



ANNUAL REVIEW 2011/12

Going forward *together*...



katharine
house
hospice 
embracing life and living



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ORJ Solicitors, in line with our ongoing commitment to Katharine House Hospice, are delighted to again sponsor this year's Annual Review.

We continue to support the Hospice in memory of a much missed colleague who sought their care and support last year.

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Emma (left) with her dad Gerald and best friend Hannah



“As a family the Hospice has continued to work together with us. Katharine House provides support when and where we need it.”

Emma Fearnside

Introduction...

I lost my mum to cancer in February 2011. She spent her last few days at Katharine House Hospice. I wasn't sure what to expect from Katharine House as you always assume that hospices are gloomy places, but things were very different than I expected. I couldn't believe the care my mum received, everyone was absolutely brilliant. The nurses made my mum comfortable and were so nice to her and my

family. We could never thank the Hospice enough for the care they have shown us.

My best friend Hannah and I decided we wanted to give something back to the Hospice and spent our summer holidays from University baking cakes to sell to local people, businesses and even Staffordshire police to help raise funds. We baked over 400 cakes through the summer - we used mum's recipes.

As a family the Hospice has continued to work together with us. Katharine House provides support when and where we need it.

On behalf of my family I would like to take this opportunity to thank everyone at Katharine House Hospice for the care and warmth they have shown and continue to show.

Emma Fearnside

Putting the team *together...*

In 2011/2012 the Hospice invested in additional time from a Medical Consultant, a Specialist Nurse, Occupational Therapist, Physiotherapist, and Chaplaincy in addition to the social work and counselling support already available. Our Multi-Disciplinary Team means that the Hospice can now offer an holistic approach to patient care and support for their families.





Hannah Tattersall

Jenny Rawsthorne

"We work both with in-patients and Day Therapy patients. In-patients can find it hard to get up and about, day patients can often be wobbly and unsteady due to a decline in their condition. We help with mobility problems through education and exercise. Some in-patients have even been given walking aids which they can take home with them after discharge to make them safe and steady in their home".

Hannah Tattersall Senior Physiotherapist

"A patient's condition can lead to changes in their function which mean they can find it hard to adapt to domestic and other activities. We work together with other members of the Hospice team to promote patient independence".

Jenny Rawsthorne Occupational Therapist

"We work with the care teams to arrange patient discharge from the In Patient Unit and with other areas of Katharine House care including Day Therapies and At Home. We also help to arrange discharges from hospital. We ensure that patients are discharged to their preferred place of care, whether this means nursing care or home".

Gill Knight Social Worker

"We help with housing issues and welfare benefits, working with community services enablement teams. We work for Staffordshire County Council as well as the Hospice which means the social work service at the Hospice provides a direct link and instant access to social services".

Kate Smith Social Worker



Gill Knight

Kate Smith

A Day in Day Therapy

The day begins when Katharine House Hospice volunteers kindly give up their time (and their cars) to pick up patients from their own home. Transport is also provided for patients who are in wheelchairs. Some patients arrive at Katharine House independently.

When patients arrive at around 10am they will meet their nurse, the volunteers and other patients attending Day Therapy. On the first visit patients often invite a friend or relative to come with them. When they arrive tea, toast and biscuits are served. After a cuppa patients choose what they want to do. For example they may wish to relax quietly in a reclining chair, join the 'gardening group', have a massage, join the art group or have their hair done, have a 3 course lunch or afternoon tea - the choice is theirs.

After an enjoyable day volunteers take patients home later in the afternoon.

"They thoroughly enjoy it and the camaraderie is second to none, they come week after week so we must be doing something right!"

Des and Clive, Volunteer drivers

Day Therapies 2011/12

- ✿ 66 patients attended day care
- ✿ 1546 attendances throughout the year
- ✿ It cost **£230k** to provide the service
- ✿ 63 volunteer drivers regularly brought patients to and from Day Therapies
- ✿ 66 volunteers regularly gave their time to help the Day Care team to support patients in Day Therapies



"Coming here has made such a huge difference to my life"

Norma, Day Therapy patient



Well Being Day

The new Well Being Day which runs every Thursday sees the introduction of Medical Consultant outpatient sessions for patients with a range of conditions and symptoms.

"Well Being Day will enable us to provide an improved service for the people in our community who need it the most. The service is open to anyone; from those who are newly diagnosed, to a person at any point during their illness. It is available for anyone who is experiencing difficulties relating to breathlessness, anxiety or fatigue or for patients with a diagnosis they are coming to terms with".

Shan Parkes, Advanced Nurse Practitioner



What is Well Being Day?

