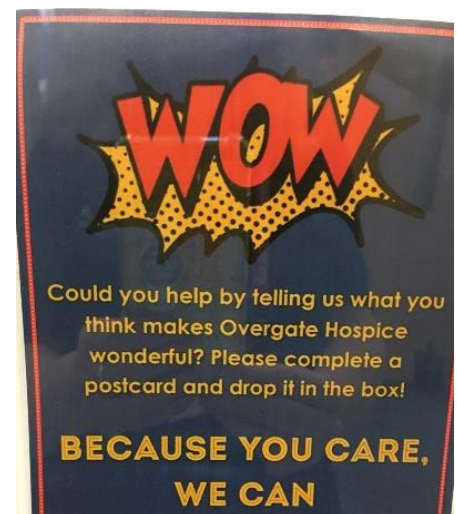
Inside the Day Hospice

The main room was light, open and informal, with circles of chairs and small tables for snacks, drinks and tissues, as well as larger reclining chairs for patients who need more support. Around the room there were bookshelves with a variety of books, information boards including one with a lot of information about healthy eating, and whiteboard detailing that day's activities.



The room where the patients eat their lunch is light and bright and informal, and has large windows looking out onto the garden. Both the main room and dining area were comfortably warm with no unpleasant smells or notable use of air fresheners. There is a big craft storage area and a small kitchen area, and outside of the main room there are two toilets and three therapy rooms. There is clear signage around the day hospice for toilets, exits, the kitchen area etc.

In the main room there was a new information board that had been put up the night before, along with some WOW cards for patients to use to say what makes Overgate Hospice wonderful. There are also plans for some OOPS cards, so that patients could give their feedback on any less positive experiences, or things that might need improving. This new feedback system was not fully in operation as they were waiting for the feedback boxes to arrive, so the patients were not aware that this was available for them to use yet.



Health and safety

All guests visiting the hospice are requested to sign in at reception, where there is a hand gel to use for infection control and signs to encourage individuals to use this are placed around the building.

In the day hospice the results of the infection control weekly audit were displayed, showing 100% for hand hygiene.

A smoking shelter is available for patients to use in the garden due to the no smoking policy in the hospice itself. A fire alarm practice was held while we were visiting the unit, and staff were on hand to reassure the patients that they didn't need to evacuate the building on this occasion.

Staff and Volunteers

There are 122 paid staff (94 whole time equivalent), and 31 bank staff across the organisation. There are also 688 volunteers in widely varied roles, including staffing the hospice shops. Nursing staff are identifiable by different coloured uniforms and name badges.

We were greeted on arrival by a polite and helpful reception team. The staff were approachable, friendly and appeared respectful of patients, each other and us, as visitors.

The day hospice is staffed by nurses, one of whom has recently become a nurse prescriber, and it may in the future start running nurse led clinics. At the moment hospice staff cannot prescribed medication themselves but they can advise the patients GPs. Day hospice staff have the opportunity to work in the IPU, and IPU staff also work in the day hospice, so that all staff are familiar with the way that all parts of the hospice work.

There is a Grants Coordinator who applies for grants to allow the hospice to pilot new groups and activities, such as the Morrison's grant of £14,000 which is funding the new 'Time to listen' project.

There is also an Activities Coordinator who plans a wide range of activities for the day hospice patients, a Complementary Therapy Coordinator, and a Housekeeping Team which keeps the day hospice spick and span.

The day hospice also has a team of hospice biographers. This is something that has been set up by national charity and the hospice has to funded two volunteer posts for biographers to help visitors to the hospice leave a message for their loved ones, or for patients to record their life story. This new service is used predominantly in the day hospice where people have time to think, and the biographers can build up trust with them and help them to express themselves. We were shown quiet room that can be used when biographers are working with the patients.

All staff working at the day hospice have a second set of induction training, with all the mandatory training online via Bluestream, and clinical volunteers also undertake the staff training. All day hospice volunteers receive a handbook and induction training, and all are DBS checked, with some having enhanced DBS checks.

'I absolutely love my job; I look forward to coming to work every day. I love the staff and volunteers I work with. Our patients make me feel privileged and lucky and I find my job so rewarding.' (Staff)

Activities for patients

Overgate Day Hospice is a busy active hospice that creates a pleasant and motivating place for patients and staff. There is a wide range of activities on offer, but patients can also choose to just sit and chat or do their own thing.

