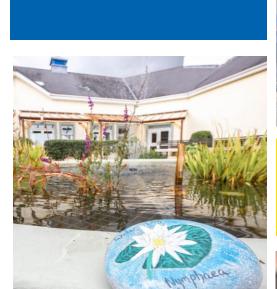
Hospice IOM Statement of Purpose









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Alternative Formats

This guidance can be made available in other languages and in alternative formats e.g. large print. If you require an alternative format please contact admin@hospice.org.im, or telephone 647400.

The Philosophy and Ethos of Hospice Isle of Man

Hospice Isle of Man is a registered charity that started in 1983. It is governed by a Board of Governors and managed by the Chief Executive and Senior Managers. It is the only provider of specialist palliative care on the Isle of Man and our services are available at no cost to patients and families. We are committed to providing care to anyone on the Island with a condition that is terminal or life-limiting.

In October 2018 we published our Hospice Strategy which explains our purpose and goals:



Our Values – how we will deliver care



Statement of Purpose: Last Review Date January 2024

Our values were developed by our staff who talked to patients, their families, volunteers and visitors. We are proud of our values and we wanted to make it clear to everyone how we will deliver our services. To support our strategy we have developed the following diagram. It was produced from interviews with individuals where they told us what was important to them when receiving care.

What matters to you:



'Adapted from the 2017 national voices person –centred care report'

We apply these principles when we deliver our care and when we are planning new services.

Your Rights

You have the right to be treated with respect, dignity and care in a safe and secure environment. To enable and support this, we have written policies and procedures in place covering every aspect of our Services. Please let us know if you require a copy of any Hospice policy.

Person Centred Care

Care Plans

All staff carry out holistic assessments in discussion with patients. Families will be involved in care planning if the patient wishes this to happen – '*The people who are important to me are welcomed, listened to and made to feel 'part of the team'*. Individual care plans are drawn up containing goals that the patient would like to achieve – '*we work to my goals and the quality of my life and death'*.

The individual's care plan is documented in the patient's health record and this provides a guide to staff providing care. In the In-Patient Unit, care is reviewed by the registered nurses in discussion with the medical team on a daily basis.

Privacy and dignity for our patients

Staff at Hospice are committed to ensuring that all patients are treated with respect and that their dignity and privacy are maintained at all times. We want all of our patients to feel that they are safe and treated with compassion and that their values, beliefs and personal relationships are respected. This applies to all patients regardless of their age, gender, ethnicity, religious, social or cultural backgrounds, or their psychological or physical requirements.

Our Privacy and Dignity Policy has been developed in line with the 'Essence of Care – Patient Focussed Benchmarks for Clinical Governance' (NHS Modernisation Agency, April 2003), together with the Royal College of Nursing 'Defending Dignity – Challenges and Opportunities for Nursing' (2008).

Patients at Hospice are cared for in single rooms with en-suite toilet and showering facilities. All staff knock before entering a patient's room. A 'Do Not Enter' sign is placed on the door when the patient is being examined or receiving a treatment, or having private time. Every patient is addressed by their preferred name and all staff seek consent prior to any personal interventions or procedures.

We ensure that any patient who does not speak or understand English has access to an interpreter in a timely manner – within 2 hours if possible. Written translation aids are available for all patients.

We encourage patients to inform us of any preferences that they have, and as a team we always endeavour to meet their individual needs.

Spiritual Care

The Hospice Pastoral Care team is available to provide spiritual care to patients, family members, staff and volunteers whether their spirituality is expressed through a faith or religious belief system or not. Hospice provides regular visits from Volunteer Chaplains to support patients in worship, prayer and reflection, including Communion in the Hospice Multi-faith Space or at the bedside as requested.

- We provide 'special occasion' services when necessary.
- We can facilitate family celebrations where appropriate i.e. baptisms, marriages, christenings and thanksgiving.

Care provided by Hospice Isle of Man – Adult and Children's Services

Hospice Isle of Man is available 24 hours a day, 365 days a year. Our multi-professional team offers individualised care in the Hospice, hospital or in the patient's own home – including nursing and residential homes – 'care is provided in the place of my choice'. We will apply these principles when we deliver our care and also when we are planning new services.

Access and referral to our services:

- Patients who have active and progressive disease where the focus of care is palliation of relief from pain and other distressing symptoms and quality of life. This can be malignancy (cancer) or a nonmalignant condition such as heart failure, respiratory failure, renal failure or a progressive neurological condition
- The patient has specialist palliative care needs
- The needs of the patient can be met by services provided by Hospice Isle of Man and that the Hospice is the most appropriate agency to provide these services

Referrals to our services can be made by General Practitioners, Hospital Consultants, Clinical Nurse Specialists (including those working for the Older Person's Assessment Service), Long Term Conditions Co-Ordinators, Senior District Nurses and Senior Allied Health Professionals.

