



# St Teresa's Hospice



The Darlington and District Hospice Movement

## Quality Account 2024-2025

Registered Charity No: 518394

[www.darlingtonhospice.org.uk](http://www.darlingtonhospice.org.uk)

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# Section One: Overview

## Our Story

St Teresa's Hospice is a registered charity dedicated to delivering high-quality, compassionate care for adults with life-limiting conditions. We provide support throughout someone's illness, right through to end-of-life care and into bereavement support for loved ones.

For nearly 40 years we have been delivering palliative and end-of-life care to individuals across Darlington, North Yorkshire and South Durham.

What began as a small home care volunteer team has now developed into a comprehensive hospice, offering a wide range of holistic services tailored to individual needs. These include: our Wellbeing Hub, Hospice at Home, Inpatient Care, Lymphoedema Care, Complementary Therapies and Family Support, all designed to support and assist those we serve.

All of our care is founded on enhancing quality of life. We provide expert symptom management, social and psychological support, spiritual care and personal care, when it's needed most.



We help over **1,200** people every year.



**98%** of service users would recommend us to their friends and family.



We have an involvement with **18%** of residents who have died in Darlington.



**93%** of our patients achieve their preferred place of care.

## Our Mission and Vision

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### Our Mission

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Our Mission sets out why we exist, our purpose:

“To provide appropriate care to any person in the terminal phase of their illness and to support the whole family during this time and in bereavement.”



### Our Vision

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Our Vision sets out what we want to be known for, what we are here to achieve:

“All in our community facing the end of their life are supported to live life to the full and die with dignity in a place that is right for them, knowing their loved ones are supported.”

On behalf of our whole family and friends we would like to thank St Teresa's Hospice, all staff and volunteers, for looking after our mam.

Her final days were made so peaceful thanks to every amazing person who makes the hospice what it is.



# Our Values

Our Values are our core beliefs. They explain who we are, how we work, what we believe in and stand for:



## A welcoming space

Creating a safe, shared and inclusive space where everyone feels valued and respected.



## Dedicated to care

At our very heart is holistic care, comfort and dignity for all.



## Compassion in all we do

Everything is centred on empathy, kindness, understanding and respect.



## Support at every stage

We offer assistance, encouragement and guidance to everyone throughout their personal journey.



## Excellence in everything

Delivering professionalism and the highest of standards in everything we do.

# Our Strategy

At the heart of our organisation is a clear vision supported by four strategic pillars that represent our key areas of focus. Each pillar contains specific objectives, along with strategies for how we will achieve our goals.

Underpinning this framework are our core values which define our organisational culture and are visible in all that we do. These values guide how we work together to provide care for our community, as well as how we support one another within the hospice.

## Our Vision

Our Vision sets out what we want to be known for; what we are here to achieve:

“All in our community facing the end of their life are supported to live life to the full and die with dignity in a place that is right for them, knowing their loved ones are supported.”

	Our Future (Sustainability)	Our People	Our Services	Our Impact
Objectives	We will secure the financial, operational and environmental sustainability of the hospice so that services for patients and families are secure for the future.	We will strengthen our people by using our core values and best practice to recruit and retain the right people in the right roles, promoting a healthy and supportive working environment and aiming to be an employer of choice.	Building upon our strong foundation and reputation as a palliative and end-of-life provider we will continue to develop, adapt and enhance our person-centred care to meet the needs of our patients.	We will work with our partners to enhance and improve the experience of patients with palliative and end-of-life care needs, as well as the experience of those closest to them.

# Statement on Quality from the Chief Executive

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Welcome to our Quality Account for 2024/2025. This annual report is designed to provide our patients, their families, our community and our funders with a clear picture of how we continuously strive to enhance our services. At the centre of everything we do is our commitment to putting our patients and their families first.

Over the past year we have built on our commitment to excellence by refining our practices, embracing innovation and strengthening our infrastructure to better support those in our care. Key achievements include the implementation of a new quality management system, which is already driving greater oversight and continuous improvement. We have strengthened our partnerships with our colleagues in primary care, ensuring that our patients benefit from more timely and coordinated support. Additionally, we have invested in initiatives to support the wellbeing of our staff and volunteers, whose contributions are vital to our delivery of high-quality care. We have also enhanced our holistic, person-centred approach by placing a renewed emphasis on the spiritual component of palliative and end-of-life care.

A significant milestone last year was the launch of our new three-year Strategic Plan; a clear roadmap that outlines our vision, values and strategic objectives. The strategy builds on existing strengths and sets ambitious goals to ensure our services remain responsive, inclusive and accessible to all. Aligned with this, our priorities for 2025/2026 include targeted efforts to reduce inequalities in access to hospice care. Three priorities focus directly on patient care, while a fourth supports the development of a new health and care volunteering infrastructure across Darlington.

This Quality Account stands as a testament to the professionalism, compassion and dedication of our staff and volunteers, and to our shared commitment to continuous improvement.



# Quality at St Teresa's Hospice

## Chief Executive's Statement

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I would like to express my sincere gratitude to everyone who contributes to our mission. St Teresa's Hospice is a remarkable charity, powered by extraordinary people, all working together to deliver the best possible care.

As we look forward to 2025/2026, we remain focused on further strengthening the quality, reach and impact of our services, ensuring that everyone who turns to St Teresa's Hospice receives the care, support and dignity they deserve.

I am able to confirm that the information contained in this document is accurate to the best of my knowledge.

**Thank you for your ongoing support.**



**Nicola Myers**  
Chief Executive Officer

“There aren't the words to say how much we appreciate the love, care and compassion you show to patients and families who experience St Teresa's.

You provide light and humour in the darkest of times and support when it's needed most. Our mum felt such comfort and relief as soon as she was here, knowing she was safe and looked after until the very end.  
You are all a credit to your professions”



# Statement of Assurance from the Board

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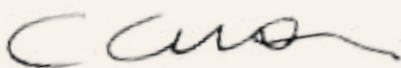
**In 2024 the Board of Trustees was strengthened by successful recruitment of new members. The rigorous recruitment process resulted in three appointments.**

These include two people with exceptional expertise in a breadth of clinical areas including medicines management, patient safety and nursing. All our subcommittees have at least two trustee members and are chaired by a trustee with a background in the relevant area. We strive for very high levels of scrutiny across all aspects of the hospice's functions, not least in the quality of services that we provide.

Collaboration with other hospices, both within the Tees Valley area and in the wider North East and North Cumbria region, has continued to develop. This allows, for example, sharing of best practice and understanding of political changes that affect hospice work.

The collaboration that St Teresa's Hospice has with other organisations such as County Durham and Darlington Foundation Trust and Tees Esk and Wear Valley Foundation Trust is testament to the important, unique role that our hospice has within the local healthcare system. Our commitment to providing quality palliative and end-of-life care is unwavering. A notable achievement was to obtain Preferred Place of Death for 99% of patients we cared for in 2024-2025. This metric has been achieved due to our flexible, patient-centred approach to provision of care in community and inpatient settings.

**The Board of Trustees approves this  
Quality Account.**



**Carol Charlton**  
Chair, Board of Trustees



# Statutory Information Relating to the Quality of Services

The following are statements that all providers must include within their Quality Account, although some of these statements are not directly applicable to specialist palliative care providers.

