

THE ANNUAL GENERAL MEETING OF THE BOARD OF TRUSTEES OF LINDSEY LODGE HOSPICE FOR 2020/21

Minutes of the Meeting held 3 August 2021

Present: Alan Bell (Chair), Pat Webster (Deputy Chair), Karen Griffiths (Chief Executive), Dr Lucy Adcock, Andrew Horwich, Mike Rocke, Pete Wisher, George Thomas, Nik Dakin, Peter Stapleton, Darren Topp, Joe King, Tom Moody, Jenny Baynham, Kay Fowler & Lizzie Orwin.

In Attendance: Ruth Tuxford - Meetings Clerk

The Chair welcomed everyone including staff and the public who were attending the meeting.

- 1 <u>Apologies</u> John Roberts and Jane Lacey-Hatton.
- 2 <u>Minutes of the 30th Annual General Meeting</u>
 The minutes of the meeting of 7th July 2020 were reviewed and formally adopted by the Board.
- Chief Executive's Annual Report 2020-21, Karen Griffiths; Chief Executive

 Karen Griffiths informed attendees that the Chief Executives Report and Annual Quality Report were integrated into the 2020/21 Annual Review Booklet which this year takes a new format designed by the PR and Communications team. Copies were circulated to Trustees and available to participating public, but will be available on our website:

 https://www.lindseylodgehospice.org.uk/LindseyLodge/media/Lindsey-Lodge-Media/Downloads/Annual-report-2020-21.pdf

Karen noted that this was her fifth year at Lindsey Lodge now in its 29th year adding that nobody would have predicted what 2020 would hold, and during her review was reminded how everyone from North Lincolnshire health and social care sectors have pulled together throughout the pandemic to meet the needs of local patients and their families. Whether staff, volunteers, healthcare professionals locally, fundraising supporters, or numerous other kind-hearted individuals, she felt incredibly proud and humbled to be part of a team of people who ensured our patients remained at the heart of every decision made.

As Lindsey Lodge moved through 2020/2021, the focus was to maintain services with the inevitable constraints of living alongside the Coronavirus. Prudent financial and business management, coupled with increased non recurrent statutory funding had buffered the inevitable loss of charitable and voluntary income. As demonstrated in the Annual Review Lindsey Lodge has very strong, loyal public support and committed staff and volunteers who have helped on the road to recovery and into a bright new future.

KG went on to highlight key areas of note in her Annual Report:

• Lindsey Lodge Hospice and Healthcare:

Changes made to our branding reflect the wider contributions to healthcare now provided, particularly in respect to those living with life limiting conditions. More effective treatments are allowing people to live and cope longer with a long term conditions and the hospice prides itself on care provision, both as inpatient and day attendee which is aimed at improving quality of life experienced by those suffering.

In response to pressures across the wider health sector, as a consequence of the Covid pandemic, the Hospice was able to widen the ability to accept non-hospice patients to Counselling and Support Service and in addition, place more focus and resources on Fatigue and Breathlessness services to relieve pressure for other health partners facing increased demand for respiratory treatment due to the longer-term impact of Covid.

• Strategic Direction:

The hospice played a significant role in supporting the wider healthcare system by avoiding hospital admissions and relieving the pressure on acute beds in NHS hospitals. In 2020/21 35% of admissions to IPU were directly from home.

The remaining 65% of patients were admitted from acute hospitals, freeing up acute bed capacity.

Despite disruptions caused by the Covid pandemic, the Hospice has successfully built on the Hospice Liaison service, introduced in order to facilitate the clinical transfer process between the acute and end of life sectors.

A strategic direction was agreed in 2018 aiming to steer work over a three year period, it is pleasing to note much of this has been achieved and the Board's ambition to refresh this in linking to the Northern Lincolnshire End of Life strategy is currently been developed. The Hospice tracks and publishes its quality data, and is continually learning and improving. Our aim is to give all our patients the best possible experience. Where we can do better, we strive to learn from experience for next time. Every quarter statistics are published and shared with North Lincolnshire and East Riding Clinical Commissioning Group (CCG).

The hospice looks at patient trends, areas for improvement and ways to work differently - thereby enhancing the services provided. The included Quality Report summarises this activity.

Inpatient Unit:

IPU staff went above and beyond to reach out to families and carers during the pandemic, creating patient memories and keepsakes, such as the pairs of small handmade hearts to give to patients and their families - this was a great way for them to feel connected while they were unable to see each other.