- ✿ The day enables patients to manage their illness at home following a 6 week personalised programme at the Hospice
- ✿ The aim is to keep individuals well and reduce the need for hospital admissions and GP appointments
- ✿ To help individuals adjust to their illness and live as well as possible



"Marmite on crumpets with an egg on top"

In-patient care at Katharine House Hospice

In-patient Christine is full of praise for the Hospice team and the menu, she said:
"The nurses here are lovely and so is the food. I often ask for my favourite - marmite - on crumpets with an egg on top! Nothing is too much trouble. One day the chef very kindly laid a table for me for a special curry meal - it was delicious and just like being in a restaurant. I am also very grateful to the lady who gives me massages, they get me off to sleep and before I can thank her I am snoozing".



*"Nothing is too much trouble"
Christine, in-patient*

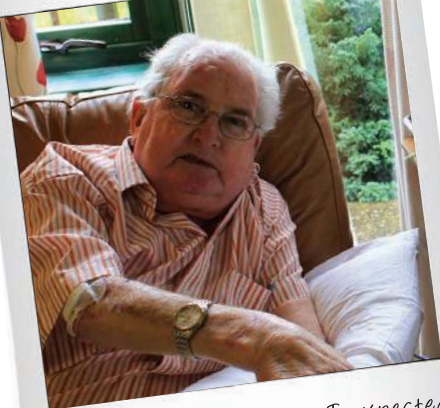


*"My wife has gone on a break without any worries"
Dave, respite care*

"I am a Day Therapy patient, but I am here for a week's respite care, this is one of the things that KHH does very well – looking after you while your wife is away and the house is empty. My wife has gone to Ireland and my neighbour is looking after the cats. All in all it is a very nice week to have in the Hospice and I am very well looked after. My wife has gone on a break without any worries and is enjoying herself with the family knowing I am being very well looked after".

In-patient care 2011/12

- ✿ 220 patients were admitted in 2011/12
- ✿ 2548 nights stayed by patients
- ✿ 11.6 nights is the average stay per patient
- ✿ 51% of patients are discharged
- ✿ It costs £1.45m each year to run the In-patient unit



*"The place exceeds what I expected"
Mike, in-patient*

"I was expecting something rather different to what I got. You assume there will be a certain amount of gloom and doom but it is more like jokes, humour and warmth with brightness and light that the girls pass on. I have been made very welcome. I couldn't ask for better food and accommodation it is first class. I would give them 11 out of 10 for their hospitality – the place exceeds what I had expected".



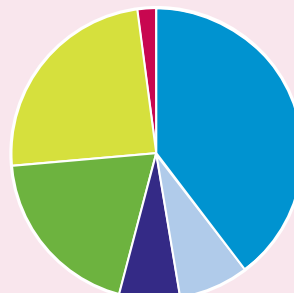
*Selwyn and his
partner Phyl*

Prior to becoming an in-patient at Katharine House Hospice, Selwyn Sturgess had been a day therapy patient. The In-patient Unit, like all care at Katharine House helps people to make the most of the time they have left - this includes providing whatever special requirements they have for food and drink. When I met Selwyn he was enjoying a glass of wine in comfort with his family. Selwyn said, *"I used to enjoy golf but about the past 5 or 6 years when this illness came on (which is a very rare one - there is no cure for it) I have spent a lot of time in hospital but I have no complaints. When it was suggested that I should come in to Katharine House I made the decision in my own mind to come here. I used to visit Day Therapies on a Wednesday and I was very grateful for Vince, a volunteer who brought me in each week by private car. I have known nothing but kindness at Katharine House Hospice".*

Selwyn's partner Phyl Broome said; *"I have been involved with the Hospice for 10 years by helping to raise funds through golf events etc. but until you see the care that Katharine House provides for yourself you cannot appreciate how excellent it is".*

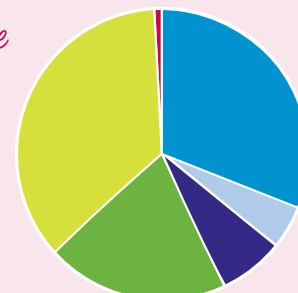
It is thanks to the support of our community that we can work together with patients and their families to support people until they die.

	2010/11	2011/12
	£	£
Donations, gifts, fundraising	1,113,988	933,817
Gifts in Wills	265,995	150,870
Lottery	230,614	219,883
Retail	668,436	621,846
Statutory Sector	843,219	1,070,638
Other	68,880	18,486



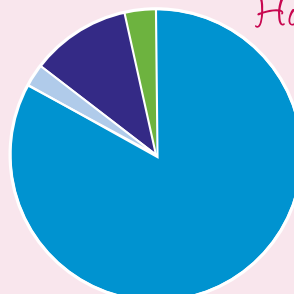
2010/11

Where our money came from...