Gin bottles decorated by day patients to use as table centrepieces at the Overgate Fundraising Ball



We saw a photo album on display, called **‘Memories to Keep’**, containing photos showing the range of activities patients got involved with in the unit throughout the year, with a commentary about what people did, and how they felt. The activities included working in the greenhouse, planting herbs, making chocolate dipped strawberries, making sock teddies, models, collages, Christmas wreaths, and jewellery. There were also photos of the singers who visit at least once a month, sometimes performing outside if it is sunny. The patients also had fun for the Royal ascot week with lots of activities and dressing up, there are regular visits from therapy dogs, and the patients also helped to look after 10 chicks that were reared from eggs. Les Dennis visited the day hospice and played family fortunes with patients.

Holistic Therapies for patients and carers

There are three therapy rooms specifically for the day hospice, where patients can access holistic therapies including aromatherapy, reiki and reflexology. Patients need to book in advance, especially on the drop-in day, as if 40 patients attended they would not all be able to access the therapies. In addition, all the nurses are trained in hand and arm massage, and when we visited we saw several patients having gentle hand massages while the nurses talked to them. Carers can also access holistic therapies in the drop-in day.

New groups and activities in development

There are a number of new groups and activities in development, based on the needs and wishes of the patients. One of these is the **‘Time to listen’** project, which has been funded by a Morrison’s grant. Trained listeners will be available to go into patients own homes, and all the counsellors will be volunteers apart from the coordinator. Another activity in the pipeline is **‘Time to walk’**, which is being developed by the physio, and which will use local parks for guided walks. These will be based in the different primary care network areas in Calderdale, and patients will meet at a local park for a short walk that has been risk assessed by the walk leaders.

A week in the life of Overgate Day Hospice

On Monday morning there are a range of new groups including the monthly 'Time for me' session, twice a month there is the 'Time to think' session focusing on person-centred care and support for people with dementia and their carers, and once a month there is a bereavement support session called 'Time to talk'.

On Monday afternoon there is the respiratory program, A Breath of Fresh Air, which is a structured education program for people with a Chronic Lung Condition and their carers.

Tuesday and Wednesday are traditional days, people arrive at 10.00 via volunteer transport, or Calderdale community transport if they have large wheelchairs or other equipment. They can have a hot meal, take part in activities, and access holistic therapies. There is an activities coordinator, and an art therapist, and activities include music, quizzes and games.

On Thursdays there is a new initiative, a free full day drop-in service. Patients affected by any life limiting illness, and their carers, can drop in anytime between 10.00 and 16.00. The hospice spotted a gap in service provision, in that people who had received a palliative diagnosis often reported feeling they had nowhere to go in terms of support and information. Since setting up this new initiative they have been getting up to 40 patients and carers at these sessions where they can get information, support and signposting. In addition, they also have two social workers and a chaplain available. This new service has been promoted to GP surgeries, as well as the clinical teams who would be giving their patients their diagnosis. It gives people the chance to dip their toe into what the hospice can do, and to see how it can be a source of support for them. They have also found that a lot of people who have come to the drop-in service are already very poorly, so they can be referred to the IPU.

Friday is also a traditional day. Traditional days are only for patients to attend, not carers, giving them a day off from their caring responsibilities.

There are also some evening groups to accommodate people who come from across Calderdale. There is the monthly 'What happens next?' group, to support people after bereavement, this is a structured facilitated programme for carers and other family members over the age of 18. There is also a **Carers Support Group** held on alternate Tuesday evenings.

At the weekend there are no day hospice services but the room can be rented out to raise additional funding, Calderdale College have used this facility and kindly put on pamper sessions for the hospice staff, and the room and hospice grounds have also been rented out as a wedding reception venue.

How does the service feel?

All the authorised representatives felt that it was a really welcoming service, and we witnessed some lovely interactions between the staff, volunteers and patients.

We arrived just before lunch time, and witnessed patients reading newspapers, having hand and arm massages, and tea/coffee or aperitifs. Two patients were enjoying a small glass of baileys or brandy, which added to the relaxed feel in the unit.

We were told by a patient that the care was holistic. They also said that it was *'beautiful'* when asked what worked well about the service. We were also told it was very different from the hospital as the staff have time.

Another patient said they felt looked after and treated, *'I can't explain it'* but it was obvious they really enjoyed it as they explained they wanted to stay for longer on the day.

