



Company Information

North West Hospice:

Registered Office: **The Mall, Sligo**

Company Registered Number: **119501**

Registered Charity Number: **CHY 7983**

Solicitors:

Michael J Horan Solicitors, Millennium House, St. Stephen St, Co. Sligo

Bankers:

Ulster Bank LTD, 25 Stephen Street, Sligo

Permanent TSB, 22 O'Connell Street, Sligo

Auditors:

Gilroy Gannon Financial Services, 25 Stephen Street, Sligo

Table of Contents	Page
Chairperson's Statement	2
Hospice Manager's statement	4
Our Services, Mission & Values	5
Service Statistics / Staffing	7
Structure & Governance	9
Medical Services Statement	10
Nursing Services Statement	11
Social Work Statement	13
Quality / Safety/ Practice Development Report	14
Volunteer Services Report	16
Fundraising Report	17
Strategic Plan – Progress in 2016	18
Financial Statement and Accounts	26

Chairperson's Statement

North West Hospice (NWH) is the centre of palliative care service provision in the North-West of Ireland, making available specialist care with compassion for those living with life-limiting illness in our community. In the Annual Report of twelve months ago I reported the completion of our five years Strategic Plan (2016-2020) which was officially launched on 18th August 2016. In line with stated objectives contained in the Strategy, NWH management under direction of the Board continues development of the service with implementation of initiatives such as:

- The formal presentation to the HSE of the Capital Development Business Case commissioned in 2015, to inform of our intention to build a new in-patient facility on the existing hospice site at the Mall, Sligo and seeking support for this development (Strategic objectives 2 and 6);
- submission of a Business Case to the HSE seeking approval for funding to appoint a second full-time Palliative Care Consultant, (Strategic objective 3)
- the ongoing development and up-dating of structures and policies on the path towards full compliance with new regulatory arrangements for charities and voluntary organisations (Strategic objective 7)
- the appointment of a Hospice Manager in December 2016 to replace the interim manager. (Strategic objective 8)

As flagged up a year ago, the focus of our attention remains fixed in effecting Objective 2, construction of a new 12 bed hospice building. Achievement of this objective is absolutely necessary to make available a modern in-patient facility for the provision of a quality palliative care service which members of our community require and deserve. The first steps on the way to achieving Objective 2 have been taken through engagement with the HSE in gaining their support in drawing up a development plan for tendering and submission to seek planning approval. In this endeavor the Board is most grateful to the HSE for their readiness and spontaneous response to become involved by offering their expertise to facilitate the drawing up of the development plan. Incidentally, the leader of the development team, Shane Campbell, is son of Claire, founder member of North West Hospice.

While the HSE support is very welcome and exceptionally valuable to the Board in initiating the building project, it goes without saying that our biggest challenge in the immediate future is the hard work of raising the necessary money for this development. Achieving Objective 2 is greatly magnified by the further challenge of continuing to sustain our income at the amount necessary to

maintain palliative care at the current level of service, whilst accommodating for extra demands and ongoing development.

In addition to the financial spend invested in developing the service to date, the Board is acutely aware of its responsibility in controlling expenditure required to continue implementation of the Strategic Plan. Constant monitoring by our manager and Board of Directors of our financial situation through taking care and due diligence with each development embarked upon ensures that we achieve optimum value for money spent.

There is no doubt that past developments already mentioned could only have happened with the remarkable effort made by many people to whom much credit is due. This includes: our medical consultants and staff, nursing, social work and ancillary staff as well as our community team who all provide an excellent palliative care service. Also our manager and staff consisting of administration, secretarial, community relations, fundraising, volunteer coordination and reception, who have all contributed greatly to ensuring the maintenance and development of services. The Directors very much acknowledge and appreciate the leadership and teamwork of all involved. In addition, I wish to acknowledge the input of the HSE who through our service agreement provides substantial funding to support our services.

None of what I have already mentioned could have happened if it were not for the tireless and consistent work and effort of our many volunteers and support groups spread throughout the community we serve and beyond. Apart from the work carried out by our fundraising staff, funds are significantly enhanced by input from a wide variety of sources including; spontaneous donations from relatives and friends during visits to our clinical area, bequests from users of our service, 'drop-in' donations by members of the public as they traverse the Wine Street Car Park, and many unprompted events organised by individuals and small groups both at home and abroad, where our Diaspora have not forgotten from where they've come.

We value to the highest degree our interactive relationship with members of our community whose feedback we encourage and greatly appreciate in continually striving to improve our service. A sincere 'thank you' to all on behalf of the Board of North West Hospice.

The Board is very aware that the future aspirations which I've expressed are only achievable with the support of our community. We look forward to working with you in continuing the great effort of meeting with optimism, the enormous challenge ahead.

Mr. Jim Callaghan,
Chairman of Board of Directors

Hospice Manager's Statement

I was recently appointed as North West Hospice Manager in January 2017. It is an honour and a privilege to work in this healthcare service and to present the 2016 North West Hospice Annual Report. I previously worked for 8 years as Assistant Director of Nursing in the North West Hospice and am therefore very familiar with the very high level of commitment, compassion and professionalism of our staff and volunteers and the consistent support and generosity of the community to the service. I would like to thank the Board of Directors, hospice management and all staff and volunteers for the warm welcome and support during my first 5 months as Hospice Manager and to acknowledge the work of my predecessor Dr. Nigel Mc Carley.

Over the years the North West Hospice has harnessed the widespread local community support since it was founded in 1986 by members of the local community. This support has ensured that North West Hospice has been to the forefront of palliative care in Ireland and is the only specialist palliative care service in the State providing services which are integrated across acute, community and hospice. We were the first to provide community palliative care on a 7 day a week basis and in 1998 opened our specialist In- Patient care facility.

