

# Enter & View Programe 2025 Visit to St Catherine's Hospice

November 2024





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# Introduction & Background

### What is Enter & View?

Healthwatch has a legal power to visit health and social care services and see them in action. This power to Enter and View services offers a way for Healthwatch to meet some of its statutory functions and allows us to identify what is working well with services and where they could be improved.

Our Enter and View programme involves visiting publicly funded health and social care services in West Sussex to see what is going on and to talk to service users, their relatives and carers, as well as staff. We do this with authorised representatives, who go through a training programme

The legislation places a duty on health and social care providers to allow Authorised Representatives of Healthwatch West Sussex to carry out an Enter and View visit on premises where health and social care is publicly funded and delivered.

### This includes:

- NHS Trusts, NHS Foundation Trusts and Local authorities
- Primary medical services, such as GPs
- Primary dental services, such as dentists
- Primary Ophthalmic services, such as opticians
- Pharmaceutical services, such as community pharmacists
- Premises which are contracted by local authorities or the NHS to provide health or care services, such as adult social care homes and day-care centres

The list of service providers who have a duty to allow entry is set out in section 225 of the Local Government and Public Involvement in Health Act 2007 and supplemented by Reg 14 of the 2013 regulations. Every local Healthwatch across the country has a legal responsibility to carry out an Enter and View programme. But we are not inspectors, instead, we focus on gathering the views and experiences of the people receiving care.

The visit we conducted in this report was in response to a request from the senior management at St Catherine's Hospice, who reached out to Healthwatch Surrey and Healthwatch West Sussex in 2024 to support their patient and public involvement activities.

Healthwatch Surrey and Healthwatch West Sussex worked together to plan and deliver the visit, which occurred in November 2024. You can find out more about our respective work via our websites: www.healthwatchsurrey.co.uk and www.healthwatchwestsussex.co.uk

### During our visits, we focus on:

- Observing how people experience the service through watching and listening
- Speaking to people using the service and their family and friend carers, to find out more about their experiences and views
- Observing the nature and quality of services and the environment in which the services are provided
- Speaking to staff working in the service and observing them in their work

Our Enter & View reports are shared with providers, the health and care regulators - CQC, the local authority, WSCC, NHS Commissioners, the public, Healthwatch England and any other relevant partners.





# St Catherine's Hospice

St Catherine's Hospice is located in the north of West Sussex and serves communities across West Sussex and Surrey, Having moved into a new build property around a year ago, the service delivers inpatient care as well as outreach and community services. The service is currently operating at half it's capacity, with 12 beds occupied in a 24 bed facility. The capacity is directly influenced by current funding challenges.

The Hospice inpatient service cares for around 330 patients each year.

With dedicated nursing teams as well as medics (consultants) and allied health care professionals on site, the patients and families who access services at St Catherine's are able to experience the best medical care available to them, complimented by in-house catering, housekeeping and administration staff as well as volunteers and visitors from other services and professions who really add value to the quality of care delivered.



Taken from the St Catherine's Hospice website:

### Caring for 40 years

For the last 40 years, our hospice has been there for people living in West Sussex and East Surrey, offering both physical and emotional support to those living with a life-limiting or terminal condition and their families.

From caring for people at home, in our Wellbeing centre and on our wards, our expert teams are on hand to support those facing death and loss. We not only care for those who are living with a lifelimiting or terminal condition but offer bereavement and carer support to their loved ones.

Our vision is a world where everyone can face death informed, supported and pain free. We treat people with understanding, patience, respect and, most importantly, with dignity. We are incredibly proud of our expert team, and the care that we deliver on a daily basis; in fact, the Care Quality Commission has rated our care as 'Outstanding.'

### **Tailored care**

It could be a bath, a favourite meal, or helping someone manage their pain. For us, hospice care is whatever patients and those closest to them need it to be. It's different for everyone, and we empower patients to make their own decisions whenever they can.