## Our Services

St Teresa's Hospice provides a range of specialist palliative and end-of-life care services delivered by a skilled multi-disciplinary team who work in partnership with other health and social care professionals to deliver a quality, joined-up service.



**Hospice At  
Home**



**Rapid  
Response**



**Inpatient  
Unit**



**Woodlands  
Wellbeing Hub**



**Family  
Support Team**



**Bereavement  
Care**



**Complementary  
Therapies**



**Lymphoedema  
Clinic**



**Volunteer  
Visiting**

In the past year we have remodelled our community hospice service and restructured complementary therapies to be more efficient and effective.

## Hospice at Home Service Development

In December 2024 the Rapid Response nursing service was transferred from the hospice to County Durham and Darlington NHS Foundation Trust (CDDFT). This transition created an opportunity for us to expand our hospice home care provision. In response we launched our Hospice at Home service in December 2024, offering personalised care and support to individuals in the final days and weeks of life.

The service is designed to improve quality of life and to support individuals to die with dignity in the comfort of their own homes. It is a responsive model of care capable of implementing packages of support within 24-hours of referral. This timely response facilitates rapid hospital discharges and ensures that patients receive the right care, in the right place, at the right time.

Our skilled and compassionate team works collaboratively with the wider hospice multi-disciplinary team and community nursing services. This integrated approach helps to prevent unnecessary hospital admissions and supports seamless, person-centred end-of-life care in the community.

## Complementary Therapies Service Development

Over the past year, we have undertaken a comprehensive review of our complementary therapies service to ensure hospice resources are focused on individuals requiring holistic symptom management in the last year of life. At the same time, we have worked with partner organisations to offer a broader range of services to the wider community.

We have continued our valued partnership with the Darlington and Durham MS Society to provide acupuncture and massage therapies to local people. In addition, this year saw the introduction of a new Auricular Acupuncture Clinic and dedicated massage appointments for cancer patients, delivered in collaboration with and funded by the CDDFT Charitable Trust.

This new service is specifically aimed at supporting individuals undergoing cancer treatment who may not meet the criteria for hospice care. The clinic has been very well received, highlighting its effectiveness in alleviating symptoms and enhancing overall wellbeing.



## Our Funding

St Teresa's Hospice provides all its core services free of charge to patients, families and carers. The majority of our funding continues to be provided through the generous support of our local community. This is in the form of donations, legacies, fundraising events, the St Teresa's Hospice Lottery and through purchases in our shops. The financial contribution received from the NHS in relation to commissioned services represents approximately one third of the total income generated by St Teresa's Hospice for 2024-2025. All of the financial support we receive from the NHS is spent directly on patient services.

In the accountable period, St Teresa's Hospice's NHS income was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation (CQUIN) payment framework nor was it subject to the payment by results clinical coding audit by the Audit Commission.

## Participation in National and Regional Clinical Audit or Research

St Teresa's Hospice did not participate in any national clinical audits or any national confidential enquiries. No patients receiving services provided or sub-contracted by St Teresa's Hospice were recruited during this period to participate in research approved by an ethics committee. Information about the hospice's clinical audit programme for 2024-2025 can be found in section three.



Your support when [my loved one] was able to come home and die with dignity meant everything to me.

I will never forget the kindness and care of all of your team over these dreadful few weeks.



## Quality and Information Governance

St Teresa's Hospice has effective data recording, reporting, monitoring and evaluation processes in place. We remain diligent in protecting the personal information of patients, staff, volunteers and donors in line with legislation.

We have completed the NHS Digital Data Protection and Security Toolkit Self-Assessment and were fully compliant against the National Data Guardian's ten data security standards. This gives assurance that we are practising good data security and that personal information is handled correctly in line with The Data Protection Act (2018), General Data Protection Regulations and our contractual obligations.

St Teresa's Hospice did not submit records during 2024-2025 to the Secondary Users Service for inclusion in the Hospital Episode Statistics as it is not eligible to participate in the scheme.

## Care Quality Commission

St Teresa's Hospice is currently registered with the Care Quality Commission (CQC) for the regulated activity of "Treatment of Disease, Disorder or Injury" with the following conditions:

- Caring for adults over 65 years
- Caring for adults under 65 years



St Teresa's Hospice  
continues to have an  
overall rating of "good"  
in all areas.





In response to the CQC Single Assessment Framework, we have developed a comprehensive work plan to ensure the ongoing delivery of safe, effective, compassionate and high-quality care, while also driving continuous quality improvements. Our goal is to ensure that every aspect of our service meets the highest standards, with the ambition of achieving an outstanding level of care in everything we do.

## Extract from our most recent CQC Inspection Report (2022)

The service had enough staff to care for patients and keep them safe. Staff had training in key skills, understood how to protect patients from abuse, and managed safety well. The service controlled infection risk well. Staff assessed risks to patients, acted on them and kept good care records. They managed medicines well. The service managed safety incidents well and learned lessons from them.

Leaders ran services well using reliable information systems and supported staff to develop their skills. Staff understood the service's vision and values, and how to apply them in their work. Staff felt respected, supported and valued. They were focused on the needs of patients receiving care. Staff were clear about their roles and accountabilities. The service engaged well with patients and the community to plan and manage services and all staff were committed to improving services continually.



Darlington & District Hospice Movement

**St Teresa's  
Hospice**

### Overview




Latest inspection: 30 August 2022    Report published: 17 November 2022  
Latest review: 6 July 2023 ⓘ

Safe	<a href="#">Good</a> ●
Effective	<a href="#">Good</a> ●
Caring	<a href="#">Good</a> ●
Responsive	<a href="#">Good</a> ●
Well-led	<a href="#">Good</a> ●

# Summary of Activity for 2024-2025

The hospice submits Quarterly Service Quality and Performance Reports to the Integrated Care Board (ICB). Our performance data is also reviewed monthly by the Senior Management Team and Service Leads, and quarterly by the Board of Trustees and Clinical Governance subcommittee.

Overall, patient activity levels have remained stable over the year. Within our Inpatient Unit, we recorded a 9% increase in occupancy, partly attributed to a slight rise in the average length of stay. This reflects our ongoing work to ensure admissions are both timely and clinically appropriate. A small reduction in patient numbers within the Lymphoedema Clinic reflects a more targeted approach, with proactive discharge of stable patients and a focus on those with more acute needs.

 Inpatient Unit	2023-2024	2024-2025
Number of Individual Patients Admitted	160	150
% Occupancy	70%	79%
Total Number of PPD (Preferred Place of Death) Met	123 (98%)	118 (99%)
 Rapid Response (service ended 30.11.2024)	2023-2024	2024-2025
Number of Individual Patients Seen	344	293
Total Number of Patient Contacts	3442	2654
Total Number of PPD (Preferred Place of Death) Met	170 (90%)	156 (90%)
 Hospice at Home (service redesigned 01.12.2024)	2023-2024	2024-2025
Number of Individual Patients Seen	54	58
Total Number of Patient Contacts	1142	1768



### Wellbeing Groups

2023-2024

2024-2025

Number of Individual Patients Seen

115

103

Total Number of Attended Appointments

2045

2253



### Family Support Team

2023-2024

2024-2025

Number of Individual Patients Seen

370

362

Total Number of Attended Appointments

2261

2303



### Lymphoedema Clinic

2023-2024

2024-2025

Number of Individual Patients Seen

241

229

Total Number of Attended Appointments

599

619



### Complementary Therapies

2023-2024

2024-2025

Number of Individual Patients Seen

225

227

Total Number of Attended Appointments

2417

1820

I'm in a much  
better place.  
This has been a  
life saver.