The organisational changes recommended in the Strategic Plan 2016-2020 was progressed in 2016. A detailed update on all eight of the key objectives is presented in this report. This re organisation was required to deliver the ambitious objectives presented in the Strategic Plan and will continue to be embedded in 2017. Key challenges remain as we continue to live in very challenging economic times with the requirement to fundraise in excess of €1 million each year. However the North West Hospice remains steadfast in continuing to focus on the delivery of high quality patient care with the continued support from our local community and the Health Service Executive.

In presenting this annual report, I wish to acknowledge the support and contribution of the Health Service Executive and the local community to the delivery of our specialist palliative care services.

Ms. Nuala Ginnelly
Hospice Manager

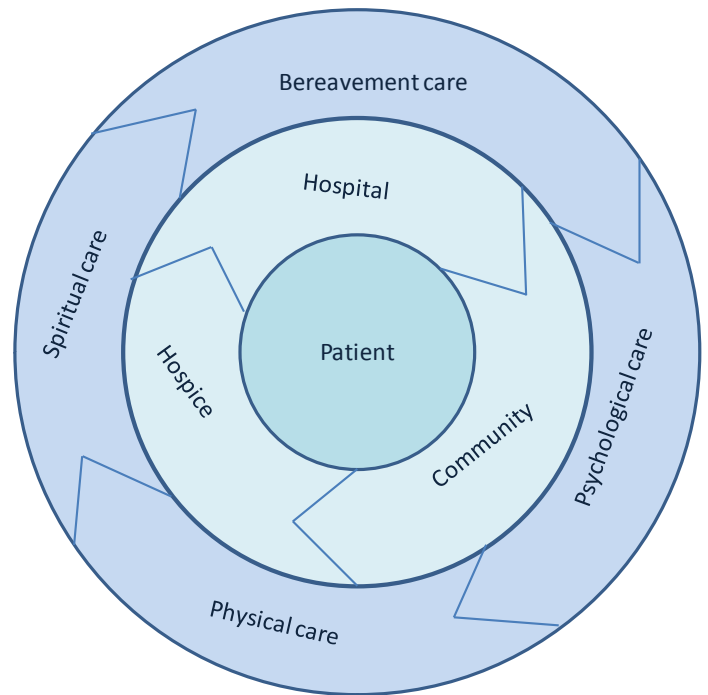
Our Services

We provide specialist palliative care with compassion for those living with life-limiting illness in our communities in Sligo, Leitrim, South Donegal and West Cavan – a catchment area of approximately 110,000 persons. All our care is provided free of charge to patients and their families.

Our Integrated services is provided through

- Our **8-bed Inpatient Unit** – this Unit has eight beds (three single rooms and a five-bed area) where people are cared for by a multi-disciplinary team for a range of reasons such as symptom control, respite, as well as end-of-life care. Our team includes specialist palliative consultants, medical, nursing, social work, occupational therapy and physiotherapy staff. We also provide pastoral care, complimentary therapies, and a wide range of volunteer services.
- Our **Community Palliative Care Team** working across the North-West – we visit patients in their own homes or other care settings such as nursing homes or community hospitals. This team of Clinical Nurse Specialists, a social worker and a doctor work very closely with the patient's GP and Public Health Nurse to provide care to the patient.
- Our **Hospital Palliative Care Team** based in Sligo University Hospital - provides palliative care to patients at Sligo University Hospital and their families, and provides support to the hospital's medical and nursing teams. The Team provides a seamless link in the flow of care between the hospital, the hospice In-Patient Unit and Community Palliative Care, assisting patients and their families to make the most appropriate decisions according to their individual care needs.
- Our **Social Work** service – our team of Social Workers are heavily involved with our multi-disciplinary teams to support families in both proactive and response work on bereavement, and we also engage closely with HSE Bereavement Counsellors working in the community.
- Our **Specialist Education Support** service – we recognise the importance of ensuring the continuous professional development of our staff, and our activities include monthly education sessions for staff, learning and sharing from practical examples of clinical practice, and the development of policies, procedures and guidelines related to service quality.
- Our **Volunteer** Programme – our volunteers provide essential support in areas such as reception cover, holistic care (massage, music, reflexology, etc.), and driving, fundraising and other activities.

The services provided by North West Hospice are highly integrated, and our Bereavement, Education, Spiritual and Volunteer supports are integral to our specialist palliative care service. The diagram (pictured right) illustrates the integrated nature of what we do, all of it centred on the needs of our patients and their families:



Mission, Vision & Values

Mission

The mission of North West Hospice is to provide specialist care with compassion for those living with life-limiting illness in our community.

Vision

Our vision is to be at the centre of palliative care services in the North West, working to ensure that everyone who needs palliative care can access services.



Service Statistics and Staffing

1.1 Service statistics

Total number of New Referrals to the service and % increase from 2011- 2016

2011	2012	2013	2014	2015	2016	% increase since 2011
429	413	466	502	528	579	35%

Community Palliative Care

	New referrals	Re-referrals	Discharges	Deaths	CNS visits	Phone calls
2015	324	38	79	235	2537	12846
2016	303	41	64	227	2256	11870

Hospital Palliative Care

	New referrals	Re-referrals	Discharges	Deaths	CNS visits	Phone calls
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2015	372	189	456	136	5310	1870
2016	391	166	377	150	3935	1022

Inpatient Unit

	New referrals	Re-referrals	Discharges	Deaths
2015	133	92	117	120
2016	158	55	66	129

1.2 Total Staffing in North West Hospice

Positions	WTE
Administration	7.2
Community Relations	2.00
Volunteer Coordinator	1.00
Medical Staff	5.00
Nursing Staff	31.9
Social Work	2.00
Cleaning/ Catering	2.00
Total	50.2

The following changes in staff positions occurred during 2016:

- Dr. Nigel Mc Carley, Interim Hospice Manager, departure in December 2016 and appointment of Ms. Nuala Ginnelly.
- Ms. Susann Von Mohlmann, Volunteer Coordinator resigned with appointment of Ms. Mary Forte to position in October 2016.
- Ms. Maria Mulligan, Social Worker resigned with the appointment of Ms. Lisa Marie Neary in September 2016.
- Ms. Lorraine Gallagher – Staff Nurse commenced work in Inpatient Unit in June 2016.