The services we provide include:

| In-Patient Unit (IPU) – 11 beds: | Our purpose-built IPU provides specialist palliative and end of life care for patients on the Hospice Caseload; admissions may be for complex symptom management or Terminal care, 9 beds allocated to these care paradigms. Two of Hospice IPU's inpatient beds are funded for Respite care, this can be booked in advance or be utilised short notice due to urgent care needs. Respite beds are available to individuals on the Hospice Caseload. 24 hour nursing and medical support is provided to IPU patients. The unit is staffed by trained nurses specialising in palliative care and healthcare assistants who also have knowledge and experience in palliative care. The IPU has been designed to provide a homely atmosphere and has 11 single rooms and a step-down suite, each with smart TV, radio, en-suite toilet and shower and a covered patio that opens out to the peaceful and beautiful gardens. Families and close carers can visit at any time, based on the patient's |
|----------------------------------|--|
| Hospice Medical Team: | wishes. Other visitors are encouraged to visit between 2-8pm. Our medical team provide daily medical care for patients in IPU as well as supporting our other clinical services in Rebecca House, Noble's Hospital, the Scholl Wellbeing Centre and the Palliative Care Clinical Nurse Specialist Service. The medical team provide assessments in hospital or in the community. They are senior clinicians with qualifications and expertise in palliative care. |
| Medical Outpatients Clinic: | Patients with difficult to control symptoms can be referred to the Medical Outpatient Clinic within Hospice where they will be assessed by a senior doctor with expertise in palliative care. Changing medication or alternative interventions might be recommended to relieve symptoms. |
| Your Hospice Your Way (YHYW) | YHYW deliver a Programme of sessions operating as weekly "Drop In" services at Hospice and at a satellite venue in Port Erin |

| Day Therapy Centre | The Day Therapy Centre deliver weekly day sessions which offer patients an |
|------------------------------|--|
| | opportunity to socialise, receive support and acts as respite for their carers. |
| | Individuals must be referred to Hospice to access these sessions. |
| Complementary | Patients can experience a range of therapies as an out-patient or during |
| Therapies: | their stay as an in-patient. Our therapies include aromatherapy, massage, |
| | reflexology, relaxation, acupuncture and counselling. Therapy sessions are |
| | also available for bereaved relatives and carers. |
| Rehabilitation Team: | Our Rehabilitation Team consists of an Occupational Therapist, a |
| | Physiotherapist and a Rehab Support Worker. The service provides |
| | rehabilitation to the in patients and those in the community. In addition it offers: |
| | Fatigue and Breathless Programme (FAB) |
| | Stress Management Programme |
| Occupational | Occupational Therapy aims to maintain and, where possible, increase a |
| Therapy: | patient's independence in everyday tasks such as washing, dressing, eating |
| тнегару. | and domestic activities. This is achieved by retraining and by the use of |
| | specialist equipment. Creative and therapeutic activities adapted to the |
| | individual's abilities are also used to improve the patient's quality of life. |
| | Physiotherapy aims to maximise mobility and to maintain functional |
| Physiotherapy: | independence. By helping to relieve physical symptoms resulting from life- |
| i iiyolodii ci apyi | limiting illness, the physiotherapist plays an important role in helping to |
| | improve the quality of life for patients and to 'support people to be |
| | independent'. |
| | Treatment is planned following a comprehensive assessment aimed at |
| | achieving patient-led goals. As an illness progresses, the physiotherapist |
| | supports the individual by adapting treatments to suit their changing needs. |
| Admiral Nurse Service | The ANS are specialists in dementia care, working with families and people |
| | affected by dementia, particularly during complex periods of transition. |
| | Their role is to enable people with dementia to live well and die well, whilst |
| | providing high quality, bespoke support to the carers to improve their |
| | wellbeing and quality of life |
| Lymphoedema: | The Lymphoedema Service treats patients with secondary lymphoedema |
| Dallia Lian Cana | due to cancer and the side effects of its treatment. |
| Palliative Care | Ensuring that patients can access care in the place of their choice is |
| Clinical Nurse | important. For many this is at home, including residential and nursing |
| Specialists: | homes or the hospital. Our Clinical Nurse Specialists give advice on the management of pain and other distressing symptoms and prescribe |
| | medication to help alleviate these symptoms. They also provide |
| | information, psychological support and education to patients, their families, |
| | carers and other professionals. This service is available 7 days between |
| | 9am and 5pm. |
| Hospice at Home: | Nursing care is provided to support patients to remain and die at home if |
| • | that is their preference. Care can be provided during the day and/or |
| | overnight, depending on the patient's and carer's needs and the overall |
| | demand on the service. |
| Psychological Team: | Offers psychological support to patients and their families. Visits can be |
| | arranged at the Hospice or in the patient's own home. The team give |
| | people the opportunity to express themselves and discuss their experiences. |
| Young Person's | Provides pre and post bereavement counselling for children and young |
| Support Service: | adults up to 21 years; and counselling for children and young people |
| | supported by Rebecca House. Sessions can be provided at home, Jade's |
| Cocial Wards | place within Hospice or at school. |
| Social Work | Provides patients, families and carers with, practical, financial and emotional |
| Assistant: | support. |