# Section Two: Priorities for Improvement

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## Our Commitment to Quality Improvement and Service Development

St Teresa's Hospice is committed to maintaining the highest standards of care while continuously evolving to meet the needs of a changing population. Through innovation and ongoing service development, we aim to ensure our care remains responsive, relevant and person-centred. We closely monitor developments within the commissioning landscape and work collaboratively with health and social care partners to ensure our services are aligned with best practice and evolving expectations.

Our performance is regularly assessed using a comprehensive set of key performance indicators (KPIs), evidence-based quality metrics and feedback from individuals with lived experience of our care. We benchmark our outcomes at both local and national levels and are subject to external scrutiny from our commissioning partners and the CQC.



**A culture of continuous quality improvement is embedded across all aspects of our clinical services and in line with the hospice's core values.**

This Quality Account focuses specifically on the clinical care we provide and the essential services that support its delivery. While it does not include fundraising or administrative activities, we recognise that these areas also benefit from ongoing quality improvement initiatives aligned with our wider organisational goals.

# Quality Improvement Priorities for 2024-2025. Progress Report:

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## Quality Management System

In 2024 we introduced MyCompliance to help us work more efficiently and stay accountable at every level. This is a flexible quality management system utilised to simplify how we manage audits, review policies and co-ordinate contributions to reports.

Over the past year we have implemented a phased roll-out of the system. This included staff awareness sessions, tailored applications for different teams and ongoing monitoring to ensure the system meets our needs.

MyCompliance now hosts our hospice audit schedule. This system keeps track of outstanding audit actions and notifies staff when policies are due for review or ratification. Many teams and working groups have also moved their action logs into the system, creating a more consistent and transparent approach.

Staff have shared positive feedback, particularly around easier task tracking, helpful reminders and having everything in one place. Many have found it reduces the need for manual lists and helps clarify responsibilities, saving time and reducing administrative workload. For the Senior Management Team it offers a clear overview of progress across the organisation.

That said, we are still learning and adapting. Some staff have found it challenging to co-ordinate shared actions on this platform, whilst others suggested that the number of email reminders should be reduced. To help with this we are offering further training, reviewing how the system delegates tasks and exploring ways to tailor notifications.

We will continue listening to staff and refining how we use MyCompliance, making sure it is user friendly and genuinely supports our goal of providing excellent care.

**Nancy Milburn**

**Data and Quality Assurance Manager**

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## Enhancing Spiritual Care as Part of Holistic, Person-Centred Support

In line with the Ambitions for Palliative and End-of-Life Care (2021–2026) document, which highlights the importance of addressing spiritual distress, we recognised a need to build more confidence and consistency around spiritual care within our team. This aligns with current research, where spirituality is seen as a vital, but often misunderstood, part of palliative care. Staff, service users and visitors alike also shared the need for a quiet, dedicated space for reflection and remembrance. The Bereavement Care Team in particular, recognised the need for a place that could respectfully house our Book of Remembrance.

Accordingly, over the past year, one of our key priorities has been to strengthen the spiritual aspect of care. We therefore brought together a “Task and Finish Group” made up of staff and community representatives to shape a framework for how we assess and respond to spiritual needs. This included consideration of how we might create a reflective space for everyone who comes through our doors.

The group successfully delivered on all of its aims, resulting in a fresh approach to spiritual care which flows through our culture, our conversations and our care.

### Key outcomes include:

- **A Spiritual Care Framework** – Set out in a practical staff handbook with a companion booklet for patients to support understanding and engagement.
- **New Volunteer and Staff Roles** – We have introduced Chaplaincy Volunteers who will sit within our Family Support Team to provide religious, spiritual and pastoral support for patients, carers, staff and volunteers. We have also created the role of Spiritual Care Champions to help embed spiritual awareness and support across the hospice.

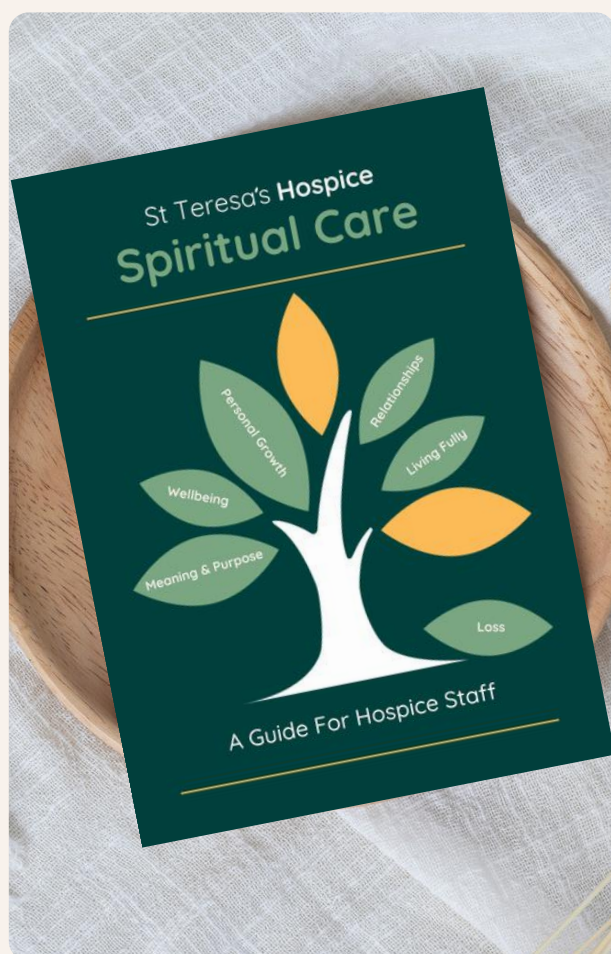


At St Teresa's Hospice we believe that truly person-centred care embraces the **whole person**; body, mind and spirit.

- **A Reflection Space Design Brief** – Plans are underway for the creation of a central Reflection Space within the hospice. The design brief outlines a calm, inclusive area for quiet thought, prayer or remembrance. It includes direct access to the garden through double glass doors, creative resources to leave a message or write down a thought plus a dignified home for our Book of Remembrance. Our hope is that this space, in itself, will also symbolise our commitment to the emotional and spiritual wellbeing of all those we support.

Looking ahead we are excited to implement our mobilisation plan for this important piece of work. Next steps include recruiting volunteers, providing training and sharing our new resources with staff and patients to help embed this approach into everyday practice and deepen the holistic care we are proud to offer.