The North West Hospice would like to welcome all those new staff members in 2016 and to bid an appreciative farewell to staff that resigned and wish them every success for the future.

Structures and Governance

North West Hospice is a registered charity and a company limited by guarantee. It is governed by a Board of Directors. Our Board is responsible for corporate governance and works closely with our management team to deliver our vision, mission and strategic objectives. All our Directors are volunteer members who generously contribute their experience, knowledge, and resources to ensure that North West Hospice is effectively run.

The Board of Directors of North West Hospice is:

Chairperson- Mr. Jim Callaghan

Vice- Chairperson – Ms. Mary Curran (December 2016), Dr. Cathryn Bogan previously

Other Directors- Ms. Aisling Barry, Mr. Declan Hegarty, Mr. Pat Dolan, Ms. Dymphna Gorman, Mr. Noel Scott, Ms. Winifred McDermott, Dr. Fiona Quinn, Mr. Noel Walsh, Mr. George Chadda, Mr. John Mc Ateer.

Resignations from the Board in 2016

Dr. Cathryn Bogan – December 2016

New appointment to Board in 2016

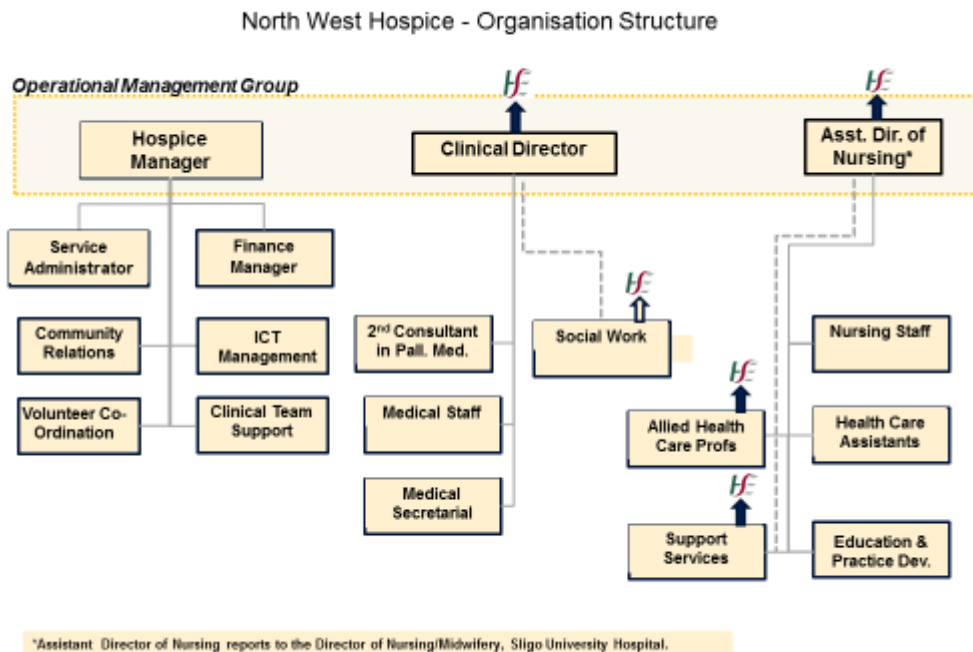
Mr. George Chadda – December 2016.

The business of the Board is supported by the following sub- committees:

- Board Development Committee

- Human Resource Committee
- Board representation on Hospice Quality/ Safety and Capital Plan committee

Our current Organisational Structure (as below)



Medical Statement

The first 6 months of 2016 commenced with a full complement of medical staff, 1 full time Consultant in Palliative Medicine, 1 Locum Consultant in Palliative Medicine, 1 WTE (whole time equivalent) Assistant Medical Director (working a 4 day week and taking 1 parental leave day per week), 1WTE SpR (final year) and 1 WTE Registrar post (2 doctors working 2 and 3 day's respectively).

In July 2016 we were unable to fill the SpR post (there are more training locations than trainee positions). This post was advertised as a Registrar post but again we were unable to fill this post. Negotiations took place with Medical Manpower in Sligo University Hospital and we were ultimately able to provide 2 Senior House Officer (SHO) positions. This is the first time that SHO's had worked in the in-patient unit and had implications for the Service. Previously all positions had been at Registrar level and as such Doctors had significant experience in managing patients however SHO's would need a lot of supervision and education. This had a knock on effect for the weekends on call as it required the Medical Consultant to come in and undertake ward rounds with the Junior SHO's. The two SHO positions were made up of 1 one year post and the remaining post is divided into 4 SHO's who came for a period of 3 months each.

The SHO that arrived for the full year was able to make more complex decisions after a number of months however the remaining SHO's were only coming for a 12 week period which meant that they required a lot of extra supervision and were unable to have family meetings unaccompanied.

Education: weekly Palliative Care Multidisciplinary Education Journal Club continues. Doctors also attend Medical Education in Sligo University Hospital on Friday lunchtime.

Training: Dr. Cathryn Bogan continues to be accredited as a Trainer for the SpR Scheme and although there was no SpR in place for the second half of 2016 it is hoped that July 2017 will see a return of the SpR to North West Hospice.

Members of the following Committees

- Hospice Operational Management Group- Dr. Bogan
- Hospice Policy Guideline Group- Dr. Cleminson,
- Chairperson of the Clinical Advisory Group to the National Palliative Care Programme- Dr. Bogan,
- Chairperson End of Life Care Committee, Sligo University Hospital- Dr. Bogan.
- Drugs & Therapeutics Committee, Sligo University Hospital- Dr. Cleminson.
- Hospice Volunteer Committee- Dr. Bogan.