| Bereavement Support: | Not everyone needs bereavement help, however support from Hospice is available once a loved one has died with the aim of helping people to adjust to a new way of living. Help can be given either on a one-to-one basis or in a group at hospice or at home. |
|--|---|
| Our pastoral care team | Offers spiritual care and support to all patients, families, carers and staff regardless of faith, religion or beliefs. |
| Care provided by Rebecca House Children's Services | Rebecca House (RH) is the children's wing of Hospice and provides care for children and young people from birth up to the age of 18 who have a life-limiting or life-threatening illness. It is a purpose-built facility that offers a home from home environment in which physical, emotional, recreational and spiritual care is offered in a way that is appropriate for the child, young person and family. RH provides respite, palliative and end of life care to help patients and their families to cope with their illness and lead as full and normal a life as possible. Families can choose to have care at RH, at their Home or a combination of locations to best meet their needs. The team at Rebecca House includes Registered Children's Nurses, Registered Nurse (Learning Disability), Nursery Nurses and HCA's. Medical support is provided from the Hospice Medical Team. Rebecca House care hours and frequency of overnights vary in line with respite requests and emergency care needs. In addition to these services the Rainbow Room Cold Bedroom facilitates the care of children and young people after death allowing families to spend additional time with their child or young person and enables staff to provide support in early bereavement. RH has a family apartment on the 1st floor for families wishing to stay in the unit during end of life care admissions or care after death. |
| Education | Hospice Isle of Man leads the way in on-island palliative care education. It supports the continuous professional development of its staff and provides education for all those professionals involved in the delivery of high quality palliative care on the Island. Staff have access to a wide range of courses & conference on and off Island. |
| People & Organisational Development | It is important to ensure that we always have the right staff with the right skills in the right place to deliver our care. Recruitment and workforce planning are key to this as well as ensuring that all of our team continually demonstrate our values. |
| Finance & Operational Services | The finance team is responsible for producing clear and accurate management accounts for the Finance Committee and the Board of Governors. They work closely with the Chief Executive to manage the financial budget. All financial functions are carried out in accordance with the Finance Policy agreed by the Board of Governors. The operational services team are responsible for the effective running of the Hospice building, its maintenance, cleaning and catering facilities. |
| Marketing & Fundraising | This team is totally focussed on, and driven by, one core aim – raising funds to support the £6.8m needed to run our services each year. These funds are raised through events, donations, regular giving, in-memory donations and through legacies. |
| Administration Team | The Hospice is supported by an administration team. |
| Volunteer Services | Around 450 volunteers provide exceptional support within Hospice and its retail outlets. |

Keeping You Safe:

Patient records

All staff treat information about patients and their families in a confidential manner and do not share information without the patient's consent. Paper records are stored in locked cabinets in a secure room with key pad access. In October 2017 we introduced electronic patient records. All clinical staff complete information governance training before being given (role-based) access to this system.

Storage and Administration of Medicines

On the IPU and Rebecca House, the responsibility for the safekeeping of the medicines rests with the appointed Nurse in Charge. All medicines are stored in a secure locked pharmacy room, where access is by keypad code number. There are separate lockable cupboards within this room as follows:

- Controlled Drugs Cabinet (that complies with the Misuse of Drugs (Safe Custody) Regulations 1973)
- Internal medicines cupboard
- Refrigerator for medicines
- There is also a lockable medicine trolley stored in this room

All staff adhere to the 'Safe Handling of Medicines' Policy.