**Deborah Robinson**  
Director of Care Services



## Stakeholder Engagement – Building Stronger Links with GP Practices

**As part of our continued commitment to improving timely access to hospice care, we focused on strengthening our relationships with local GP practices across Darlington and South Durham. We know that early involvement with hospice services can make a real difference to patients; enhancing quality of life, supporting people to remain in their preferred place of care and improving equitable access to support.**

To help achieve this we sent our service information packs, complete with leaflets and posters, to all 20 GP practices in the area. We then reached out to practice managers to introduce a named hospice link worker for each practice. Where requested, these link workers have offered updates on our services and attended Gold Standards Framework (GSF) meetings to support referral pathways into hospice services. Over the past year our team has participated in 14 GSF meetings.

This contact has shown some positive outcomes. In some meetings we have received new referrals and helped identify others who could benefit from hospice input. Staff have found the meetings valuable, both for sharing updates about our evolving services and for addressing common misconceptions around hospice care and referral pathways.

We also piloted a small-scale initiative focused on “proactive case finding”, working with four GP practices that volunteered to take part. These practices identified patients with a diagnosis of Multiple Sclerosis (MS) and sent out information about our MS support programme. As a result over 50 patients (around one third of those living with MS in Darlington) were contacted and five responded directly to enquire about our services. We are keen to work with the Primary Care Network to see how this approach can be used to better promote other hospice services to specific patient groups.

Looking ahead, we aim to continue our engagement in a more targeted and sustainable way. We plan to offer annual visits to all practices to provide a service update, while focusing more intensive support in communities with higher levels of socio-economic deprivation, where we know that people face additional barriers to accessing hospice care. We also intend to refresh our information packs and distribute them across the locality and we will continue to offer professional engagement opportunities such as open days.

By working hand-in-hand with our colleagues in primary care, we are taking meaningful steps towards ensuring that everyone who needs hospice care can access it at the right time and in the right way.

**Deborah Robinson**  
Director of Care Services

**Nancy Milburn**  
Data and Quality Assurance Manager

## Staff Wellbeing

Supporting and retaining our team is essential to delivering high-quality care and this year we have focused on strengthening staff wellbeing across the hospice. Concentrating on the lower-scoring areas from our staff survey, namely “feeling secure at work”, “having headspace to reflect” and “working free from worry”, we have introduced a number of initiatives aimed at creating a more supportive and resilient workplace.

Over the past year we have collected feedback from staff around their awareness of our existing wellbeing offering and suggestions for future initiatives via team meetings and our anonymous staff survey.

### In response to their comments, we have:

- Introduced free weekly yoga.
- Delivered a holistic wellbeing workshop for staff.
- Offered discounted leisure centre access.
- Promoted our Employee Assistance Programme and other available resources such as the free wellbeing support service for clinical staff via Hospice UK.
- Ensured proactive support for staff experiencing stress, via Individual Stress Risk Assessments and Action Plans and Occupational Health reviews.
- Appointed a new impartial Freedom to Speak Up Guardian, in a more accessible role and promoted their role to staff.
- Finalised our core company values, following on from our 2023-2024 quality improvement priority to develop our working culture, defining our culture at its best as; **Welcoming, Caring, Compassionate, Supportive** and **Excellent**.



- Reviewed key job descriptions and our organisational structure to further clarify roles and responsibilities.
- Started to develop a new resilience-based clinical supervision programme, based on staff feedback and supporting evidence.

Encouragingly our year-end survey showed improvements across all focus areas: a 3% rise in overall engagement, and specific increases in feelings of security (+4%), headspace (+7%) and freedom from worry (+4%).

Looking ahead, we will continue to build on this work by reviewing staff feedback, embedding our values in everyday practice, refining our support programmes and using our new HR system to better understand wellbeing-related trends.

We will also fully roll out our new resilience-based clinical supervision programme and conduct a wider review of our supervision and framework across both clinical and non-clinical roles.

Our commitment remains clear, a healthy, supported workforce is at the heart of everything we do.

## **Lucy Daynes** Head of Human Resources





# Quality Improvement Priorities for 2025-2026

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As demonstrated in our strategic plan, St Teresa's Hospice is committed to ensuring that our services are timely, accessible, inclusive and appropriate for all who need them. Recognising that certain populations may face barriers to accessing hospice care, our priorities this year aim to enhance our reach to certain under-served groups. Three directly relate to patient care and the fourth priority, the delivery of a new infrastructure for health and care volunteering across Darlington, aims to reduce health inequalities by promoting diversity and inclusion within the health and care volunteering workforce.

## Ageing Well Programme

St Teresa's Hospice's Strategic Plan 2024-2027 emphasises our commitment to service innovation that responds to national trends and local needs. As our population ages, an increasing number of individuals are living with frailty, chronic conditions or life-limiting illnesses. While specialist clinical care remains essential, there is a growing recognition of the importance of holistic support that empowers individuals to maintain independence and enhance their overall quality of life.

In response to this need, we will work in partnership with Darlington Borough Council's Public Health team to develop and pilot an eight-week "Ageing Well" programme tailored to our community's needs.

This initiative aligns with priorities outlined in Darlington's Joint Health and Wellbeing Strategy 2025-2029, which emphasises the promotion of healthy ageing and the importance of enabling individuals to discuss end-of-life care preferences. The strategy advocates for interventions that prolong independence and good health and ensures that people receive the right support as they approach the end of their lives.

Furthermore, Hospice UK's recent report, *Extending Frailty Care (2025)*, highlights that older people are often under-served at the end of life, receiving less palliative care but more interventions that may extend quantity rather than quality of life.

**The Ageing Well Programme aims to:**

- **Promote Holistic Wellbeing:** Support older adults in maintaining physical, emotional and social health.
- **Enhance Independence:** Empower individuals to live healthier, more autonomous lives.
- **Encourage Advance Care Planning:** Increase awareness and understanding of advance care planning among participants.
- **Enable Community Engagement:** Foster connections among participants to reduce isolation and build supportive networks.

Leveraging the strengths of our hospice team in supporting individuals to live and die well, we will collaborate with Darlington's Public Health Team and other partners to develop and pilot this programme. The initiative will be co-designed with input from older adults and community stakeholders to ensure it meets the specific needs of our local population. Finally, insights gained from this initiative will inform service developments within the hospice and guide the potential expansion of similar programmes by Public Health.



Darlington Borough Council and St Teresa's Hospice have established a positive working relationship across a number of years.

DBC's Public Health Team and St Teresa's are currently collaborating on an exciting opportunity to develop an evidence-based, person-centred programme which will support people with the practical, social, physical and emotional aspects of ageing. This will support people in Darlington to maintain their health and their social connections, to make positive preparations for their older age and to start conversations with their family and friends about their wishes for their end-of-life care.

We are looking forward to working together to support people in Darlington to live well, age well and prepare for their final days with dignity.

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**Rebecca Morgan**

Public Health Portfolio Lead (Mental Health and Ageing Well)  
Darlington Borough Council





## Developing Inclusive Care – Working with LGBTQ+ People in Hospice Care

**Evidence indicates persistent inequities in access to, and experiences of, palliative and end-of-life care among LGBTQ+ individuals.**

Members of these communities have reported facing additional challenges when accessing and receiving care, including instances of insensitivity, misgendering and a lack of understanding from healthcare providers. Furthermore LGBTQ+ individuals often encounter barriers within healthcare settings as staff members, facing discrimination and a lack of inclusive policies. These challenges underline the need for targeted initiatives to address disparities and promote equity in care delivery.