# What we saw and heard on our visit

### First Impressions and Welcome

- Our first impressions of the Hospice site were very positive. The building is well sign posted from the main roads and has good bus access and generous parking for visitors.
- There is a community café next to the main hospice building which is a great community asset, operated by St Catherine's, to provide additional services to the local community and to generate much needed income for the charity.
- There is an out of hours entry system which enables visitors to access the building at any time of the day or night, when the reception desk is not staffed.
- The accessible entrance and reception area is warm, bright and welcoming, with a café style area and tea and coffee making facilities.
- An open reception counter is welcoming and staff provided a professional and warm welcome.
- The building is pet friendly, with dog biscuits readily available at the reception desk, along with sweet treats for their human companions.
- These small touches, along with the warm and friendly greeting from reception staff, make the first contact with the service a very positive experience.
- Signing in as a visitor is completed digitally, via a touch-screen device mounted on the reception desk. Staff are on hand to support people with this.

### **Outpatient Areas**

- All patient facilities are on the ground floor with level access and easy-open door functions.
- There are staff rooms, offices and meeting spaces on the upper floor which can be accessed via stairs or lift.
- We observed a number of consulting rooms close to reception, as well as a beauty therapy room, a meeting room/lounge and a multi-faith spiritual room.
- Hospice staff, as well as clinical and non-clinical professionals from outside of the hospice team, are able to see patients and their carers using these facilities.
- Consulting rooms are spacious and have privacy curtains for examinations. We noted the dates on the curtains were 11 months old and asked about the frequency of replacing them. The Hospice have a schedule to replace consulting room curtains annually – or more frequently if necessary – so we would expect them to be changed in Dec 2024.
- All the rooms were clean and well maintained. We noticed the dementia friendly colour scheme used on walls / doors but door signage and notices could be improved to make them more dementia friendly.





- We reported a running tap in one consulting room that had caused a small puddle and water was spraying onto a clinical couch. This was dealt with immediately by the staff team.
- We observed the availability of hand sanitiser throughout the building.
- Fire extinguishers were available and in date and there was a portable AED machine mounted on the wall in the non-clinical area.
- The meeting room/lounge is regularly used for therapeutic activities and group discussions.
- The multi-faith room had feet washing facilities for those who require it and was a neutral, comfortable and calm, with furniture, soft furnishings and art work appropriate for the environment.
- Toilet facilities were clean and well maintained. Signage was gender neutral and there were larger, accessible facilities available for those who need them.
- Signage was generally soft and simple in design, with images and text, However, the height of door notices may be challenging to see for people who are short in stature or wheelchair users.
- There was limited use of 'bus stop' signs which might support wayfinding for patients and carers.

### **Inpatient Area**

- The unit is split into 2 'wards' which each have their own entrances but are integrated seamlessly with a connecting corridor. Staff work across both sides and there is a collaborative and supportive working culture.
- Corridors are spacious, bright and clear of hazards / obstructions.
- Each ward is themed Meadow and Woodland with rooms being named rather than numbered flower names in Meadow ward and tree names in Woodland ward.
- Patient rooms are all single, en-suite rooms with a contemporary, comfortable and neutral feel.
- Rooms have en-suite shower facilities and there is a jacuzzi spa bathroom available between the wards, if patients wish to use it.
- There is a definite hotel vibe, with attention to detail that enhances the positive experience, such as miniature complimentary toiletries in the bathrooms, fresh towels, wall mounted smart TV, free WiFi, USB and plug sockets next to the beds, adjustable lighting, laminated menus, including snacks and drinks (alcoholic and non-alcoholic), small fridge and lots of storage space.
- Patient beds have air mattresses for patient comfort and minimising the risks of pressure sores.
- Rooms are also designed to support the delivery of care, having ceiling hoists discretely stored in cupboards, dementia friendly clocks and beds positioned to allow for staff to access patients from all aspects. Mood lighting and nurse call systems are also present in each patient room.
- All rooms have large windows with garden views and access to the outside space.
- Gardens are beautifully kept and can be accessed by ambulant patients as well as those who need or prefer to remain in chairs or beds.





- Every patient room has seating options for patients and their family carers, including a reclining armchair. A pull-out bed can be provided for family carers to sleep on if they would like to.
- Staff wear uniforms which support patients and carers to identify their roles.