Sharing patient stories and their experience plays a key role in raising awareness in the local community of the services we provide at Lindsey Lodge, in addition to the important role that hospices play in the wider health community.

Due to demand for bed capacity and safety/visiting restrictions during the Covid-19 pandemic, we temporarily suspended our respite service for a while, but were able to resume bookings as soon as it was safe and appropriate to do so.

Dr Ahmad Al-Khattat was employed in the role of Specialist Doctor until retiring in January 2021. We thank Dr Ahmad for the excellent care and support, and will welcome his replacement Dr Faye Boothroyd into the role, with a start planned for June 2021.

The Hospice recognises the need to facilitate admissions across seven days of the week and understand the need for specialist palliative inpatient services does not just arise Monday to Friday. During the first few months of 2021, the clinical team undertook a pilot in collaboration with Northern Lincolnshire and Goole NHS Trust, in which the Hospice offers 24 hour medical support via an on call system. We extend thanks our on call medical staff for working over and above during the past 12 months to support patient care and clinical staff.

Wellbeing Centre

As we entered lockdown, all Wellbeing Centre services were advised to close for face-to-face support which affected every service including day care, counselling and support, complementary therapy and lymphoedema and outpatient therapy services.

The whole team quickly adapted, converting all service provision to 'virtual' methods be that telephone or video call.

Funding was secured via grants to complete major refurbishment throughout the Wellbeing Centre, ensuring the appropriate standards of care were met - particularly from the infection control perspective. We certainly have a new look Wellbeing Centre.

Despite the restrictions placed on face to face appointments, the Bereavement team have adapted their service to work remotely, providing telephone/video support, as well as extending their reach to include NHS staff and the wider North Lincolnshire community during the Covid-19 pandemic. This saw case load grow significantly.

We have taken on a further counsellor to support the increased workload and accessed regular staff supervision for the team given the demands in this service.

Through nomination by North Lincolnshire Council, our Bereavement and Family Support Service was awarded a £10,000 grant to help us provide this support.

Despite the continued challenges, Wellbeing have continued to provide safe, caring and compassionate support for patients and their families. They have maintained resilience and striven to deliver a gold standard service despite difficulties and frequent changes.

Training

The Covid-19 pandemic significantly affected delivery of education and training across Lindsey Lodge. All learning packages were reviewed and adapted to ensure relevance and context, and identify any potential gaps. The statutory and mandatory training was streamlined and core elements and staff groups were prioritised. At the end of March 2021, statutory and mandatory training compliance across all clinical and non-clinical staff was 100%, which exceeds our target.

New and innovative training methods were adopted in particular virtual learning, e learning, webinars and workbooks.

Infection Protection and Control was a necessary focus of the education and training programme. Staff received significant additional training and education working with specialist partners in Personal Protection Equipment use, hand hygiene and infection prevention and control procedures.

The Hospice Registered Counsellor delivered several sessions on coping with bereavement and loss to local funeral directors and Humber, and Wolds Rural Action Volunteer Hub. Numerous staff have led Project Echo Learning sessions for their End of Life Networks.

Asset Base

Karen went on to outline current asset status advising that although the Hospice's retail and fundraising activities were severely restricted during 2020/21 it was extremely pleasing to note income from our local population, in community, memorial and general donations increased significantly during the pandemic. The Trustees recognise this is testament to the high regard the local public has for Lindsey Lodge and willingness to support it during these unprecedented times.

The Trustees therefore wish to thank the public for their support and donations during the Covid pandemic.

By pure coincidence the Hospice received its highest level of legacy income during 2020/21. Legacies received during the year totalled £0.73mil, which the Trustees believe reflects the significant degree of goodwill the Hospice has built across the local population over the years within the area. The increased legacy income, combined with financial support provided by local and national government agencies, meant a total income of £4.87mil was generated during the financial year. Although an increase of £1.40mil over the preceding year it should be recognised that a significant proportion is non-recurrent income and not automatically available to the Hospice in future years.

In June 2020 the Board of Trustees signed off a programme of financial savings which, over a full year, generates cost reduction of £0.45mil. These savings related to pay and non-pay budgets; and was designed specifically to not impact on the ability to secure the volume and quality of clinical services. Delivery of a large proportion of the savings programme was in-year and, as a result, net expenditure fell by approximately £0.24mil

Therefore, through a combination of non-recurrent increase in income and the savings programme put in train, during the second half of the financial year the Hospice reported a surplus of £1.4mil prior to depreciation.