At St Teresa's Hospice our commitment to tackling inequalities also extends to fostering an inclusive workforce and nurturing a working culture that respects and values diversity.

Our initiative is informed by key resources aimed at enhancing inclusivity in palliative care including **“It's More Than Rainbows in Reception” (2024), “I Just Want to Be Me” (2023) and the Trans and Gender Diverse Inclusion Handbook (2025).**

Therefore, in this coming year, we will take positive steps forward to cultivate the hospice as an LGBTQ+ positive organisation that delivers safer, more inclusive services for LGBTQ+ individuals, while fostering a culture of respect and understanding within our hospice community. To achieve this we will establish a “Task and Finish Group” comprised of LGBTQ+ community members and allies from the hospice and the wider community.

The purpose of this group will be twofold. Firstly to utilise research to assess current practices and organisational culture to identify positive examples of practice as well as areas for improvement. Secondly to recommend achievable strategies for organisational change including, for example, staff training, policy development and enhancements in care delivery. Insights from this initiative will also inform the implementation of our new approach to spiritual care, ensuring it is inclusive and responsive to the diverse needs of LGBTQ+ individuals.



## Improving End-Of-Life Care for People with Learning Disabilities

People with learning disabilities often encounter significant barriers in accessing specialist palliative and end-of-life care, including hospice services. These challenges can include limited access to appropriate communication support and a lack of personalised care planning. As a result, this group of people experience notable disparities in both care quality and health outcomes.

Last year, a Health Facilitation Nurse from the Learning Disability Physical Health Team at Tees, Esk and Wear Valleys NHS Foundation Trust reached out to our hospice to explore how we might work together to improve end-of-life support for individuals with learning disabilities. This collaboration, spanning both policy development and direct patient care, highlighted the benefits of shared learning and integrated approaches which inspired our ambition to create a Community of Practice.

Facilitated by the hospice, we aim to create a sustainable Community of Practice to foster collaboration, share learning and ultimately enhance the experiences and outcomes for individuals with learning disabilities who are approaching the end of their life.

### **This Community of Practice would serve several important purposes:**

- **Facilitate Collaborative Learning:** Provide a platform for professionals to share knowledge, experiences and best practices.
- **Develop Integrated Care Pathways:** Co-create care models that address the unique needs of individuals with learning disabilities.
- **Enhance Communication Strategies:** Improve methods for discussing end-of-life care with individuals who have varying communication abilities.
- **Promote Advance Care Planning:** Encourage early and inclusive discussions about care preferences and goals.
- **Evaluate and Disseminate Outcomes:** Assess the impact of the Community of Practice and share findings to inform broader practice.



## Implementation Plan

- **Phase 1: Planning and Engagement**

Engage key professionals from palliative care and learning disabilities services, identify current gaps and opportunities for collaboration. Work together to define objectives, structure, and communication channels.

- **Phase 2: Collaborative Activities**

Hold regular meetings to discuss cases, share experiences and potentially develop shared materials and training.

- **Phase 3: Evaluation and Sustainability**

Evaluate the effectiveness of the Community of Practice, in improving care practices then create strategies to develop the Community of Practice beyond the initial implementation phase.

**By establishing this Community of Practice, St Teresa's Hospice aims to bridge gaps between services, promote inclusive care and ensure that individuals with learning disabilities receive compassionate and appropriate end-of-life support.**

The expected outcomes include improved care through enhanced collaboration, leading to more personally tailored care plans. We anticipate that staff across services will gain increased confidence and competence in meeting the unique needs of individuals with learning disabilities. This in turn will contribute to a more person-centred approach, improving patient experience and quality of life. Additionally, the Community of Practice will serve as a platform for sharing successful strategies and key learnings, helping to inform and influence wider practice across the sector.

Words can never express how grateful we are for all the care and kindness you gave to my husband and also to me and my family whilst he was a patient in your unit. Nothing was ever a bother. [He] was happy and comfortable and felt safe and he had “a plan” which you helped him achieve.

## Volunteering for Health: Enhancing Local Infrastructure and Inclusion through Strategic Partnership

**The final service improvement priority for St Teresa's Hospice this year is our involvement in the Volunteering for Health project, a collaborative initiative aimed at strengthening the infrastructure for health and care volunteering across Darlington.**

Unlike many other areas, Darlington currently lacks local infrastructure to co-ordinate and promote volunteering within the health and social care sector. To address this St Teresa's Hospice, in partnership with two local charities and NHS England, has successfully secured funding to develop a sustainable, inclusive model that improves access to volunteering opportunities.

The project will draw on the hospice's extensive experience in volunteer coordination and support to establish a centralised service which will focus on the triage and induction of volunteers. A dedicated Volunteer Coordinator, based at St Teresa's Hospice, will play the central role in delivering this infrastructure, helping to create clear volunteer pathways and consistent support processes across the local system for participating organisations. This work will take place within the hospice's Wellbeing Hub to help broaden perceptions of hospice care beyond end-of-life support.

A particular focus of the project is on improving volunteer diversity to better reflect the local population. In collaboration with one of our partners Darlington Association on Disability (DAD), we will seek to engage individuals with physical and mental health challenges and to encourage young people to participate in volunteering.



Co-production with local communities will support the development of inclusive, relevant opportunities that meet diverse needs. Additionally, the project will explore innovative solutions to reduce barriers to volunteering, such as the potential introduction of a 'volunteering passport' to streamline background checks and improve mobility between roles across organisations.

The work will also complement and build upon existing programmes, including NHS Charities' hospital discharge initiative, where volunteers can support patients with social welfare advice. Through this partnership, St Teresa's Hospice aims not only to strengthen volunteer support locally but also to contribute to reducing health inequalities by promoting diversity and inclusion within the health and care volunteering workforce.



“The team were amazing with my son after he lost his daddy at a very young age.

As he got older and developed questions they answered them for him.”



# Section Three: Review of Quality Performance 2024-2025

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**St Teresa's Hospice is committed to delivering safe and effective services. In the past year we have continued to develop our Clinical Governance and Quality Framework to monitor patient safety, clinical effectiveness and ensure the best possible experience for patients and their carers and families.**

To achieve this, we utilised a range of measures to benchmark and monitor our performance and continually seek to improve our quality of care in line with best practice and current research.





# Leadership and Governance

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**The hospice is supported by a strong and effective Board of Trustees providing clear strategic leadership and oversight.**

An established management structure is in place, with the Chief Executive Officer (CEO) holding delegated responsibility from the Board. The CEO is supported by a Senior Management Team comprised of the Director of Care Services, Registered Manager, Human Resources Manager and the Finance Manager, ensuring robust operational management across all areas of the organisation.

**The following officers are also in place:**

- Registered Manager with the Care Quality Commission.
- Anti-Fraud Officer (Hospice Trustee).
- Caldicott Guardian (HR Manager), responsible for safeguarding patient information.
- Data Protection Officer (Data and Quality Assurance Manager).
- Freedom to Speak Up Guardian (Senior Hospice Counsellor).
- Privacy Officers (CEO and Senior Clinical Services Administrator).
- Accountable Emergency Officer (Trustee).
- Prevent Lead (CEO).
- Accountable Officer for Medications (Registered Manager).
- Safeguarding Lead (Director of Care).