Audit completed:

Re-audit of blood transfusions in North West Hospice.

Dr. Cathryn Bogan

Consultant in Palliative Medicine & Clinical Director for North West Hospice

Nursing Statement

North West Hospice Palliative Care Nursing Services extend across hospital, community and inpatient settings providing the delivery of palliative care. The nursing team continues to build on existing strong working relationships with our medical and nursing colleagues in Sligo University Hospital and the Community services. This helps to make the transition of patients from one setting to the other as seamless as possible.

Traditionally palliative care was developed to improve the quality of life of people with cancer but has extended now to the care of people with other life-limiting conditions and their families. The cornerstone of palliative care is good symptom control but by attending to psychological, social and spiritual needs of patients and those that matter to them we aim to provide a more holistic and person-centered approach to care. Our nursing team which includes nurse managers, clinical nurse specialists, nurses and health care assistants work in partnership with our medical, social work, allied health professionals and chaplaincy to provide that care.

Our Community Palliative Care team are based in North West Hospice building on Sligo University Hospital campus but they cover a large catchment area Sligo, Leitrim, South Donegal and West Cavan and work collaboratively with the GPs and Public Health nurses as well as supporting nurses in Community Hospitals and Nursing Homes. As Clinical Nurse Specialists (6 in total plus 1 Clinical Nurse Manager) they play a key role in advising, supporting and educating staff in all these areas in the delivery of a palliative approach to care. A key part of their role this year was supporting staff

with the introduction of a new syringe pump and the development of accompanying documentation. Members of the team have undertaken further studies in teaching, clinical audit and have attended national conferences as part of their commitment to professional development which enhances their ability to deliver evidence based care to the people that they are caring for. The total number of patients that receive Community Palliative care support is approximately 120 patients and their families each month.

The 8 bedded Inpatient Units has approximately 25 nursing team members, including 6 Health Care Assistants and a Clinical Ward Manager. The Inpatient Unit, in particular supports clinical placements for student nurses and nurses undertaking the Post Graduate Diploma in Palliative Care.

A significant development for the Inpatient Unit this year has been the approval of a new hospice build. This is included in the HSE Capital Plan and will ensure availability of single rooms for up to 12 patients. This will significantly improve provision of privacy, dignity and respect for all patients and their families into the future.

The Hospital Palliative Care Team consists of 3 Clinical Nurse Specialists dedicated to Sligo University Hospital. Their role is to advise nursing staff caring for patients requiring palliative care on general wards and to also meet and support patients with life-limiting conditions and their families.

Continuous professional development for staff is supported by an Education/Practice Development Coordinator. This process will be strengthened by staff engaging in professional development planning in conjunction with their clinical nurse managers. It is hope that this will enable North West Hospice to identify training needs and programmes to meet those.

The nursing and medical teams are involved routinely in clinical audits to monitor practice to ensure delivery of safe and quality care. Reports and minutes of all group meetings e.g. Policy Governance Group, Integrated Quality and Safety Group are available on the Shared Folder as are all policies for easy access for staff.

The North West Hospice is very fortunate to have a team of nurses who demonstrate a high level of nursing expertise and skills throughout the service. They are committed to their work and demonstrate exceptional flexibility to ensure adequate provision of staff when we are challenged by unexpected or unplanned events.

We endeavour to do our best for those we care for by learning how we can always improve on the care that we give.

Ms. Catherine Regan
Assistant Director of Nursing

Social Work & Bereavement Statement

There is one HSE employed Senior Social Worker and one Social Worker employed by the North West Hospice. During the period April to September 2016 the 2nd social work post was vacant however since September 2016, this full time permanent Social Worker has been appointed.

Social Workers are an integral part of the multi- disciplinary team providing a service to those receiving palliative care services in their home or in the Hospice Inpatient Unit. They provide supportive counselling emotional and practical support to patients and their families. Social Workers support people with life limiting conditions to adjust to their illness and understand its potential impact on their welfare and that of their families. The Social Work service also offers individual bereavement support to families whose loved one died under the care of North West Hospice. Advice and support is also available to parents on using developmental age appropriate communication with children.

A Remembrance Evening was held in September 2016, which provided families with an opportunity to reflect and remember their family member or friend who died under the care of North West Hospice.

Ms. Michelle O Reilly
Senior Social Worker

Quality/ Safety/ Practice Development Statement

North West Hospice supported education across Community, Inpatient and Hospital settings in relation to the safe delivery of medication via subcutaneous infusion following the introduction of McKinley T34 infusion pumps. In conjunction with Centre for Nursing and Midwifery Education we have delivered training on Palliative Care Needs Assessment Guidance, part of programme developed by the Clinical Programme for Palliative Care. This aims to support the delivery of palliative care at all levels so that patients can access this service no matter where they are, no matter the nature of their disease. Regular education within the service includes weekly journal clubs, case reviews as well as education supporting medical and nursing students wishing to gain some experience and knowledge of palliative care. Staff members have attended national study days and conferences in relation to specialist palliative care and provide feedback to colleagues unable to attend.

The revised terms of reference for our Policy Governance Group describes North West Hospice's commitment to ensuring appropriate governance structures in policy development are in place to enable staff deliver safe, compassionate evidence based care. This group has approved a total of 16 new of clinical and management policies including a policy on "Training, Professional Development and Support" for staff. Inherent in this policy is the commencement of a process of professional development planning for all staff. New staff quality initiatives include development of new nursing documentation to ensure assessment, planning, implementation and evaluation of nursing care on the Inpatient Unit is supported by evidence based care plans. A comprehensive education

programme on pressure sore prevention has been completed by nursing staff on the Inpatient Unit following a tissue viability audit carried out in May 2016.