An outline of future aspirations for the Hospice followed:

• Future Service Provision

The Hospice wishes to build on learning over the past 12 months and on the partnership and collaborations developed. Whilst activities and plans this financial year have been heavily dominated by the Covid pandemic, the after-effects are likely to have significant influence on future plans - both for the Hospice and the wider health and social care community it operates within.

We believe there will be a significant focus nationally on need for the construction of local, cross organisational health community plans - both to ensure the community has access to sufficient bed capacity and to ensure it is able to restore overall health capacity in a post-Covid world.

The Hospice, during the course of this financial year, has been actively participating in cross-community planning work; building on the lead and initiatives which senior leadership of the Hospice had previously entered into. Collaborative work has already started with colleagues across the hospice sector in order to share best practice and co-ordinate service initiatives over other health sectors - including acute, community and social care.

The following support teams had been critical to hospice support and progress over the year:

Non Clinical Team

Our **Board of Trustees** are responsible for the strategic direction and governance of Lindsey Lodge, ensuring we fulfil our objectives, and adhere to our vision and values. The Trustees are volunteers and we thank them for their enormous contribution to our organisation over the course of the past year, much of our communication has been done remotely via Zoom conferencing, and we greatly appreciate their commitment and support.

Our Trustees are very active in our oversight and governance arrangements. The duties for a Trustee cover four broad areas:

- Financial responsibilities
- Accountability to beneficiaries and charities commission
- Conduct
- · Decision making.

Every year we hold an Annual General Meeting (AGM) to present our Annual Review, the Quality Account and Annual Accounts, Last year's AGM was held on 7 July and Alan Bell was appointed as new Chair, with Dr Patricia Webster as Vice Chair.

Chair Andrew Horwich decided to step down from his senior position, but remains on the Board as a Trustee. We'd like to take this opportunity to say a huge thank you to Andrew for his dedication and support over the past three years.

Subcommittees

Workforce - Chair Nichola Threadgold

Finance and Business Development - Chair Peter Stapleton

Quality Assurance - Chair Dr Pat Webster

We take this opportunity to thank trustees leaving us this year for their voluntary contributions and said good bye to Jim Dunn, Mark Lowden and Angela Lidgard.

We welcome former local solicitor John Roberts and newly-knighted former MP Sir Nic Dakin to Board of in February 2021.

Fundraising

Karen advised that despite the disappointment of cancellations and postponements of vast amounts of fundraising activity it provided the team with a unique opportunity to re-structure the approach to fundraising, offering time to reflect and adapt to the ever changing landscape of income generation.

Utilising the Government's Covid-19 Job retention scheme, a large percentage of the fundraising staff were placed on furlough from 23 March 2020. With a reduced management team tasked with ensuring the new fundraising strategy was implemented during the first Lockdown of 2020.

The fundraising and marketing teams aimed to ensure communications surrounding our clinical status and financial position were in real time to the public.

Offering a chance for the local community to support Lindsey Lodge through our Emergency Appeal campaign - the responses to our campaign were overwhelming.

In line with the Government road map for easing restrictions, the emergency campaign was gradually replaced with the successful #WENEEDYOU campaign, encouraging members of the

public to take on a personal challenge pledge, or host a fundraising activity. This proved to be extremely popular with some Lindsey Lodge fundraisers featuring on national radio!

As restrictions began to ease Lindsey Lodge fundraising made first steps into hosting activity for our supporters into the autumn and winter months. Aiming to ensure our supporters were safe meant the 2020 Glow Walk was unfortunately took place as a virtual event.

The fundraising team welcomed growth in the lottery, personal challenges, super draws, corporate support and unrestricted grant funding. Which largely offset the losses associated with face to face community events.

Virtual fundraising and digital innovation within income generation has been a huge task during 2020/21. Adaptations of the team and continuous personal development of skillsets has allowed Lindsey Lodge to run, albeit differently, some of the traditional campaigns.

In 2021 we saw the launch of a new sub-brand Challenge with Lindsey Lodge and our digital Remember Me Garden.

Reflection on a difficult yet incredibly rewarding year for fundraising brings mixed emotions yet optimism for the future of our services. Being proud of the contributions towards clinical care the team have been able to facilitate, and the team enters 2021/22 with renewed optimism and excitement.

Thanks to the team for their commitment and professionalism, the Brand Partners for their support and finally, the local community of Lindsey Lodge supporters.