**The Board has four subcommittees:**

- |                        |                        |
|------------------------|------------------------|
| 1. Finance and Estates | 3. Workforce/HR        |
| 2. Income Generation   | 4. Clinical Governance |

The Clinical Governance Subcommittee, chaired by a member of the Board of Trustees, includes additional clinical expertise from Board members in relation to medicine management, clinical risk management and strategic oversight.

This group plays a vital role in maintaining a strong focus on quality improvement and performance. It ensures that decision-making is informed by robust, consistent data supported by meaningful analysis and in-depth discussion. This commitment to quality is further strengthened through the regular review of both the operational and clinical risk registers, helping to monitor risks and drive continuous improvement across services.

# Patient Safety

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## Clinical Incidents

The hospice maintains a strong culture of open reporting with a focus on learning. Clinical incidents are reviewed weekly by the Registered Manager and are routinely benchmarked against national averages (provided by Hospice UK) to identify trends and areas for improvement. The hospice has an excellent level of reporting in all patient safety areas which reflects its client base.

Where appropriate, Root Cause Analyses are undertaken to explore underlying causes and guide actions to enhance service delivery. Key learning points are shared with relevant staff or teams to support the consistent application of best practice across the organisation. When required, incidents are also reported to the CQC or shared with the regional Patient Safety Incident Response group.

We have recently implemented our Patient Safety Incident Response Plan (PSIRP), developed collaboratively with 12 regional hospices. The plan outlines how the collaborative will respond to patient safety incidents and is a key part of our continued focus on improving the safety and quality of care. It is a flexible, living document that is reviewed annually at the North East Hospice Clinical Leaders Group meeting, where all participating hospices are represented.

The aim of the PSIRP is to enhance the effectiveness of local patient safety incident investigations. It sets out a structured, systems-based approach to understanding and learning from incidents reported by patients, families and staff. This marks a shift towards identifying the underlying systemic and contributory factors rather than focusing solely on individual actions. Shared learning across the collaborative is particularly valuable given the low incident numbers within each individual hospice. This collective approach supports a deeper understanding of recurring patterns and helps drive improvements across all hospices.

A total of 120 clinical incidents were recorded over the reporting period, which represents a slight decrease compared to the previous year. The majority of incidents were low in severity. This level of reporting reflects our commitment to fostering a culture of openness and continuous learning, where all staff are encouraged to report incidents to support ongoing improvement, and ensure patient safety. For example, analysis of the data identified improvements needed in hospital discharges to the hospice. We have worked closely with hospital-based palliative care teams to address this and encouraging progress has been observed in the quality and coordination of transfers.

## Health Related Infections

**As part of our commitment to providing safe and high-quality care at St Teresa's Hospice, prevention of healthcare related infections remains a priority in all clinical areas. This is overseen by our Lead Clinical Nurse Specialist and supported by our wider clinical and housekeeping teams. In this reporting period there have been no health related infections in the hospice.**

We continue to be supported by our Local Authority as the lead agency for infection control. We have the guidance of our Public Health Officer, who is currently supporting our implementation of the Medical E-Governance (MEG) software, a digital toolkit to aid healthcare facilities deliver on their infection prevention and patient safety goals at the clinical frontline. This will connect all key components of clinical governance within infection control and quality management in one place to deliver safe, effective and person-centred care.

We continue to work to the National Standards of Healthcare Cleanliness and take advice and clinical guidance where appropriate from the UKHSA.

## Safeguarding

**St Teresa's Hospice recognises its legal duties in regard to safeguarding. Through robust policies, ongoing staff training and effective partnerships with local safeguarding teams, we strive to create an environment where concerns are identified and addressed promptly, sensitively and effectively.**

In line with guidance, all safeguarding concerns are recorded on a central Safeguarding Log, which is reviewed quarterly by the hospice safeguarding team. Each safeguarding case is individually reviewed to assess for patterns or emerging issues and to identify training needs or adjustments to our policies and procedures.

Over the past year we have taken steps to strengthen our approach to safeguarding. We have improved our internal reporting and refreshed our in-house safeguarding posters to include photographs of the safeguarding team, making them more visible and accessible to everyone. We have also responded to feedback for staff to use more case studies in team meetings to help ensure staff feel confident and supported in their responsibilities.

# Clinical Effectiveness

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**St Teresa's Hospice continues to enhance clinical effectiveness through robust governance, the use of evidence-based tools and commitment to delivering individualised high-quality care.**

Measuring effectiveness in palliative care can be complex but the hospice utilises a range of Key Performance Indicators (KPIs), clinical audits and validated acuity tools, including aspects of the Outcome Assessment and Complexity Collaborative (OACC) suite, to monitor patients' changing needs and outcomes. These tools are embedded across all clinical areas, enabling better triage, planning and delivery of care.

Over the past year, the hospice has implemented new tools to strengthen clinical decision-making. These include the 'Purpose-T tissue viability tool', endorsed by the National Wound Care Strategy Programme, as well as 'The Mary Potter Acuity Tool', used to assess patient needs and inform safe staffing levels within the Inpatient Unit. Additionally, the Responding to Urgency of Need in Palliative Care (RUN-PC) triage tool has been employed to support transparent, evidence-based prioritisation of admissions. This tool evaluates referrals using seven domains across physical, psychosocial and caregiver needs, assigning a score that guides urgency and response times. Daily admission meetings now incorporate RUN-PC alongside clinical judgement and referral review, improving the consistency and evidencing equality of admission decisions.

All patients receive individualised care plans from a multi-disciplinary team with access to allied health professionals, chaplaincy support and the Wellbeing Hub. Holistic support extends to carers and families, recognising their essential role in the patient journey. These developments demonstrate the hospice's commitment to delivering person-centred, needs-led, and measurable care, while continuously improving through innovation and best practice.





## Clinical Audits

In addition to internally identified audits of hospice policy and procedures, our audit programme includes external audits such as infection control and the use of national formats such as Hospice UK audit tools. For all audits undertaken, the hospice applies a compliance Red, Amber, Green (RAG) rating, identifies action plans for improvement and, where appropriate, escalates risk for inclusion on the Clinical Risk Register. The Audit Action Log and Clinical Risk Register is monitored by the Senior Management Team and Clinical Governance Subcommittee. This enables us to monitor quality and ensure improvements have been made where needed.

In 2024-2025 we completed 118 audits across all areas of the hospice, which included 54 clinical audits. The completed clinical audits showed very high levels of compliance. For example, the recent DNACPR policy audit on the Inpatient Unit returned a compliance of 100%. Five patient records were interrogated to confirm that the patient had a DNACPR in place, that it had been scanned to their electronic record and was in date. The implementation of this policy ensures that the most appropriate levels of care, chosen by the patient, are identified and adhered to in line with their wishes. Accurate contemporaneous records are essential to high-quality patient care.



# Patient and Carer Experience

## Listening to and Learning from Patient and Service User Experience

St Teresa's Hospice remains committed to actively gathering and responding to the experiences of patients and service users to drive continuous improvement.

A range of feedback mechanisms are in place, including structured questionnaires incorporating the Friends and Family Test, suggestion boxes and informal conversations with patients and carers. This feedback is invaluable in helping us understand what we are doing well and where we can improve.