Quality and Safety are constant features across all arms of the service and these are coordinated through the work of the Integrated Quality and Safety Group. Key clinical and administrative personnel, including a representative of the Board of Directors meet quarterly to review all clinical incidents, implement quality initiatives recommended post clinical and other audits etc. and report on progress towards achieving National Standards for Safer, Better Healthcare.

An inherent part of the quality function is focussed on what service users think of the service and on actively seeking their views on how we can deliver the type of service that best meets the identified needs of the people we serve. 2016 marked our commitment to conducting an annual survey of service users to ascertain just that. The tool we use is our Comment /Feedback Form. This is a simple form available in the Inpatient Unit for people to complete and place in our Comment Boxes. This will be posted out to a random sample of service users requesting feedback. Results will form part of this report in the years ahead and will inform future service development.

Some of the comments from 2016 include the following:

“All I can say is the Medical, Nursing, Reception, Volunteers make this place feel safe, special and I personally can never do enough or say enough to thank “each and every one” (Family member)

“To each and every member of staff, volunteers and priest from the bottom of our hearts a massive, massive “Thank You”....you made mother and our entire family so comfortable and peaceful...we will always remain indebted to you all....” (This was signed by 9 family members)

““I liked the harp, the new photographs are lovely...the care was very much appreciated by all concerned...” (Family member)

The service received 1 written complaint in 2016. This complaint was dealt with in accordance with our Complaints Policy and is now resolved.

We will always strive to ensure that our values are at the core of all we do as we endeavour to develop a service that truly fits the needs of the people we are caring for.

Ms. Hazel Smullen

Quality/ Safety/ Practice Development Coordinator for North West Hospice

Volunteer Service Report

The Volunteer Programme was initiated in January in 2012 and since then has gone from strength to strength. Volunteers have become an integral, supportive part of our services throughout the various disciplines within North West Hospice. The main purpose of the Volunteer Services is:

. . . To support and enhance existing North West Hospice services by providing a wide range of skills and resources that will improve the quality of life of the People we care for and their families.

Volunteer participation supports North West Hospice (NWH) in accomplishing our goal of providing services in the most compassionate and cost effective manner possible. Volunteers contribute their unique talents, skills, knowledge and time. Our volunteers vary in age and bring with them a wide range of experiences, skills and genuine enthusiasm to support our organization for free. Many volunteers are retired professionals, who wish to keep their skills active, parents who have time to spare, students, and people who wish 'to give something back' after having been touched by the hospice in their own personal life.

Volunteers contribute directly to three different strands of our service:

Volunteer Programme – specific volunteer roles within the hospice environment

Special Projects – initiatives by outside groups/people to fulfil a particular need

Fundraising Volunteers/Supporters in the Community – local people who commit to on-going fundraising and awareness rising for the hospice

Table 2 presents a summary table of the Volunteer programme:

Volunteer Role	Number of Volunteers	Hours per Month
Reception Cover	52	300 + hrs.
Hospitality	5	32
Massage Therapist	3	16
Reflexologist	2	16
Musician	2	16
Beautician	1	flexible
Chiropodist	1	flexible
Hairdresser	1	8
Driver	2	flexible
Home baking	5	32
Gardener	1	10
Photographer	1	Flexible
Volunteer Collector	7	Flexible
Graphic Designer	1	Flexible
Collection Box Coordinator	2	Flexible
Community Massage Therapist	2	Flexible
Flower Arranging	1	8
Dog Therapy	1	8
Artists	5	8
Totals:	95	462

Ms. Mary Forte , Volunteer CoOrdinator

Fundraising Report

To maintain our current level of service, we must raise in excess of €1million every year from fundraising events, voluntary contributions, donations and bequests. Given the fact that our catchment area has a relatively small population of 110,000 people, this is a huge challenge and one which we can only meet through the generosity and goodwill of individuals and groups in the community.

2016 was an incredibly busy year for the Fundraising and Communications team at North West Hospice who raised €912,952, an overall increase of 9.5% on 2015. The work of the team is to organise North West Hospice led events and also to support North West Hospice supporters to run their own events. During 2016, the team supported in excess of 220 supporter initiated events. Typically, each of these events require the following support to be provided: letters of support, Gardaí permits, PR, Social Media, posters, attendance at events and cheque presentation

With regards to the North West Hospice led events, 2016 was a very successful year with the overall income from these events up 22.7% on the previous year. Some of these events such as our flag days were up as much as 130% on previous years. The 2016 North West Hospice coffee morning brought in €110,396 which is technically over €1 for every member of our population which is an amazing result and is actually the highest income from Hospice coffee mornings nationwide per head of population. This is testament to the amount of loyal supporters we have in our community and we

are incredibly grateful to all our donors, supporters and volunteers who made all of the above possible

In 2016 North West Hospice initiated some new strands of fundraising which have not been previously pursued such as an active Tax back campaign, a memorial walk and memory tree at Christmas in both Sligo and Leitrim. We have also initiated and grown links with Corporate Donors both in our area and further afield. A firm foundation has been built from which to further develop these activities that have proven successful with other Hospices.

The move to the Hospice Centre in Wine Street, Sligo in late 2015 has had a positive impact on the process of developing an effective department. The feedback from the community has been that they feel that we are much more accessible now as they feel that they can drop in to make donations or volunteer their support at any time. The additional space has ensured that we can more effectively facilitate flag days etc. as we have a volunteer friendly space to work from.

On behalf of all those who use North West Hospice services, their families and friends we would like to extend our most grateful thanks to all our supporters. Our generous supporters and donors continue to be at the heart of all that we do at North West Hospice. Thanks to their continued compassion and commitment we can continue to provide excellent, loving care to all our patients, residents and their families.