One lady who had attended the unit last year and had now come back again, said *'I couldn't fault it at all, they are so lovely and caring, the way the staff are, and the volunteers, the way they all gel together.'* She said most the staff had been there a long time, and were very loving and caring. This showed in the way staff looked after her, made sure she was comfortable, and gave her hugs.

Patients said:

'Staff are excellent.' *'Staff are very attentive.'*

'Doing things here makes life bearable.'

'My breathing was a serious problem until I received therapy here.' *'Outstanding and wonderful'*

'I used to be anxious all of the time until I came here.'

'10 out of 10 from me anytime' *'I'm not on my own'*

'The care, I feel important' *'It makes me happy'*

'I didn't know I needed this or could access it'

'Fantastic' *'It's an absolute blessing'*

'Staff hug you if you need it and are really friendly'

What works well?

All of the patients we spoke to spoke very highly of the service provided by the day hospice. We were told it was an uplifting environment, nice and light, and they appreciated the caring, compassionate, genuine manner of the staff. They said they enjoyed talking to others with similar conditions. *'You never hear anyone complaining'* we were told.

We saw examples of good teamwork among staff, for instance when they were consulting each other about feeding one of the patients.

Patients said:

'The cheerfulness and empathy when needed. extremely friendly, good and varied activities'

'Everything. such a lovely supportive atmosphere.'

'The staff are able to navigate you to what you need - they just seem to know.'

'They've welcomed me wholeheartedly'

'Everything is laid on for us (made reference to meal) and taxis provided.'

Staff comments:

'Staff and patient relationships' 'I'm happy working here'

'We laugh with patients but also support them'

'It's a lovely setting with nice gardens and views.'

'The care, atmosphere, team work, working with volunteers. I feel privileged to work alongside a good team - love being with the patients and carers supporting them in such a traumatic time with in their lives.'

Volunteer comments:

'The activity co-ordinator is really good and always open to ideas about activities. The auxiliaries are really excellent at their roles, as are the nursing and doctor staff - everything seems to be patient oriented, with a variety of things going on - massage, activities, counselling, doctor consultations and just a very happy environment. The food is excellent too, everyone seems to love it.'

'I feel valued as a volunteer, and I feel as if my opinion counts for something all the time. It is fun and lovely working there - I get as much as I give when going in each week. All the staff are lovely, and I would happily recommend to my family should the need arise.'

Choice and Dignity

All patients using the day hospice are sent a booklet called 'Getting to know me', in which they can detail their likes and preferences, and then bring with them when they first attend so that staff can be made aware of them.

Patients told us they had a choice of complementary therapies to choose from, including reiki and massage, and that they could also access counselling if they wanted to. They also told us about visits from the therapy dog which they enjoyed, '*curly hair - makes you want to touch it*'. Two patients also told us they were making recordings for their loved ones with the biography service, and this seemed a really comforting thing to do.

We noted that patients were given really clear choices about activities, and that their preferences were always taken into account and they were treated respectfully. We observed excellent interactions between the activities coordinator and patients on voting for which activity they would like to do. Once voting was completed she spoke again with all those who had been outvoted and checked they were ok with the final activity.

'I like to come to relax and read paper and have a hand massage. Games are okay. They talked about walking in the garden and I said at first I wasn't sure but I'm happy now.' (Patient)

'All patients are asked each time they come what they would like to do that day and whether they want to join in the planned activities or not. Obviously some do, and some don't but we do try to ascertain what they would like and plan accordingly.' (Volunteer)

All of the patients that we spoke to stated that their dignity was respected when tasks such as going to the toilet and washing were performed. One patient told us that they struggled to eat at home but here it felt better as eating together helped, and another patient said if they needed pain management it was accessed really quickly.

'We discuss the options with the patients and help them to make their choices.'... 'We talk to patients individually about their needs' (Staff)

The hospice strongly advocates advance care planning, and details of patients end-of-life care choices are stored on EPACS (Electronic Palliative Care Coordination System) which is hosted on SystemOne, so that the patients GP and the hospital can see them as well. Patients visiting the day hospice can also go and look round the IPU to see what it is like, which helps to reassure them and reduce any fears they might have about using it in the future.

'I have been able to do an advanced care plan, then I was able to look around the hospice' (Patient)

Giving feedback

We asked several of the patients if they knew how they could give feedback about their time in the day hospice, but none of them were aware of the new WOW feedback cards. This could be because this is a new initiative, and the feedback boxes weren't in place yet.