We also utilise validated patient outcome measures such as Measure Yourself Concerns and Wellbeing (MYCAW) and Goal-Based Outcomes (GBO), alongside the collection of informal feedback including thank you cards, letters and comments submitted via our website.

  
**94%**

During the reporting period 94% of service users stated they were “likely” or “extremely likely” to recommend our services to others - a strong endorsement of the care provided.

All suggestions and comments are reviewed by the relevant departments and collated into our ‘What You Said, What We Did’ report. This report outlines the feedback received and the actions taken in response. Where possible we respond directly to individuals who have provided suggestions. Additionally, we share relevant quality improvement outcomes in our newsletter and on our website to keep our wider community informed.

Feedback is reviewed at monthly Senior Management Team meetings and monitored through the Clinical Governance Subcommittee.

A recent example of feedback leading to service improvement involved a suggestion from the Inpatient Unit's suggestion box. A family member said that it would be comforting if beds were larger, allowing children or partners to lie next to their loved ones. In response the hospice sourced a "cuddle bed"; a specially designed bed that can accommodate two people, providing families with the opportunity for closeness and comfort during end-of-life care.

This example demonstrates our dedication to listening to our patients and their families, ensuring that their voices directly influence the care and services we provide.

## Key Themes from Feedback

Questionnaire responses from patients and families who received care and support from the hospice highlight the profound impact the team has on quality of life for both patients and their loved ones during a challenging time. The image below depicts key themes expressed by our patients and carers.



## Complaints and Service Improvement

At the hospice we view complaints as a valuable source of feedback and an essential component of our ongoing commitment to quality improvement. Each complaint is an opportunity to reflect, learn and enhance the care and services we provide. We maintain a clear and accessible complaints process, which is prominently displayed throughout the hospice and included in patient information packs.

During the reporting period, the hospice received one formal complaint. Following a full review of the case a reminder was issued to clinical teams on the importance of clear, compassionate and proactive communication, particularly in end-of-life circumstances. Staff were also offered training in Advanced Communication Skills.

We remain committed to maintaining openness and transparency in how we handle concerns and complaints, using them as an essential tool for learning and continuous improvement.

“When I was at my lowest ebb and could only see an empty and joyless life stretching out in front of me, missing [my loved one] unbelievably, you have shown me how I can learn to live with my grief.

You have also made me believe that I can do things that I never thought I would be able to do.”



# Staff and Volunteer Experience

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Recognising the link between staff wellbeing and quality of care, we measure our staff experience in various ways, including:

- Accurate monitoring, reporting and review of sickness levels.
- Confidential annual staff experience survey.
- Line management support including 1:1 contact meetings and the annual review process.

## Staff Sickness

**For the year ending March 2025, the annual sickness rate was 7%; an increase from the previous year's figure of 6%.** This is largely attributable to an unusual peak in long term absences seen in Quarter Two, the rate of which has since improved following proactive absence management.

We manage absence according to our policy and maintain a safe working environment by implementing Health & Safety measures that minimise illness-related absence. This includes supporting the health of our staff and volunteers through facilitating access to vaccinations, for example.



## Confidential Annual Staff Experience Survey

Keen to understand the experiences and perspectives of our workforce, the purpose of our annual survey is to gather staff viewpoints on 16 crucial work aspects that influence their productivity, wellbeing and engagement.

Our overall engagement score in the 2024-2025 survey was 85%; an increase of 3% from our last survey. Here is what staff told us about why they like working at the hospice.

### Making a Meaningful Difference



- Staff feel fulfilled by supporting patients and families during difficult times.
- Rewarding work that contributes positively to people's lives.
- Sense of achievement in delivering high-quality care.

### Hospice Environment & Organisational Ethos



- A caring and welcoming workplace that aligns with personal values.
- Charity-driven mission creates a compassionate work culture.
- St Teresa's Hospice is seen as a special, supportive and rewarding place to work.

### Supportive & Collaborative Teamwork



- Strong team spirit and mutual support among colleagues.
- Management is approachable and fosters open communication.
- Positive and inclusive work culture, described as a "family atmosphere."

### Flexible Working & Work-Life Balance



- Appreciation for flexible working arrangements that accommodate personal commitments.

## Line Management and Performance Review

**Committed to good performance management, the hospice ensures all staff benefit from regular contact meetings with their line manager and an annual review to support their ongoing development.**

We have reviewed our performance management policy during 2024-2025. Following training with line managers we are launching a refreshed policy for 2025-2026. This will continue to incorporate regular contact meetings and annual reviews. It aims to improve process effectiveness by incorporating manager feedback and to promote a culture of continuous improvement and professional excellence, in line with our newly-established core values.

## Clinical Supervision

Clinical supervision is a vital part of hospice care, which ultimately improves the quality of care delivered. It offers staff a safe, structured space to reflect on their work, process emotional experiences and maintain their wellbeing. Hospice teams often support people through some of the most vulnerable and emotional moments of life. This can be deeply rewarding but also emotionally demanding. As part of our focus on staff wellbeing we have been developing a new resilience-based clinical supervision programme, shaped by training from Hospice UK for all clinical services.

## Volunteers

**Welcoming new volunteers: the hospice is dedicated to improving and diversifying our volunteer opportunities.**

During 2024-2025 we have been developing our proposal for the hospice's role in the Volunteering for Health project (see Section 2: Quality Improvement Priorities for 2025-2026), which will enable us to enhance the volunteer recruitment and onboarding experience, with a further aim of building on this improved start to the volunteering journey to increase engagement and retention.

# Learning and Development

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The hospice is committed to maintaining a highly-skilled, knowledgeable and compassionate workforce capable of delivering specialist-level symptom management and holistic end-of-life care. Our clinical training programme is designed to support continuous professional development, ensuring our staff remain up to date with best practice and emerging clinical knowledge.

We continue to horizon-scan for new training opportunities and regularly invite external speakers to enrich our internal training offer. We also utilise internal expertise, including that of our Clinical Nurse Specialists and Family Support Team, to deliver high-quality education tailored to the needs of our staff.

This year's Clinical Training Plan covered a comprehensive range of topics aligned with the complexity of care we provide, ranging from "Talking to Children About Death and Dying" to "Transcribing Medicines".

In addition we have prioritised management and leadership development, with staff receiving workshops in recruitment, change management and performance management delivered by a local expert. These sessions were aimed at both emerging leaders and established managers, ensuring leadership capability continues to grow across the organisation.





We actively support staff within our clinical teams to undertake university-level study in subjects relevant to end-of-life care, enabling professional growth and supporting career progression within the hospice. We recognise the long-term value of developing our existing workforce and encourage knowledge sharing so that skills gained by individuals benefit the wider team.

Safeguarding remains a central component of our training agenda. Our safeguarding education programme is aligned to the Intercollegiate Document on safeguarding competencies and is embedded in both our induction programme and ongoing mandatory training, to ensure compliance and confidence across all staff roles.

Additionally, the hospice has recently invested in a new HR database which incorporates an interactive training record. Staff will be able to access their own records for evidence, for example, when building up a re-validation portfolio.