Retail

Giving a brief resume of Retail, Karen stated that following the opening in February and March 2020 of three new Lindsey's Pre-loved Fashion and Gifts stores in Epworth, Gainsborough and Scunthorpe High Street (which also features a Wedding Loft), along with the re-opening if the newly refurbished Lindsey's at Home furniture store on Laneham Street in Scunthorpe, it was enormously disappointing to close all of our retail operations as a consequence of the lockdown measures, associated with the Covid-19 pandemic in March.

In order to mitigate employment costs all retail staff were fully 'furloughed' from 23 March 20, the shops were also eligible for business rates relief and business support grants provided by the Government and issued through local authorities, business which provided significant financial support to our retail operations during the financial year.

In line with the publishing of the Government's roadmap out of lockdown we re-opened the Retail Distribution and Donation Centre on 18 March 2020 to begin processing donations and preparing for the re-opening of non-essential retail on 15 June 2020, trading also resumed on our eBay platform.

We introduced strict social distancing measures and wearing of PPE, and risk assessments in our RDC and retail shops, to prepare staff return to work and protect them during the Covid-19 pandemic. These included enhanced cleaning/sanitising, hand hygiene and limiting access numbers.

Karen advised further savings arose from review of leases on all shops and renegotiating particular leases and exit some completely, closing shops which did not bring sufficient revenue to the hospice. We therefore closed Crowle and Willoughby Road shops permanently. In addition, after consulting with our retail workforce, we remodelled our retail function in line with the reduced retail portfolio, to ensure an affordable and flexible retail management team going forwards. This resulted in a reduction of six posts across the retail business. We also closed the Brigg shop and planned to relocate to new premises in the town, but due to the ongoing restrictions on non-essential retail throughout the year, and the lack of suitable alternative premises, we are yet to re-open a shop in the town. However, after being notified of the sale of our large Barton shop, there was need to relocate premises and we signed the lease on 19 March 2021 which allowed the introduction of furniture to the Barton portfolio. A cautious approach to re-starting trading was made following first lockdown restrictions lifted from 15 June 2020, and selected three pilot shops - Gainsborough, Thorne and High Street, Scunthorpe with full retail portfolio back up and running by the end of September 2020,

unfortunately with only two months full trading in October and December, due to further lockdown restrictions.

The changing face of our high street even for long established businesses led to developing other channels to market by implementing Facebook Marketplace and other social media platforms to reach online buyers and drive footfall. We continue to develop our online presence, to both promote ourselves and our goods to reach a wider customer base. Karen praised the whole retail team which has shown great resilience in facing the wide variety of challenges in the past year, and for remaining committed to supporting our retail activities to re-open and recover, with thanks to all for this.

Workforce Team

Karen reaffirmed this has been a challenging period for all our teams and Workforce had remained engaged to support individuals on all matters affecting their employment and wellbeing.

A robust framework for the regular Covid-19 testing of staff, volunteers and visitors has been established. Working closely with our colleagues in the local Trust leading the vaccination programme, to co-ordinate and enable the vast majority of our staff and volunteers to receive their vaccinations.

Organisational reviews were conducted in a number of areas between July 2020 and January 2021, resulting in nine redundancies (four voluntary and five compulsory redundancies) and progressed in line with the Hospice's agreed change management policy and good employment practice. These changes were progressed to reflect a reduction in our retail units and the efficiencies arising from organisational restructures.

The Board formally decided in January 2021 to move away from Lindsey Lodge mirroring the NHS agenda for change pay and conditions to determine their own local arrangements for assigning both cost of living and other pay increases. It was agreed as part of this process the Hospice would seek to remove NHS redundancy provisions in their employment contract and replace it with statutory provisions. As such a formal consultation exercise was completed. She further advised, a remuneration committee has been established and terms of reference agreed. The committee will be responsible for setting the strategy for pay and terms and conditions for hospice staff going forwards.

A new workforce information system 'Staffcare' has been implemented. This system provides essential workforce information on a range of HR related subjects and is also an e-rostering system, supporting the effective use of staffing resources across all areas and resulted in more cost-efficient staffing within the Inpatient Unit team.

Our planned **Staff and Volunteer** awards evening in May 2020 to recognise and celebrate our amazing workforce unfortunately had to be cancelled as a result of the pandemic, the event will be held in February 2022.

Wellbeing at Work

Lindsey Lodge take mental health and wellbeing of staff in the work place very seriously and have appointed six mental health first aiders to support and signpost staff.

During 2020 we have signposted staff to a number of NHS support agencies and networks offering physiological and practical support for coping mechanisms during the pandemic and beyond. Headspace, Unmind and Daylight were offered to staff for free, all of which promoted ways to improve sleep quality and encourage mindfulness and meditation.