### Non-patient areas, staffing and management

- Staff team (all disciplines) consist of approximately 220 (180 FTE)
- There is appropriate administration and staff rest facilities to ensure staff can perform to their full potential.
- Since the building opened, the teams have identified and suggested potential changes to use of space in some non-patient areas, which have been implemented with positive effect.
- The hospice was designed with a small integral mortuary and funeral directors can access the site from a separate access point, away from the inpatient and outpatient areas.
- The catering team benefit from a large, well designed kitchen and are able to produce freshly cooked meals, with a flexible approach to the catering service.
- Whilst there are 3 main meal services per day, with a set menu that is on a 4-weekly rotation, the kitchen is able to deliver 'short orders' and personalised food and drink, wherever possible, throughout the day.
- The Hospitality Team also support patients and their families to celebrate key events, such as birthdays and wedding, for example with a cake.
- Facilities at the site include training rooms and equipment to support staff development and learning.
- Medication / pharmacy staff available as well as OT's and physio's directly employed by the hospice.
- The Wellbeing Team also provide Social Work support, Carer Support, Welfare Advice, Spiritual Support and Counselling.
- Clinical patient notes are recorded on the SystmOne platform and can be shared with other providers who use this platform.
- It can be challenging where patients have interaction with health or care services which don't use SystmOne, but St Catherine's has been able to benefit from the advancements in digital systems and can access an integrated care record with a number of other organisations and platforms, including pathology and radiology reports and clinical correspondence.
- Patients, and their carers, are supported to develop their care plan, which incudes their wishes in their final days, hours and following their death. This is done is a respectful, compassionate and collaborative way.
- Management collect patient feedback in a variety of ways but would like to explore more options and opportunities to hear their views and experiences of their patients and their patient's family carers.
- Compliments and complaints are logged on the Vantage System. With compliments far outweighing the number of complaints.
- We heard evidence that complaints are dealt with promptly, thoroughly and sensitively.





# St Catherine's Hospice

A caring culture	A listening culture	A proactive (responsive) culture
Patients are enabled to visit the café / communal areas	Compliments and complaints are logged formally and shared / actioned promptly	Trustees are now involved and included in regular '15-steps assessments'
Patient choice is evident in all aspects of care – choosing when to bathe or dress for example	Feedback is encouraged and info shared in leaflets in all patient rooms as well as posters and website  A QR code can enable a smartphone user to give	Healthwatch was invited to connect with the service in early 2024 and both parties are keen to continue to develop our relationship
We observed staff interacting with patients and carers in a friendly and attentive manner	A feedback survey is sent to all families 8-12 weeks following a bereavement	There is a culture of openness, continuous improvement and learning











# **Areas for improvement**

Opportunity. Recommendation. Action	Area	Responsible Team(s)
Staff only areas / cleaning cupboards should be inaccessible to patients and visitors.  We noticed a cupboard door that was left unlocked in the outpatient area.	Outpatient / inpatient areas	Management Team / Housekeeping Team / Clinical Team
Signage to the care park – car park entrance / around the car park – could be improved.  It was unclear to some of our team if the car park was for the hospice service or the café or both.	Car Park	Management Team
Maintain strong connection with ward and reception team – they may feel isolated as they are located a fair distance from the inpatient wards	Reception	Management Team / Reception Team / Inpatient Team
Continue to work with the local Healthwatch teams to explore more ways to encourage, enable and empower patients and family carers to give timely feedback and raise concerns or give compliments	General	Management Team



# Challenges and considerations

### St Catherine's Hospice is, like many hospice services across England, severely impacted by financial constraints and limitations.

- Income is made up of a small portion of NHS funds, fundraising and self-generated income streams, such as a significant and successful retail function (charity shops).
- Community support is crucial for the sustainability of the service but in recent years, the charity has experienced a reduction in fundraising income and volunteer support – which is a national trend.
- Despite the positive culture and fantastic care delivered, the service would like to do more, for more people. And there is definitely evidence that there is increasing demand for hospice care in the area.
- However, with the current financial challenges, the service is operating at just 50% and is unlikely to be able to increase this anytime soon.
- Whilst staff shared with us that they like working at the serviced and feel supported and valued, they did tell us that they feel they are walking much larger distances in the new building than they used to and this has / may impact their fitness and wellbeing.





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Healthwatch West Sussex works with Help & Care to provide its statutory activities.





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