“ The fact that we are helping people at,  
what could be, the worst times of their lives.  
We are making a difference.

The hospice is a lovely environment to work in.  
Staff generally happily support each other in both work  
and home issues.

Management are always available to speak to  
and have an open office policy. ”

## Awards During 2024-2025

During 2024-2025 we were recognised in the following areas:

- Disability Confident Employer: The hospice has maintained its accreditation under this scheme.
- St Teresa's Hospice is registered with the Fundraising Regulator to ensure compliance with the law and best fundraising practices.
- The hospice retained its 5 star Food Hygiene Award from Environmental Health.
- Since 2024 we have been proud to pledge our support for The Armed Forces Covenant.

The hospice receives many letters of thanks and recommendations from patients and families, which are celebrated with staff teams.



## Feedback from Some of Our Partners

**Collaboration with other services and organisations is essential to the delivery of quality services. Here is a selection of feedback:**

“From the first time I reached out to St Teresa's and mentioned that I was keen to partnership work, it has been a wonderful experience.

Working together, joint visits and sharing specialities and knowledge base has been invaluable to enhancing the support we offer to individuals with learning disabilities. Your compassion and enthusiasm to support others to live well with the time they have is an example to us all.

I want to thank you for the support you have offered me and other learning disability nurses within the team. Your hospice and the care provided has been such a comfort to individuals and their families. It has meant we have seen good deaths, views respected and listened to in a timely and person-centred way.

Your service is so appreciated, and contributes to the rich tapestry of someone's life. Thank you for being there.”

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**Alice Jamieson**

**Health Facilitation Nurse, Learning Disability Physical Health Team  
Darlington TEWV**

“We are so grateful to have the services provided by St Teresa's Hospice, when referring patients and families there we know that they will receive excellent care and support.

During the last year we have established a partnership with The Wellbeing Hub to deliver complementary therapies to cancer patients who are on a curative pathway, enabling patients to have a reduction in symptoms and an improved sense of wellbeing.

This is paid for by the NHS charitable funds. In addition we are so grateful to be able to deliver the HOPE (Help to Overcome Problems Effectively) and Look Good Feel Better workshops out of the Wellbeing Hub, the space is relaxing and promotes a sense of calm which improves the effectiveness of these workshops. Thank you to the whole team at St Teresa's for delivering such a high-quality service for our community.

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**Susan Remillard**

**Macmillan Information Services Facilitator  
County Durham & Darlington NHS Foundation Trust**

The past year has seen the Specialist Team of the Clinical Nurse Specialists, myself, Palliative Medicine Consultant and the inpatient unit staff along with the wider hospice MDT continue to provide excellent care to patients, their families and friends. We have supported patients with a variety of diagnoses, physical, emotional and psychological symptoms. There have been increasing numbers of patients with learning difficulties within the service. Their care has been supported by deeper links between the hospice and the Learning Disability Teams which we hope to continue to develop.

As the Consultant in Palliative Medicine working across Darlington the closer collaboration between County Darlington and Durham Foundation Trust, GPs and St Teresa's over this year has helped to promote the best care for patients. There are likely to be more opportunities for collaboration in the year ahead, particular, with the uses of IT systems to share important patient information, which can only be positive.

**Dr Claire MacDermott**

Palliative Medicine Consultant Specialist, Palliative Care Team  
Darlington Memorial Hospital, CDDFT





# Section Four: External Statement



North East and  
North Cumbria

**Commissioner statement from NHS North East and North Cumbria Integrated Care Board (NENC ICB) for St Teresa's Hospice Quality Account 2024/25.**

NHS North East and North Cumbria Integrated Care Board (NENC ICB) is committed to commissioning high quality services from St Teresa's hospice. NENC ICB is responsible for ensuring that the healthcare needs of patients that they represent are safe, effective and that the experiences of patients are reflected and acted upon. The ICB welcomes the opportunity to review and provide comment on this 2024/25 Quality Account.

**Overview**

The ICB would like to thank St Teresa's hospice for the openness and transparency reflected in this year's Quality Account. The ICB would like to commend all staff for their commitment and dedication demonstrated throughout these challenging times and for striving to ensure that patient care continues to be delivered to a high standard.

**Achievements**

The ICB would like to congratulate St Teresa's hospice and its staff on the achievements made during this period. The ICB recognises the attainments detailed within the Quality account, which include

- The introduction and implementation of a new Quality Management System 'My Compliance'. The system's benefits are identified within the Quality account however the ICB appreciates that the embedding of a new system can require a period of time and welcomes the ongoing progress of this within next year's Quality account
- Enhancing Spiritual Care as part of Holistic, Person-Centred Support in line with the Ambitions for Palliative and End-of-Life Care (2021-2026). The ICB applauds the hospice's achievement in the introduction of the Spiritual Care Framework and the implementation of new volunteer and staff roles to support this fundamental part of holistic care. The ICB is supportive of the hospice's continued commitment to this priority and look forward to the creation of a Reflective Space within the hospice and furthermore the recruitment of additional staff and volunteers.
- Stakeholder Engagement – Building Stronger Links with GP Practices, it is evident that the hospice has made significant progress with this priority by the increased membership of Gold Standard Framework (GSF) meetings, the collaborative working with GPs and the dissemination of key information to stakeholders. The ICB recognises the progress the hospice has achieved so far and looks forward to the next steps within this priority within the coming year.
- Staff Wellbeing, by supporting and retaining a team that is essential in delivering high-quality care and we note the improvements the hospice have made, including the appointment of a new Freedom to Speak up Guardian and proactive support for staff experiencing stress within the workplace.

[www.northeastnorthcumbria.nhs.uk](http://www.northeastnorthcumbria.nhs.uk)

NorthEastandNorthCumbriaNHS

NENC\_NHS

Better health and wellbeing for all...

# Section Four: External Statement

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## **Future Priorities**

The ICB is fully supportive of the identified Quality Priorities for 2025/2026 including the implementation of your ageing well programme, developing inclusive care, improving end-of-life care for people with learning disabilities and volunteering for health and the work to enhance local infrastructures and inclusion through strategic partnerships.

The ICB can confirm that to the best of their ability the information provided within the annual Quality Account is an accurate and fair reflection of hospice performance for 2024/25. It is clearly presented in the required format, contains information that accurately represents hospice quality profile and aspirations for the forthcoming year.

NENC ICB remain committed to working in partnership with St Teresa's hospice to assure the quality of commissioned services in 2025/26.

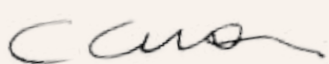
Yours sincerely,



**Vicky Playforth**  
Interim Director of Nursing,  
NHS North East & North Cumbria Integrated Care Board

## Endorsement by Senior Directors

We the undersigned confirm this Quality Account as a true and accurate assessment of the standards at St Teresa's Hospice:



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Carol Charlton  
Chair Board of Trustees



Nicola Myers  
Chief Executive Officer

To the Hospice At Home Team.  
Just a little token of my thanks to you all for your  
kindness and care to [my family].

They both thought you were absolute angels and that  
enabled [my loved one] to have a comfortable few  
weeks at home before her death.

We will be singing your praises always. You are a credit  
to the hospice and Darlington as a whole.



# St Teresa's Hospice

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