Support for Carers

The day hospice supports carers in a number of different ways:

- ❖ Three days a week they get a break from their caring responsibilities while the person they care for is being looked after at the day hospice, with lunch and transport to and from home included.
- ❖ On Mondays they can attend the **'Time to think'** session supporting people with dementia and their carers.
- ❖ On Thursdays they can accompany the person they care for to the drop in service, where they can also get information and support, as well as access to the holistic therapies if they book ahead.
- ❖ There are also fortnightly **'Carers Support Group'** sessions, and the monthly **'What happens next?'** bereavement support group.
- ❖ There is also a Patient and Family Support Team which works within the day hospice, offering a range of support including emotional, spiritual and practical support, and signposting to external agencies.

'My husband is waiting to access some services - this feels good and like things are in place to help' (Patient)

'Patients and carers are very much involved in how we care for them and decisions made. Overgate is very patient centred. It is definitely not 'every size fit's' (Staff)

'We invite regular feedback and invite patients and carers to meetings - in particular drop in ensuring we are providing service support the patients and carers require.' (Staff)

'Carers come at first visit and any reviews but don't usually attend each week. But as far as their care is concerned I as a volunteer don't know about that.' (Volunteer)

'I accessed drop in first - with a friend, within the first few minutes I was offered and given reiki and a friend was given support - came twice and then waiting to be refereed - may be a wait only 2 weeks.' (Patient)

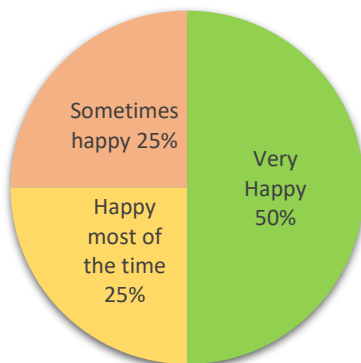
Overgate Day Hospice Staff & Volunteer Survey

3 staff members answered that they always had enough time with the patients

The survey was completed by 4 staff and 4 volunteers, and all said that:

- ✓ The Day Hospice is a very good service to work in
- ✓ The Day Hospice is a very good service for patients
- ✓ Patient's individual needs are very well catered for
- ✓ The Day Hospice feels safe
- ✓ They would feel comfortable speaking to a senior member of staff if they had any concerns relating to work or volunteering
- ✓ They would know what steps to take and who to report to if they had concerns about safeguarding issues.

Staff happy with work load

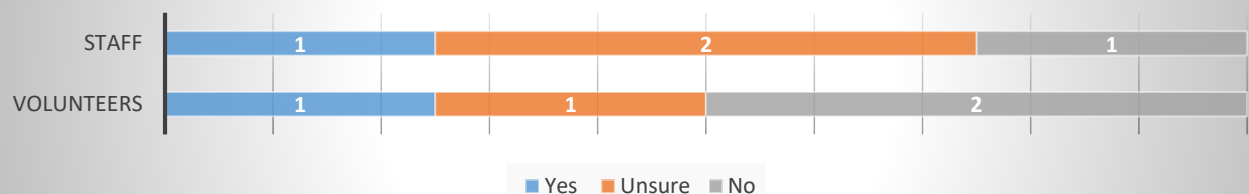


3 staff members said they used technology or electronic devices to assist them in their roles, one said *'I embrace it'*. The other staff member said they didn't, but that they were *'Trained to use any new patient moving equipment'*

All 4 staff, and 3 volunteers said they were offered opportunities for extra training, and only one volunteer said they weren't.

'It is very patients centred, we find out as much about each patient as possible so we can adopt our care to meet their needs. We also have fun too and try to laugh as much as possible.'

When asked if they would like more safeguarding training?



Conclusions

It was a pleasure to visit Overgate Day Hospice, and to see the excellent care that the patients had from the caring and dedicated staff and volunteers. We were made very welcome, and although we were there during lunchtime, and while the afternoons activities were being set up, the atmosphere was calm and relaxed. We saw lots of examples of person centered care, and patients being given choices about what they wanted to do.

'If I was forced to take part in something, then I wouldn't like it. It's up to me what I do, if I don't want to an activity, I can just sit or read a book' (Patient)

As we spoke to patients it was clear how much they value the service, and how much pleasure they get from their visits, the way the staff and volunteers treat them, and all the activities on offer. Some patients said that if they had the choice they would like to attend the day hospice more often.