• Finance Support

Karen announced Finance Manager Joe King who leads the small Finance team, has now completed his first two years of his CIMA qualification and now in final year of chartered management accountant.

Administration

Karen advised a decision was made during 2020 to bring the administration staff together as one team to act as a central hub providing all key admin tasks for the business and to support all areas through any peaks and troughs with Kay Fowler, Business Manager, leading the team. Admin work practices were reviewed to maximise efficiency and reduce duplication of work

across areas. In addition, the Reception team which is run by Volunteers also came under the responsibility of the new team.

• Staff Engagement

We continue to hold regular staff and volunteer engagement sessions, which have been well attended by our team. Themes have included our future strategy, fundraising as well as consultation on future developments of our land and services.

Volunteers

The past 12 months have challenged our traditional models of volunteering, we have needed to restrict access to the Hospice, close our retail outlets and everyone has been urged to stay at home. We have tried to keep in touch through emails, newsletters and keep in touch phone calls with volunteers to keep them updated about what's going on, in and around the Hospice. Not everyone has felt able to return, but we have also welcomed a number of new volunteers into the organisation.

Karen took the opportunity to say thank you to all of our volunteers - past and present - without all of you, we certainly wouldn't be able to do what we do.

• Information Technology and Information Governance

During the pandemic we had to react quickly to ever changing IT requirements which allowed staff to work remotely and communicate with each other by embracing Microsoft teams and Zoom software.

Communication, PR & Marketing

Karen remarked that never before has our online communication with our patients, staff, volunteers and supporters been more crucial.

Our marketing team have really risen to the challenge, producing high quality social media marketing and innovative digital campaigns to support our income generation activities, updates on care, as well as providing live streaming of key events.

In just 12 months the total reach of our Facebook posts has increased from 1 million (2019) to 2.14 million (2020) and engagement (likes, comments and shares) increased by 46% over the same period.

The virtual Glow Walk was a busy evening of feedback thanks and encouragement to followers, and virtual Light up a Life ceremony was broadcast live over Facebook on a windy and wet Friday 4 December evening from the Hospice's Memorial Garden, encouraging viewers to light up a life from home. It has been viewed by over 6,500 people and reached over 11,600 people. Well done to the team for another creative and productive year!

• Catering and Housekeeping

The Catering Team experienced lengthy disruptions to our Lindsey's Meet and Eat Restaurant due to the Government restrictions, and only briefly re-opened in August to welcome our customers back with support of the 'Eat Out to Help Out' scheme.

Karen noted the generosity of the public and through weekly donated food with, offers of free produce and subsidised prices from suppliers supported our cost saving exercise during the financial uncertainty.

We have always been very proud of the quality of our Housekeeping activities, but as a result of the pandemic there was a need to raise our already excellent standards even higher with an increased focus on infection prevention and control.

Garden

North Lincolnshire Council have entered into a Service Level Agreement to maintain the hospice gardens. They have donated many shrubs, bedded plants and herbs, plus a raised planted bed, and a centre piece that should be with us shortly.

Karen wished to thank the SMT for their support and pass on her sincere thanks to all staff, volunteers and supporters for their excellent care and service, their positivity, hard work and "keeping the wheels on the bus" during a testing year.

4 <u>2020/2021 Annual Quality Accounts, Dr Pat Webster, Chair of QA Sub-Committee - in the</u> absence of Director of Patient Services

Dr Pat Webster introduced herself as the Chair of QA Sub-Committee. Prior to reflection on Quality Accounts for 2020/21 she expressed pride in the quality of care provided at the Hospice.

The Hospice experienced three Covid outbreaks across Q3 and Q4 and Recovery Plans were produced in line with the national planning guidance and the Emergency Response and Recovery guidance.

The pandemic disrupted our way of life and impacted on the way the delivery of essential services within Lindsey Lodge across 2020/21.

Care Strategy

The Covid-19 pandemic has accelerated the need for palliative, end of life and bereavement care in the UK and exposed weaknesses in health care systems. Palliative care services have played a front line role that is recognised both nationally and at a local level.

The year has been most challenging for health and social care sectors and hospice services have faced unprecedented issues. The clinical teams have risen to the challenge, showing a strength to change practices, a flexibility to cope with increased demands and frustrations from continued wearing of PPE and increased cleaning regimes. At times having to close beds to admissions due to infection control guidance, we had to restrict our visiting patterns and numbers for those able to visit, and this together with patients wanting to remain in the safety of home, has affected our in year activity.