Use of medicines

Many medicines prescribed and administered subcutaneously in palliative care are used outwith the terms of their Manufacturing Licence (off label use) and a small number are unlicensed. Medication used in this way is, however, accepted best practice and is evidenced in, and supported by, textbooks e.g. Palliative Care Formulary and guidelines such as the Isle of Man End of Life Guidelines (2020).

Our fire precautions and emergency procedures

It is the policy of Hospice Isle of Man to ensure that it complies with the statutory fire provisions and maintains the safety of its patients, visitor's staff, and volunteers. Our fire policy has been developed with reference to the Health and Safety at Work Act 1974, Health and Safety Risk Assessments Code of Practice, Building Control Act 1991, Fire Precautions (Amendment) Act 1992, Fire Code (Policy and Principles), and the Health Technical Memorandum (HTM) 81 – Fire Precautions in New Hospitals.

We operate a fire alarm test every Monday at 2pm. If the fire alarm is heard at any other time it is not a test and staff, who all undergo mandatory training in Hospice Fire procedure, follow the procedure described in our Hospice Fire Evacuation Procedure SOP (Keeping you safe).

Smoking/Use of electronic cigarettes

Hospice has a smoke free policy.

- The designated smoking shelter at the back of the Hospice building is the only area where smoking or use of electronic cigarettes for both patients and visitors is allowed.
- Due to security issues, access between 10pm-6am to this shelter must be agreed with the nurse in charge.
- All users of the smoking shelter do so at their own risk.
- Those requiring assistance or supervision whilst smoking will need a relative or friend to help them. Nursing staff are not expected to assist or supervise patients who smoke at any time.

Our adult and children's safeguarding policies

Hospice Isle of Man has a core responsibility to provide safe, effective and high quality care. We recognise that safeguarding is everyone's business and that every individual in the organisation has an obligation in ensuring the protection of vulnerable adults and children. We believe all adults and children have the right to freedom from harm and we take the appropriate measures to:

- Ensure that abuse does not occur within our service.
- Report all cases of suspected, alleged or identified abuse of adults, with whom we come into contact, to the Adult Protection Team, within the Department of Health & Social Care.
- Report all cases of suspected, alleged or identified abuse of children, with whom we come into contact, to the Isle of Man Safeguarding Children's Board and follow their procedures.
- Protect and support individuals where harm has been identified.
- Ensure multi-disciplinary involvement is undertaken, as appropriate/necessary
- All staff follow the Inter Agency Safeguarding Adults Adult Protection Policy 2018-2020
- All staff attend the recommended mandatory training for Safeguarding adults and children.
- Hospice has both Adult and Child Protection Policies which outline responsibilities and processes for managing safeguarding or protection concerns.

Therapeutic techniques (used and supervision arrangements)

Hospice has a Policy for Checking Professional Registration (keeping you safe) which is to ensure that a prospective employee is recognised by the appropriate regulatory body and that they have the right qualifications to undertake the duties required by the advertised post. There are currently eight regulatory bodies covering the health professions their four main functions which are:

- Establishing standards of competence, ethics and conduct.
- Establishing standards for training.
- Keeping a register of those who meet the standards.
- Dealing with registrants who fall short

This applies not only to our Doctors and nurses but also to our Allied Health Professionals (Physiotherapist, Occupational Therapist, Counsellors and Psychologists). Various complementary therapies are offered at Hospice, including aromatherapy massage, reflexology and reiki. Our Complementary Therapy team are members of the International Federation of Professional Aroma therapists (IFPA). All professionals have access to clinical supervision from a qualified member of their own profession with appropriate knowledge of a palliative care service

Feedback, Compliments and Complaints

Feedback and Compliments

It is important to all staff at Hospice Isle of Man that the service we provide is appropriate, professional and meets the needs of the individuals referred to us. As an organisation we welcome feedback or suggestions about our care /services from patients, their families and carers. We offer a number of ways people can feedback to us, e.g. Verbal feedback, written suggestions via our suggestion box in the IPU reception, written suggestions /complaints or through our feedback questionnaire 'What matters to you matters to us'. We keep a record of all the letters/cards of thanks, comments or complaints. Each year we have quality accounts available to the public detailing audits and feedback about our services. This includes any developments made to the service over the year.

What to do if you have a complaint

If you are not happy with any aspect of the care or service provided by Hospice Isle of Man, please let us know. By alerting us to a problem and giving us the opportunity to put it right, you are also helping other patients. As an organisation we undertake to treat all complaints seriously and will investigate them thoroughly. We guarantee that there will be no retribution following the complaint, we will acknowledge your concerns and give you a full explanation of what has happened and make every effort to learn from any mistakes or failures which have occurred. For further information please refer to our information leaflet 'Making a Complaint' available on our website (www.hospice.org.im).