'A volunteer picks me up to bring me here, and when I get here the staff do everything, they notice things and they are there for you.' (Patient)

"I didn't know I needed this service" (Patient)

Another patient said she enjoyed the activities such as making cards and jewellery, and that there were lots of things to do. When she was asked about the food she pulled a bit of a face, but said it was not too bad as they were doing it on a budget, and that *'the soup was lovely today'*. This was the only feedback from a patient that wasn't 100% positive.

Another told us that they had initially accessed the drop in, and had been told that there may be a wait for the day hospice service. The wait was only two weeks, but it was good that the day hospice was actively managing patient's expectations.

Most of the patients we spoke to didn't remember filling in the **'Getting to know me'** book, but it was evident from the way the staff treated the patients that they knew how they liked to be treated, and what their preferences were.

It was also good to hear about the plans to extend the IPU, as this would eventually allow the day hospice to move into a larger unit on the same site. This will hopefully help Overgate to cope with the demand for the day hospice service. This was reflected in the comments made by staff when they were asked if there was anything they would change about the unit.

'More space more rooms for things like relaxation, craft, art, exercise storage' 'New premises- providing more space and enabling us to continue delivering quality care and support' (Staff)

Feedback from staff and volunteers was overwhelmingly positive, with plenty of scope for training and development mentioned, along with the meet and mingle sessions.

'Everyone (staff and vols) are treat equally no matter what role they have. The staff meet and mingle session gives us the opportunity for health checks and complementary therapy, as well as the chance to read thank you cards from patients and to make suggestions for improvements' (Staff)

'I enjoy every day - love meeting and supporting patients and carers. A very nice place to work' (Staff)

It was also good to see the new groups and activities being developed, based on the interests and needs of the patients and their carers.

Additional Comments

There were some comments about needing more room in the day hospice, including more space for changing facilities instead of having to use the ones in the IPU, and more space for patients using wheelchairs, who have particular difficulties with access to the toilets. It was appreciated that any changes like this would be difficult to do at the moment due to the layout of the building, but that the proposed plans for extending the hospice should help address these issues.

A couple of patients we spoke to expressed some anxiety about being discharged after their initial 12 weeks' attendance at the day hospice, and hoped they would be able to attend for longer.

One patient also had some suggestions for different activities, *'Would like to do some lectures on art history or block mounting prints.'*

Overgate Day Hospice Patient Feedback Tree

Overgate Hospice is known for its memory tree, which helps people to remember their loved ones and raises funds for the hospice. This tree illustrates the words we heard patients use most frequently when describing the care and support they get when they attend the day hospice...



Recommendations

Enter and view Recommendations	Feedback from Manager
<p>We recommend that once the new feedback collection boxes and OOPS cards are in place:</p> <ul style="list-style-type: none"> - All patients are made aware of the location of the feedback cards and the collection boxes - Patients are encouraged to use the WOW and OOPS cards to give feedback, with volunteer support available. - Use of the feedback cards is also promoted with patient's family and carers 	<p>All the feedback cards are in public facing areas and patients will receive information on how to provide feedback when first accessing our services.</p> <p>The collection boxes and cards will be fully installed and in use by end of December 2019.</p>
<p>We recommend that:</p> <ul style="list-style-type: none"> - Consideration be given to setting up a dedicated area for patient feedback on one of the notice boards, taking a 'you said, we did' approach to show what happens as a result of their comments. 	<p>There is a section on the display board to capture patient feedback.</p>
<p>We recommend that the Complaints & Compliments section on the Overgate website contains information about, or links to:</p> <ul style="list-style-type: none"> - The Overgate Complaints Policy/Process - Advice about how to raise a concern or make a complaint - Advice about how to appeal if unhappy about the response to a complaint - Information about other organisations that concerns can be raised with: <ul style="list-style-type: none"> • Healthwatch Calderdale • Care Quality Commission (CQC) • The Parliamentary & Health Service Ombudsman - if the complainant is not satisfied with the hospice's complaint response and if no more progress can be made in terms of resolving the complaint with the hospice. 	<p>The complaints policy has been updated in November 2019 with an accompanying leaflet and will be uploaded to the website by end of December 2019</p>
<p>We recommend that:</p> <ul style="list-style-type: none"> - Staff and volunteers are given the option for more safeguarding training. 	<p>Safeguarding training is delivered via an online platform supported by our Safeguarding Lead. Classroom Q&A sessions are planned for the New Year</p>