• Response to Covid-19

It was essential following a third outbreak that the way in which we returned to business following an outbreak within the setting was identified. Plans were established with North Lincolnshire Council Public Health, North Lincolnshire CCG and Public Health England colleagues, all involved in regular meetings and agreed recovery actions with us. Closure of the whole Hospice was required in January 2021, but we were able to remobilise as a service in a safe manner, taking staff health and wellbeing into consideration. The Hospice went further with education and training and refurbishment, than advised, in order to achieve longer-term benefits to the delivery of services in the future.

The Hospice received national support monies which were dependent on Lindsey Lodge Hospice guaranteeing the provision of base level of capacity - the provision of this capacity was monitored via the Department of Health led NHS Capacity Tracker, to be completed twice daily over seven days.

Due to restrictions as a consequence of the Covid-19 pandemic, activity figures do not portray a representative articulation of the potential use of the bed and service capacity provided, given that it was necessary to close a significant proportion of this capacity during certain parts of the year.

The hospice was able to widen its ability to accept non-hospice patients to Counselling and Bereavement Support Service. Referrals to this service have been received from patients, families and care sector staff coping with loss during the pandemic, with additional staff utilised to provide a timely responsive service.

In addition, we received referrals to our Breathlessness and Fatigue services in order to take pressure off health partners as demand for respiratory treatment increased.

Inpatient Unit - 2020/21 occupancy 60% (10 bed) 2019/20 74% occupancy. Average 8 night stay.

Wellbeing - 2020-21 Admissions 25, follow up Appointments 2,146. 2019/20 Admissions 104, follow up Appointments 2,493. Breathlessness Service - 2020/21 Admissions 56, 2019/20 Admissions 54. Counselling & Support - 2020/21 Remote Sessions 933, 2019/20 Remote Sessions 312.

End of Life Pathway

The care strategy covers the period from 2021 to 2026 and the partners' ambitions for end of life services for adults, work has already started making the improvements set out in the ambitious strategy, but this will be an ongoing process and the partnerships are established to deliver on plan. The achievements so far:

Introducing ReSPECT (Recommended Summary Plan for Emergency Care and Treatment) ReSPECT creates a personalised recommendation for a patient's clinical care in emergency situations where they are not able to make decisions or express wishes.

Implementing Electronic Palliative Care Co-ordination Systems (EPaCCS)

EPaCCS record people's care preferences and important details about their care at the end of life. Information, available 24 hours facilitates co-ordination in care.

Education and Training

The partners have adopted a standard competency framework for End of Life care skills and the Chief Executive is taking the patch wide lead on this work stream and leading development of education and training materials.

Partnership Working

A relationship has developed with **St Andrews Hospice** in Grimsby and a number of key overarching agreements and guidelines have been agreed by the respective Hospice Boards, namely the establishment of a Partnership Project Board and Joint Senior Management Team (SMT) meetings have formed supportive relationships with each other. The sharing of knowledge, expertise and mutual support has been beneficial over the past 12 months, we are committed to this relationship.

The **Humber Coast and Vale (HCV) Hospices** are 7 hospices who all have ambition and expertise in delivering palliative and end of life care. We will develop a single hospice voice to represent the 7 hospices at HCV Strategic meetings which are unfolding to reflect changes in the 2021 White Paper.

We are part of the **North LincoInshire Integrated Adults Partnership** Board meeting monthly to help shape and deliver a strategic commissioning plan for 2020/2024. End of Life is a key work stream and we are very key to supporting direction and improvements in care for local people. **Executive Clinical Leads in Hospice and Palliative Care (ECLiHP)** is a forum for all executive clinical leads and Maureen Georgiou, Director of Nursing and Registered Manager has been an active member of the Yorkshire and Humber ECLiHP and a deputy chair of this forum. We are able to share new practice ideas and seek support from other members who may have encountered similar issues.

The **Project ECHO** North and North East Lincolnshire hub has been hosted by Lindsey Lodge and continues to provide high-quality, relevant training to care staff across the area. This partnership has delivered training and education across North and North East Lincolnshire to staff in residential, nursing, hospice, acute and primary care settings. The concept of delivering training using IT shared platforms has really evolved during Covid -our most recent milestone has been the completion of 200 hours of training to 2000 participants.

