Appx C - Response from North London Hospice

16.01.24

• The Committee asked why there had been a higher number of closed bed days than the previous year, to 645 from 156. It was noted that this was due to refurbishment.

There had been a number of closed beds, due to the IPU being refurbished. We also had an outbreak of COVID at one point, and had to deep clean, and beds remained closed for a short period.

• The Committee noted that the number of complaints had increased from 15 to 21 over the past year, with eight complaints partially upheld - it was noted that the complaints listed included those related to retail and fundraising, as well as clinical work.

We have seen an increased number of complaints, due to improvements in our complaints management. Some concerns had turned into complaints. Some complaints had been upheld because our complaints management internal investigators operate under an open and transparent system, and they concluded that the complaint needed to be upheld. There were also a couple of complaints that had to be sent to us just before the 12 month period of the time they were allowed, so this may have happened in the previous year. We have looked at how this can be added to our data to make this clearer. (so it is added in the correct time period).

Moving forward we will be ensuring that we report on where the complaint has arisen from and this will be reported to all external bodies.

We also believe that now that COVID restrictions are over we are seeing people complain where necessary about any issues they have with their care.

 The committee noted that the Hospice continued to have staff shortages, although many of the reasons were part of a national trend and the Hospice's work on recruitment was ongoing.

This trend of staff shortages has continued Nationally, and we have filled our vacancies on the in-patient unit and in the community. We are continuing to improve on the way we work across our boroughs, and making sure that patients are seen in the most efficient way possible.

We have made improvements to the data we collect about if any staff shortages have an impact on patient care. – this does not seem to be the case.

 The committee commented that the colour chart showed poor performance on falls – though it was noted that the target set is high and the team is working hard on falls prevention.

Our benchmarking shows us that we are below the national standard for falls within a hospice environment.

We have implemented a new call bell system in our In-patient unit, and this has been beneficial in noting people more likely to have a fall and has allowed us to be more proactive in our response times to those at risk of falling.

• The Committee was disappointed that the staff vacancy rate was higher than usual though noted this was common across many sectors currently and that CLCH was working hard to recruit and retain staff.

Many of our vacancies have now been filled and this has allowed us to make further improvements to our patient care.

• The Committee was concerned that only 55% of the volunteer group surveyed felt that they had a positive impact on staff.

We have continued to work with our volunteers across our organisation and engage with them. We have started to look at our ways of working with our volunteers. We have improved the way we communicate to our volunteers, including WhatsApp groups and encouraging them to follow us on social media.

We are also trying to recruit volunteers from all backgrounds and ages. We are also making sure that we understand the skill set of our volunteers, so we can utilise their skills across the organisation.

• The Committee was disappointed that community health services for adults and for children, young people and families had received a 'requires improvement' CQC rating on safety though it was noted that an action plan was in place.

We had conducted an "CQC internal inspection audit" where our head of quality found areas around safety that needed improvements. The action plan has now been completed. The CQC rating in our Haringey community service was overall good, and all actions that we made internally following this inspection have been completed and updated back to the CQC.