Ms. Cathryn O Leary & Ms. Bernadette Mc Garvey
Community Relations Coordinators

Strategic Plan 2016-2020 – Progress in 2016

Mr. John Hennessey, HSE National Director for Primary Care officially launched the North West Hospice 5 years Strategic Plan 2016-2020 on the 18th August 2016. Eight objectives were identified. The progress to date on all eight objectives is outlined in below table.

1	To reaffirm our commitment to our patients and their families, ensuring that our standards of specialist palliative care and associated holistic support are delivered at the highest level			Progress in 2016
<ul style="list-style-type: none"> ■ Regularly review and evaluate the provision of patient care, incorporating the views of patients, families and healthcare professionals, to ensure its quality and appropriateness 	<ul style="list-style-type: none"> ■ Three-yearly evaluations of each of our three main services ■ Results of evaluations included in our annual report 	<ul style="list-style-type: none"> ■ Review/evaluation of services each year ■ Results included in annual report 	<ul style="list-style-type: none"> ■ Self- assessment of standards “Towards excellence in Palliative care is on going ■ Activity is reviewed monthly and returned to HSE/ published in annual report ■ Incidents /complaints 	

			reviewed and standing item on Quality and Safety committee meeting
<ul style="list-style-type: none"> ■ We will run an annual survey of our stakeholders (patients, families, carers, staff, healthcare professionals and people in our wider community) to help us understand people's views on the work of the Hospice and our future priorities 	<ul style="list-style-type: none"> ■ Annual survey results reported on our website and within our published annual report 	<ul style="list-style-type: none"> ■ Annual survey and reporting 	<ul style="list-style-type: none"> ■ Facilities for feedback on Hospice site i.e. comment boxes ■ Complaints / feedback log form updated to record written and verbal complaints/ feedback
<ul style="list-style-type: none"> ■ We will engage with patients and their families in order to understand the perspectives of those who use our services and to discuss future priorities for North West Hospice 	<ul style="list-style-type: none"> ■ We will establish and implement a mechanism for engagement 	<ul style="list-style-type: none"> ■ Engagement to commence by early 2016 	<ul style="list-style-type: none"> ■ Survey criteria agreed
<ul style="list-style-type: none"> ■ We will review the range of spiritual support provided within North West Hospice on an inclusive basis, recognising the diversity of those who use our services, and make enhancements or changes as necessary 	<ul style="list-style-type: none"> ■ Review and recommendations will be brought to the Board and an appropriate implementation process commenced 	<ul style="list-style-type: none"> ■ Review and recommendations by early 2016 ■ Implementation from early 2016 onwards 	<ul style="list-style-type: none"> ■ Recruitment of 2nd Social Worker ■ New Head of chaplaincy since late 2016 in Sligo University Hospital linking with North West Hospice

2	To increase the size of our inpatient unit and to redevelop the physical infrastructure of the Hospice in line with best practice in palliative care	Progress in 2016
<ul style="list-style-type: none"> ■ We will examine the demand for inpatient palliative care services within our region, in order to inform our analysis of the optimum size of 	<ul style="list-style-type: none"> ■ Analysis to be included in formal Business Case to the HSE 	<ul style="list-style-type: none"> ■ Business case submitted to HSE Q1 2016 ■ Formal response from HSE by Q2 of 2016 <p><u>If approved (tentative)</u></p>
		<ul style="list-style-type: none"> ■ Briefing Document and accommodation schedule submitted to HSE Estates. ■ Tender process for design team

<p>the North West Hospice in-patient unit</p>		<p>timescales only):</p> <ul style="list-style-type: none"> ■ Development control plan 2016 ■ Detailed design / planning 2017 ■ Construction 2018-19 ■ Opening of new North West Hospice 2019-2020 	<p>commenced and to be completed in early 2017</p> <ul style="list-style-type: none"> ■ Design team to be in place in approximately 3 months from time of tender process commenced
<ul style="list-style-type: none"> ■ We will submit a formal business case to the HSE in respect of the capital funding required for our proposed redevelopment, options 	<ul style="list-style-type: none"> ■ Submission of formal Business Case to the HSE 	<ul style="list-style-type: none"> ■ Board sign-off of Business Case and submission to HSE during Q2 of 2016 	<ul style="list-style-type: none"> ■ Capital plan approved on HSE National Development plan for 2021. Discussions on going to escalate this to 2018
<p>3</p>	<p>To provide a palliative care service in all areas of our work – within our in-patient unit, within Sligo University Hospital, and within our community palliative care teams – which is in line with international best practice</p>		<p>Progress in 2016</p>
<ul style="list-style-type: none"> ■ We will deliver palliative care services in line with the annual Service Plan agreed with the HSE 	<ul style="list-style-type: none"> ■ Service Plan to be agreed with the HSE and signed off by both parties 	<ul style="list-style-type: none"> ■ Final sign-off by end of Q2 annually 	<ul style="list-style-type: none"> ■ As per Service level agreement with the HSE
<ul style="list-style-type: none"> ■ We will ensure that we are appropriately resourced with senior clinical staff, to reflect our growing caseload and complexity of work 	<ul style="list-style-type: none"> ■ We will aim to recruit a second full-time Consultant in Palliative Medicine ■ We will aim to have a dedicated Assistant Director of Nursing in position on a full-time, dedicated basis 	<ul style="list-style-type: none"> ■ Confirmed by end of Q2 2016 ■ Confirmed by end of Q2 2016 	<ul style="list-style-type: none"> ■ Discussions on-going with local and national HSE to approve 2nd post as permanent post ■ Replacement post maintained 0.5. For on-going review.
<ul style="list-style-type: none"> ■ We will examine best practice in palliative care within each of our care settings as part of on- 	<ul style="list-style-type: none"> ■ We will implement “Towards Excellence in Palliative Care Self-Assessment tool” against the “National Standards for Safer Better Healthcare”, 2014 	<ul style="list-style-type: none"> ■ Self-assessment complete by end of Q2, 2016 ■ Quality 	<ul style="list-style-type: none"> ■ On-going self-assessment in collaboration with National Committee led by Hospice Manager and the Quality & Safety