• Care Services - Inpatient Unit

Respite care on IPU gained momentum, with regular uptake prior to commencement of the Lockdown. We continue to be part of the North Lincolnshire Dementia Strategy Group which enables us to be part of improving the lives of patients and their families living with Dementia. The Advanced Assistants (AA) have continued to have a positive impact on patients, and we have been able to maintain seven day working within AA roles which has led to increased continuity of care on IPU. More staff have undertaken the Edward Jenner NHS Leadership programme and the Mary Seacole Leadership programme

Development of a more robust Tissue Viability Team on the IPU has ensured more evidence based practice. The roll out of E-Prescribing remains very much on our agenda and several staff have attended initial training. It remains one of our top priorities for the next year. The development of an Advanced Nurse Practitioner within the Hospice is really exciting and has been planned. Working closely with the medical team it will enhance the weekend patient admissions.

The Hospice has always welcomed students within the IPU team, unfortunately this was unavailable during the past year. Students have now returned and we have had some very positive feedback from them regarding learning experiences.

• Care Services - Wellbeing

We closed our Wellbeing Centre services in March 2020 as the pandemic took hold, in order to restrict movement of the population and support the 'stay at home' guidance received from the Government. All patients including wellbeing, lymphoedema, complementary therapy, counselling and bereavement support, outpatient services (breathlessness/fatigue clinics) were transitioned into remote contacts creating very different working for our staff, who developed of new and innovative ways of working within the Wellbeing Centre team.

All resources were converted to online/written information that could be distributed to patients and the Breathe Easy Enablement Programme converted from face to face to a remote package enabling continued support.

The Wellbeing Centre staff supported the continued integration of therapy services including development of physio/occupational therapy (OT) assessment for the Breathlessness Clinic and reduced waiting times across the clinic from 12 months to around eight to 12 weeks. The Wellbeing Centre continues to consider 'one stop care' maximising care for patients and HCA competencies have developed to deliver support, with the use of the lymph flow machine enabling wider access to services and timelier provision. There has been a start-up of a fatigue clinic specifically to support individuals with long-Covid symptoms.

CCG non recurrent funding and grant applications were made available for a full Wellbeing refurbishment including seating and flooring to meet infection control standards in line with Covid-19 requirements.

Support was developed and provided using digital platforms to be available for both one-to-one and groups, and the Christmas party was held over Zoom for Wellbeing Centre patients. There has been a welcome return of student nurses across both Inpatient Unit and Wellbeing, a re-connection with the Clinical Psychologist, including reintegration of the emotional pathway assessment, and we have two occupational therapy students for the first time at the Hospice.

Infection Prevention and Control

We have an established IPC network in place at Lindsey Lodge that has led IPC work during 2020/21. We have been supported with specialist advice from North Lincolnshire CCG and Public Health England throughout the last 12months and this has been absolutely vital to provide assurance on our infection control and prevention measures. We have taken up the opportunity on several external 'fresh eyes' inspection visits to support our management during the pandemic.

In order to support and continue this programme of work, Lindsey Lodge have pursued a means to substantiate the availability of specialist advice available to us and in conjunction with Northern Lincolnshire and Goole NHS Foundation Trust, will have designated access to specialist infection control nurse support from September 2021.

Numerous audits that have allowed external partners and us to develop and understand our IPC practices and identify any deficits that require action.

Patient Experience

It is important that we continue to seek feedback on our services and quality of care and patient experience is received by differing means. Patient experience is taken back to both the Quality Assurance subcommittee of the Board and Board in order that trustees are cited on patient experience and our reflection and learning from this. The featured patient story on Q16 of report and subsequent feedback comments strongly reinforces this ethos.

Clinical Compliance and Regulation - (CQC)

In March 2020, the CQC suspended routine inspection programmes in response to COVID-19 and developed monitoring of services using a mix of on-site and off-site methods. A telephone transitional monitoring call was made in February 2021 with supporting information offered in advance of the call.

Statement of Assurance from the Board

PAW informed that Lindsey Lodge develops its priorities for quality improvement by triangulating evidence available through a variety of internal and external sources.

These include compliments and complaints, incident reporting, national quality initiatives and standards, patient and family feedback, clinical audit and NICE guidance, as well as monitoring performance against other hospices.

A full range of quality measures has developed and how Lindsey Lodge is working towards achieving these measures continues to be reported to the Trust Board and the Quality Assurance Committee, which is a sub-committee of the Board led by Deputy Chair of the Board Dr Pat Webster and the Director of Nursing and Patient Services.