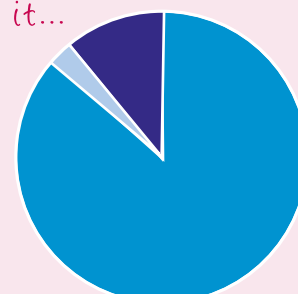
2011/12

Care	2,309,906	2,563,225
Governance	64,576	75,472
Fundraising	320,917	326,334
Capital	85,999	-



2010/11

How we spent it...



2011/12

Key Numbers in 2011/12...

- Nearly **1 in 5** people dying in the Stafford District received care from Katharine House Hospice
- 1 in 10** in Cannock
- We helped **845** patients and their families

- It cost **£2.6m** to run the Hospice
- £0** the price we charge for our services
- Not just for cancer, we care for patients with other progressive illnesses (85% cancer, 15% non cancer)

Moving forward together...

A final word from our Chief Executive

The Hospice remains in a good health, despite 2011/12 being a financially difficult year. Our revenue streams came under a great deal of pressure, as can be seen opposite, with all sources of income declining except statutory sector funding. Planned investments in care, in particular the first full year costs of the new At Home team, have pushed costs up. These factors have combined to bring the Hospice's finances under considerable pressure. But we have managed to break even, whilst investing in the development of future revenue streams.

The hard financial year is not reflected in the delivery of patient care, which has seen significant increases in the provision of services. Obviously a full year of the At Home team (compared to a part year in the previous year) has meant that the numbers of patients seen and visits made have increased dramatically. However, it is possible to see a continued upward trend in this service month on month.

The In Patient Unit has seen more patients admitted than in any previous year, whilst day care, lymphoedema treatments, and respite for carers hours have all increased. The attendance at the carers group has fallen, which is a point of concern, whilst drop-In attendances have fallen to their lowest levels for the last six years. This last point resulted in trustees reviewing whether the charity was delivering sufficient value from the use of its charitable funds. The conclusion that we were

not has led to the closure of this service and a re-use of the resources to deliver a Well Being day. This service is targeted at a short six week period of weekly attendances for a group of patients, during which time there will be medical, nursing, social work, occupational and physiotherapy assessments and support as required by each patient. Patients will be able to access support to help them manage issues such as anxiety, breathlessness, fatigue, and pain.

We look forward to launching a separate care agency – Embrace Quality Care Limited. Meanwhile, the Hospice looks forward to the appointment of a Family Support Team Leader, whose focus will be to strengthen our services to the families of our patients.

Although 2011/12 was a sound year for the Hospice and 2012/13 has started well, there can be no doubt that there are difficult decisions to be made about the use of our charitable funds in these very uncertain times. However, the continued and generous support of the local community in the Stafford, Cannock and surrounding areas both financially and by the donation of volunteering time, is helping Katharine House Hospice through these turbulent times.

It is the partnership between the community we serve and the Hospice that enables us to continue to move forward together.

Richard Soulsby, Chief Executive



“It is the partnership between the community we serve and the Hospice that enables us to continue to move forward together”

Richard Soulsby *Chief Executive*

You can help...

Katharine House Hospice in a number of different ways.

JOIN OUR WEEKLY LOTTERY

- All proceeds go towards nursing care at Katharine House Hospice.
- Every week someone will win a top prize of £1000, with a second prize of £200, third prize of £100, 25 winners of £10 and 140 winners of £5.
- A bumper £3000 prize draw every quarter - weekly lottery players will be automatically entered.
- Play weekly for just £1 and support Katharine House Hospice.

FILL A BAG AND BRING IT TO OUR SHOPS

1 bag of donated items could pay for 3 hours of nursing care at Katharine House Hospice.

RECYCLE YOUR FURNITURE AT KATHARINE HOUSE SHOPS

A sofa could pay for one full day of care for a patient at Katharine House Hospice. We collect for FREE, please call for details.

MAKE A DONATION

Every penny really does help us. If you would like to make a donation please call us on 01785 270808 or donate online at www.khhospice.org.uk.

You can even donate by mobile phone text.

TEXT: **Kath24 £2** to **70070** to donate £2.

You will be charged at your operator's standard rate for text plus donation.

VOLUNTEER

Volunteers represent a vital component of the Hospice's services. For patients and families, they bring a personal touch and for the Hospice, volunteers bring a diverse range of skills and life experience.



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