<p>going Quality and Safety / Training and Education initiatives</p>	<ul style="list-style-type: none"> ■ Agreed Quality Improvement recommendations from self-assessment brought to the North West Hospice executive and Board, and prioritised as appropriate ■ Service improvements will be reported in our Annual Report 	<p>Improvement plans for all three care settings will be progressed and completed Q2 2016</p> <ul style="list-style-type: none"> ■ On-going self-assessment to continue to monitor progress ■ Annual: Included in Annual Report Q2 2016 	<p>/Education Coordinator</p> <ul style="list-style-type: none"> ■ Included in Annual Report under Quality/ Safety Report
<ul style="list-style-type: none"> ■ We will continue to work in close partnership with our colleagues in Sligo University Hospital, and with GPs, nurses and other health professionals across the North West, to ensure that we provide a highly integrated service across all aspects of care and all care pathways 	<ul style="list-style-type: none"> ■ Partnership working and service integration will be specifically reported in our Annual Report 	<ul style="list-style-type: none"> ■ Annual: Included in Annual Report Q2 2016 	<ul style="list-style-type: none"> ■ Included in annual report under "Quality/ Safety " Report

<p>4</p>	<p>To consider new opportunities to develop our services and capacity to fulfil our mission and vision, either individually or in partnership with other organisations</p>		<p>Progress in 2016</p>
<ul style="list-style-type: none"> ■ We will continue to engage with Co-Operation and Working Together (CAWT) in respect 	<ul style="list-style-type: none"> ■ On-going contact and reporting to the North West Hospice Board on progress 	<ul style="list-style-type: none"> ■ Annual report to the Board 	<ul style="list-style-type: none"> ■ On-going engagement with HSE projects , no specific

<p>of possible cross-border initiatives</p>			<p>progress to report on CAWT in 2016</p>
<ul style="list-style-type: none"> ■ We will liaise with other organisations providing services which are relevant or complementary to palliative care 	<ul style="list-style-type: none"> ■ Engagement with other service providers, and signing of Memoranda of Understanding in relation to complementary work / joint projects 	<ul style="list-style-type: none"> ■ On-going over life of strategy 	<ul style="list-style-type: none"> ■ On-going
<ul style="list-style-type: none"> ■ We will further develop relationships with key decision-makers in relation to services which North West Hospice can offer 	<ul style="list-style-type: none"> ■ Regular engagement and six-monthly “strategic contact” report by the Hospice Manager to the North West Hospice Board 	<ul style="list-style-type: none"> ■ Six-monthly report to the Board 	<ul style="list-style-type: none"> ■ On-going engagement with MDT in North West Hospice to ensure resources can meet the demand.

5	To cherish and develop our staff and volunteers so that they can continue to provide the highest levels of compassionate care to patients and their families			Progress in 2016
<ul style="list-style-type: none"> Organisational development plan approved by North West Hospice Board 	<ul style="list-style-type: none"> Development and implementation of an organisational development plan for North West Hospice 	<ul style="list-style-type: none"> End of Q2 2016 – development of plan On-going during 2016 – implementation of plan 	<ul style="list-style-type: none"> Organisational Structure in place, further work on going to continue to foster clear accountability structures with North West Hospice and HSE 	
<ul style="list-style-type: none"> Training and Development Plan 	<ul style="list-style-type: none"> We will enhance the training and development of Board directors, management, staff and volunteers 	<ul style="list-style-type: none"> Annual submission to North West Hospice 	<ul style="list-style-type: none"> Training and development for Board of Directors on going Training/ Education policy for staff / Volunteers agreed and approved. Further training to be identified in 2017 	
<ul style="list-style-type: none"> Improved data collection mechanisms identified and developed that can improve delivery or affect services 	<ul style="list-style-type: none"> Develop management information system for strategic decision-making 	<ul style="list-style-type: none"> End of Q2 2016 	<ul style="list-style-type: none"> Completed in 2016 	
<ul style="list-style-type: none"> Staff feedback mechanism 	<ul style="list-style-type: none"> Safe and supportive working environment for North West Hospice staff 	<ul style="list-style-type: none"> To be implemented by end Q1 2016 and on-going over life of plan 	<ul style="list-style-type: none"> Staff Support/ Training / Education Policy agreed and approved in 2016 with on-going review. Access to Occupational Health for all staff Professional Development plans in place 	

6	To ensure the financial sustainability of North West Hospice as an organisation and of its services to people with life-limiting illness			Progress in 2016
<ul style="list-style-type: none"> In order to focus on the sustainability of North West Hospice as a whole, we will assess the breakeven position of each of our main activities on an annual basis 	<ul style="list-style-type: none"> Annual breakeven review of each activity area, and reports to the North West Hospice Board 	<ul style="list-style-type: none"> Q3 / Q4 of each year, in line with annual business planning process 	<ul style="list-style-type: none"> Detailed Financial reports provided to Board of Directors at each Board meeting. 	
<ul style="list-style-type: none"> So that we may ensure our future financial sustainability, diversify our income streams and 	<ul style="list-style-type: none"> Income Generation Plan with clear revenue targets from 	<ul style="list-style-type: none"> Sign-off of Income Generation Plan by North West Hospice 	<ul style="list-style-type: none"> Events and targets agreed with lead 	