Our Staff

Hospice Isle of Man Registered Provider, Chief Executive, Responsible Person and Registered Manager

| Registered Provider | Mr John Knight Chief Executive Hospice Isle of Man Strang, Douglas, IM4 4RP Tel: 01624 647400 | Qualifications: MBA 2010 ILM level 7 Leadership and Management 2012 BA sports studies 1986 Registration No: ROCA/P/0187A Type of Service: Independent Hospital/Hospice |
|---------------------|--|--|
| Responsible Person | Dr Ben Harris Director of Clinical Governance and Compliance Hospice Isle of Man Strang, Douglas, IM4 4RP | Qualifications: BSc(Hons)1986 MBChB 1989 MRCGP 1995DRCOG, 1992 Diploma in Palliative Medicine (with Distinction), University of Wales College of Medicine 1996 Diploma in Therapeutics (with Distinction), University of Wales, Dept. of Pharmacology 2002 Chartered Management Institute - Level 7 Post Graduate Diploma in Strategic Management and Leadership 2014 Teaching and Learning in the medical workplace Edge Hill University 2017 IHI Certificate in Quality and Safety 2017 GDPR practitioner Certificate 2017 |
| Registered Manager | Vicky Wilson Head of Children, Young People & Therapies Hospice Isle of Man Strang, Douglas, IM4 4RP | Qualifications: Registered Nurse (Child) BSc (Hons) Nursing PG Dip Palliative Care MSc Professional Practice ILM level 5 Leadership and Management qualification. |

We are regulated by the Registrations and Inspections Unit (R&I), part of the Department of Health & Social Care, who inspects our service on a regular basis. If you would like to read our latest report, please ask a member of staff or refer to the Registrations & Inspections website (click on Independent Hospitals).

https://www.gov.im/about-the-government/departments/health-and-social-care/registration-and-inspection-unit/inspection-reports

(please click Independent hospitals)

Training, staffing and qualifications

As a Hospice we recognise the importance of our own staff and volunteers receiving specialist palliative care training. All staff have access to a wide range of courses, conferences and study days on and off island. Our aim is to promote the highest quality palliative and end of life care for everyone through the development of knowledge, skills and attitudes. It is important that all professionals learn the core principles of palliative care, such as dignity, autonomy, good symptom management, psychosocial and spiritual care and their application in clinical practice.

In order to have a safe working environment for patients, their families, staff and volunteers, all staff and volunteers undertake mandatory training appropriate to their roles and responsibilities.. For further information on in-house and mandatory training please refer to our training prospectus (MeiTrent) or contact the Education Team.

| Qualifications you can expect our staff to have | | |
|--|---|--|
| Role | Number of staff As at 25/1/2024 | Qualifications expected for role |
| Chief Executive and Senior Managers | 7 | Academic, management and professional qualifications will be specifically related to their role |
| Medical Team | 2.65 WTE Rotational F1 doctors and GP trainees | Registered Medical Practitioners with qualifications and experience in palliative care |
| Specialist Pharmacist | 0.2 WTE | Specialist pharmacy qualifications |
| Registered Nurses and Registered Children's Nurses | 29.59 WTE | Registered General Nurses Registered Children's Nurses Registered Nurse – Learning Disability |
| Healthcare Assistants | 17.9 WTE | QCF Level 2 or 3 qualifications |
| Nursery Nurses NNEB | 2.0 WTE | NVQ Level 3 |
| Physiotherapist Occupational Therapist | 102 WTE | Registered Physiotherapist Registered Occupational Therapist Registered with Health & Care Professions Council |
| Admiral Nurse Service | 3WTE | Registered General Nurses |
| Psychological Therapists Bereavement Counsellors Young Person's Support Worker | 3.2 WTE | PhD Clinical Psychology Diploma in Counselling Diploma in Psychotherapeutic Counselling Diploma in Grief and Bereavement Counselling Registered with Health & Care Professions Council |
| Complementary Therapists | 1.04 WTE | All therapists have qualifications to deliver therapies Registered with International Federation of Professional Aromatherapists |
| Administration Team | 16.6 WTE | Qualifications will be specifically related to their role |
| Operational Support Team | 10.79 WTE | Qualifications will be specifically related to their role |

Reviews

This guidance is reviewed on an annual basis by the Registered Manager(s) and Responsible Person.