The Board will continue to monitor the progress against priorities for quality improvement and identified objectives for 2021/2022, with the provision of high quality care for patients and families being our highest priority and integral to all our clinical services.

The Deputy Chair extended the best of thanks to all staff and volunteers for their hard work and commitment during the year. With a firm commitment to continue the development of our services in response to patients and families, and looking towards a brighter year.

5 Presentation of Annual Accounts - Joe King, Finance Manager

JK introduced the annual Accounts by stating finances had been heavily dominated by Covid, which had been worrying because of income loss through closure of retail outlets and unknown fundraising income through imposed social restrictions.

Moving through the year the financial situation turned out to be very positive.

• Financial Performance 20/21

For the year 2020/21 the Hospice reported a surplus of £1,491,719 post depreciation and movement in investments. In the last financial year the Hospice reported a deficit of £369,816. The value of cash invested increased to £1,779,299.

The Hospice invested a further £250,000 throughout the year and there was an unrealised gain on current investments of around £263, 000 leading to a net gain just over £500,000 at the year end.

Lindsey Lodge's net worth of assets held at the year-end sits at £5,625,677. This includes the building, assets inside the building, the land, cash and investments. The figure has increased by around £1,492m meaning the Hospice's balance sheet has ended the year in a much stronger position that at the start of the year.

• Comparison of Trading Position compared to previous years.

The presented information demonstrated the improved year financially against the last 7 years, and helps negate the previous years' deficits and strengthen the balance sheet.

Key Performance Indicators.

JK felt the main contribution to the year's performance was due to the high level of non-recurrent funding the Hospice received throughout the year.

The total amount of Covid linked non-recurrent funding linked was around £1.7m, without which the year would have looked very different. The multiple streams that made up the £1.7m were:

- Further non-recurrent support from the CCG, with thanks for their support throughout the year.
- Government funding distributed via Hospice UK and sincere thanks for their effort in securing this funding for hospices.
- Local Authority grants for the Retail shops.
- Coincidental receipt of the highest legacy income received by the Hospice.
- Fundraising increasing net income on previous year. With huge thanks to the community for their continued support in a difficult year.

Historical trail of Legacy Income.

JK explained this was best year for legacies in the last nine, it is a sporadic source of income which the Fundraising Team have been doing more work around to improve.

He advised legacy income is impossible to forecast, but as demonstrated this year contributes greatly to the running of the Hospice.

Asset Base.

JK demonstrated the hospice asset base for past few years, which included the buildings, internal assets, land and cash in bank and investments. He added there had been a running deficit over past years, but due to good financial year the asset base level had increased putting the Hospice in a stronger position again.

• Clinical Cost Base.

Explaining the clinical cost base did not include cost related to fundraising and retail, JK explained these costs had risen over preceding 5 years, but 2020/21 was the first year clinical costs had seen a reduction.

2020/21 Budget

Although 2020/21 was a great year financially, JK advised with non-recurrent funding removed the next financial year budget is set to a deficit of £420k. One of the main contributors to this budget is due to the effects of Covid going forward.

To reduce this deficit, the priority is to generate further recurrent income, to this end the Hospice are actively reviewing further opportunities to expand our ability to provide services to the public and health community in North Lincolnshire.

JK explained that despite last year's financial performance placing the hospice in a strong position, there was a need to look at different strategic options in order to close the deficit and improve the Hospice's sustainability for the future.

6 Retirement and Appointment of Trustees - AWB

Chair, Alan Bell informed the meeting there were no retirements during the year. He referred to Andrew Horwich's retirement last year as chair, thanking him for his commitment and affirming the many years' service will continue with AH remaining a trustee supporting the Hospice.

AWB wished to thank the Trustees and all hospice teams for their hard work and commitment during a difficult year.

7 Nomination of Auditors

Peter Stapleton, Finance Committee Chair nominated Townsend as our auditors for the following year and asked for agreement to confirm. This was supported by the Board.

8 Questions from the Public

What were the prospects for the Fundraising Team given the current national stagnation trends?

TM responded stating the role of fundraisers had the potential to provide support to strategy project work and assist in the development of Hospice services and future sustainability. Fundraising remains a vital income stream for the hospice and there was every indication that the fundraising plan that had been re shaped was delivering successfully and the team were working well and had adapted very positively to new ways of working and engaging with our community and existing donors, thanks were reiterated to the team for their strong performance and resilience.

No other questions were received.

AWB, Chair closed the AGM at 4.55pm, and thanked all those attending.

9 AOB

No other business for discussion.