<p>establish new revenue sources, we will develop an Income Generation Plan for approval by the Board</p>	<p>each of our identified activity areas.</p>	<p>Board no later than end of Q1 2016, and each succeeding year on an annual basis (ideally by end Q3 in succeeding years).</p>	<p>responsibilities assigned to Community Relations Coordinators</p> <ul style="list-style-type: none"> ■ New revenue streams targeted.
<ul style="list-style-type: none"> ■ We will engage with the HSE in respect of the capital funding required for our proposed redevelopment 	<ul style="list-style-type: none"> ■ Submission of formal Business Case to the HSE 	<ul style="list-style-type: none"> ■ Board sign-off of Business Case and submission to HSE during second half of 2016 	<ul style="list-style-type: none"> ■ Request to increase funding in line with proposed Lansdowne Road increases ■ Capital plan approved on HSE National Capital Plan
<ul style="list-style-type: none"> ■ We will decentralise our premises to establish an accessible centre in Sligo Town, which can house our fund-raising and non-clinical office space 	<ul style="list-style-type: none"> ■ New town centre premises open 	<ul style="list-style-type: none"> ■ By end of Q1 2016 	<ul style="list-style-type: none"> ■ Progressed

7	To ensure the organisation is governed and managed in accordance with best practice and in compliance with all regulatory and statutory requirements			Progress in 2016
<ul style="list-style-type: none"> ■ We will work on the development of a succession plan for the Board to ensure continuity and the managed replacement of Board members reaching the end of their term of office 	<ul style="list-style-type: none"> ■ Board succession plan to be drafted and discussed annually 	<ul style="list-style-type: none"> ■ Annual 	<ul style="list-style-type: none"> ■ In progress 	
<ul style="list-style-type: none"> ■ We will continue to strengthen the Board and our governance arrangements, including introducing new Board members with skill sets and experience which can add real value 	<ul style="list-style-type: none"> ■ New Board members to be added as current members reach the end of their terms of office, and Board makeup to be kept under review 	<ul style="list-style-type: none"> ■ On-going 	<ul style="list-style-type: none"> ■ New Board Member and resignation of a Board member in Q4 2016 	
<ul style="list-style-type: none"> ■ We will move to full compliance with the new regulatory arrangements for charities 	<ul style="list-style-type: none"> ■ Quarterly compliance report to North West Hospice Board by Hospice Manager 	<ul style="list-style-type: none"> ■ Quarterly 	<p>Governance update is standing item at each Board meeting</p>	
<ul style="list-style-type: none"> ■ We will be transparent and open regarding how money is spent within North West Hospice 	<ul style="list-style-type: none"> ■ Annual report detailing our income and expenditure, in line with best practice and regulatory standards for charities 	<ul style="list-style-type: none"> ■ Annual 	<ul style="list-style-type: none"> ■ Annual report detailing all audited accounts 	

<ul style="list-style-type: none"> ■ We will engage with HIQA, the HSE and Department of Health as appropriate in respect of future licensing 	<ul style="list-style-type: none"> ■ Report and recommendations to North West Hospice Board as necessary 	<ul style="list-style-type: none"> ■ On-going; to be formally tabled for discussion at least annually 	<ul style="list-style-type: none"> ■ Self-assessment of “Towards Excellence in Palliative Care” standards on going and reported back to Board of Directors
<ul style="list-style-type: none"> ■ We will maintain our formal risk register and update it monthly 	<ul style="list-style-type: none"> ■ Formal Risk Register presented quarterly to NWH Board 	<ul style="list-style-type: none"> ■ Complete by end Q2 2016 	<ul style="list-style-type: none"> ■ Risk Register standing item at Board meeting
<p>8</p>	<p>To develop our organisational structure, resources and capacity in order to enable North West Hospice to deliver all aspects of our strategic plan over the next five years</p>		<p>Progress in 2016</p>
<ul style="list-style-type: none"> ■ Recognising that our organisational structure has current capacity constraints, we will strengthen our executive and administrative structure / resources by making targeted changes and additions to our structure ■ Continuous monitoring 	<ul style="list-style-type: none"> ■ Report and recommendations to North West Hospice Board ■ New positions in place via formal recruitment process 	<ul style="list-style-type: none"> ■ New positions in place by end Q2 2016 	<p>Further organisational structural review in 2017 in collaboration with Board of Directors and HSE.</p>
<ul style="list-style-type: none"> ■ We will ensure that we are appropriately resourced with senior clinical staff, to reflect our growing caseload and complexity of work (in line with Objective 3 above) 	<ul style="list-style-type: none"> ■ We will aim to recruit a second full-time Consultant in Palliative Medicine ■ We will aim to have a dedicated Assistant Director of Nursing in position on a full-time, dedicated basis 	<ul style="list-style-type: none"> ■ Confirmed by end of Q3 2016 ■ Confirmed by end of Q3 2016 	<ul style="list-style-type: none"> ■ 2nd Consultant in Palliative Medicine in post, awaiting permanent approval from HSE. ■ 0.5 Assistant Director of Nursing in post
<ul style="list-style-type: none"> ■ We will ensure that our organisation has effective reporting, internal control and accounting systems 	<ul style="list-style-type: none"> ■ Review and reports on the systems of internal control, reporting and accounting to ensure that they are sufficient to support North West Hospice to the best standards 	<ul style="list-style-type: none"> ■ Initial report by end of Q2 2016 followed by a bi-annual review 	<ul style="list-style-type: none"> ■ “Towards Excellence in Palliative Care” standards adopted from HIQA “National Standards for Safer Better Healthcare” determines same, work on going.
<ul style="list-style-type: none"> ■ Using the scorecard presented in this strategic plan, we will develop performance management arrangements to help us monitor and report 	<ul style="list-style-type: none"> ■ Agree performance management targets and reporting mechanism 	<ul style="list-style-type: none"> ■ Board agreement by end of Q1 2016 ■ Monthly (internal); 	<ul style="list-style-type: none"> ■ Progress report as standing item at BOD meeting. ■ Progress in Annual Report

progress and achievement against targets	■ Reporting of achievement against targets	Annually (external reporting)	2016
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