

Chestnut Tree House Quality Account 2019–2020

Our vision is that anyone facing life-limiting illness should receive the care and support they deserve.



Part 1
Introduction





The Board of Trustees' commitment to quality

The Board of Trustees is fully committed to the quality agenda. The hospice has reviewed its governance structure, with a Trustee sitting on the Quality Assurance Committee. This ensures that the Board of Trustees have an active role in guaranteeing that the hospice provides a high-quality service in accordance with its terms of reference.

Two members of the Board of Trustees undertake unannounced visits twice a year – gaining first-hand insight into what the patients and staff think about the quality of the service. The Board is confident that the treatment and care provided by the hospice is of high quality and is cost-effective.

The Coronavirus pandemic has meant that we have had to overcome challenges and ensure we apply best practice and learn from other professionals' experiences. Business continuity is paramount, but the Trustees and I are assured that, through the internal governance systems, the quality management within our hospices has not been overlooked or side-lined. We will continue to focus on providing excellent care to all those who need our services.

Patricia Woolgar
Chair of Trustees

Statement of Assurance from the Chair of the Board of Trustees and Chief Executive Officer

This is our seventh Annual Quality Account. On behalf of the Board of Trustees, and the Senior Management Team at Chestnut Tree House, I would like to thank all our staff and volunteers for their excellent accomplishments over the past year.



Chestnut Tree House Interim Chief Executive Officer's Statement

Welcome to the 2019-20 Quality Account which, I hope, you will find informative. We welcome questions and comments and please do contact me cathy.stone@stbh.org.uk for further information or clarification on any aspect of this account.

We have had a very busy year at Chestnut Tree House, and many developments have taken place during this time.

We were delighted to have collected an award on behalf of Chestnut Tree House at the Hospice UK Awards in Liverpool last November. The award, 'Innovation in Income Generation' was in recognition of our Sussex-wide Snowman campaign. This is a great accolade and one we are extremely proud of. We have also launched our new Intranet – The Heart – which acts as our go-to site for important information, news and resources and is helping us to connect as one team.

We have developed our new 5-Year Patient-Led Strategy and its related work-plans, as we strive to ensure that children, young people and adults, their carers and their families, are cared for and supported at the right time in the right environment, according to their needs and wishes.

The launch of the strategy corresponded with the Care Quality Commission's introduction of the new key lines of enquiry for hospices. The CQC is likely to place emphasis on the extent to which services are integrated locally and are well-led. The work we have already started as part of our Patient Led Strategy puts us in a good position to demonstrate this.

This year also saw the launch of our Environment and Sustainability Policy, as all of us can help make a difference and contribute towards making St Barnabas Hospices a greener place. The related programme of work will drive efficiencies, reducing waste and enhancing quality.

One of our strategic ambitions is to be leaders and innovators in research and education and presenting and speaking to our communities and peers about best practice, will not only share learning, but it will also enable close working relationships and collaboration with other organisations, including other hospices. To support our Research Strategy, we have appointed a Research Lead to take forward our ambitions set out in the strategic plan.

The database that Chestnut Tree House operated on, became limited in how patients' records were held and managed. To ensure accurate record keeping and ease of access and maintenance, we have implemented a new database. After some challenges that come with any new system, we now have a robust database that enables us to update records accurately and ensure compliance with the General Data Protection Regulations (GDPR).

We commissioned a feasibility study to review options for refurbishment of the house. It was a useful exercise that highlighted the potential re-structuring of the building, and therefore, some of the service provision. However, due to the COVID-19 pandemic, we have had to pause this project, and we hope to be able to re-visit it in the coming months.

To further improve both our service provision, and skills and knowledge of our care staff, we organised a series of education and learning sessions around ventilation of children and young people. These were well attended, and we are really proud to have so many of our care staff trained and able to support our patients in this way. We were delighted when Anna Jones, Clinical Manager at Chestnut Tree House, was nominated as a finalist in the Child Health category of the RCNi Nurse Awards 2020 for her innovative leadership in implementing 'Ventilation Month' and spearheading these training sessions.

At the end of this financial year, we have, as everyone else, encountered the challenges brought about by the Coronavirus pandemic. We all know that there will be some really tough times ahead of us, with the healthcare system, including hospices, falling under tremendous pressure. COVID-19 has had an immediate impact on Chestnut Tree House, as we had to suspend respite care both at the house and in the community, but we remained open for end of life care and emergency respite care.

I would like to take this opportunity to thank all our staff and volunteers. What we have achieved this year would have not been possible without all their hard work, focus and commitment not only for today, but also their dedication to improving our services for tomorrow.

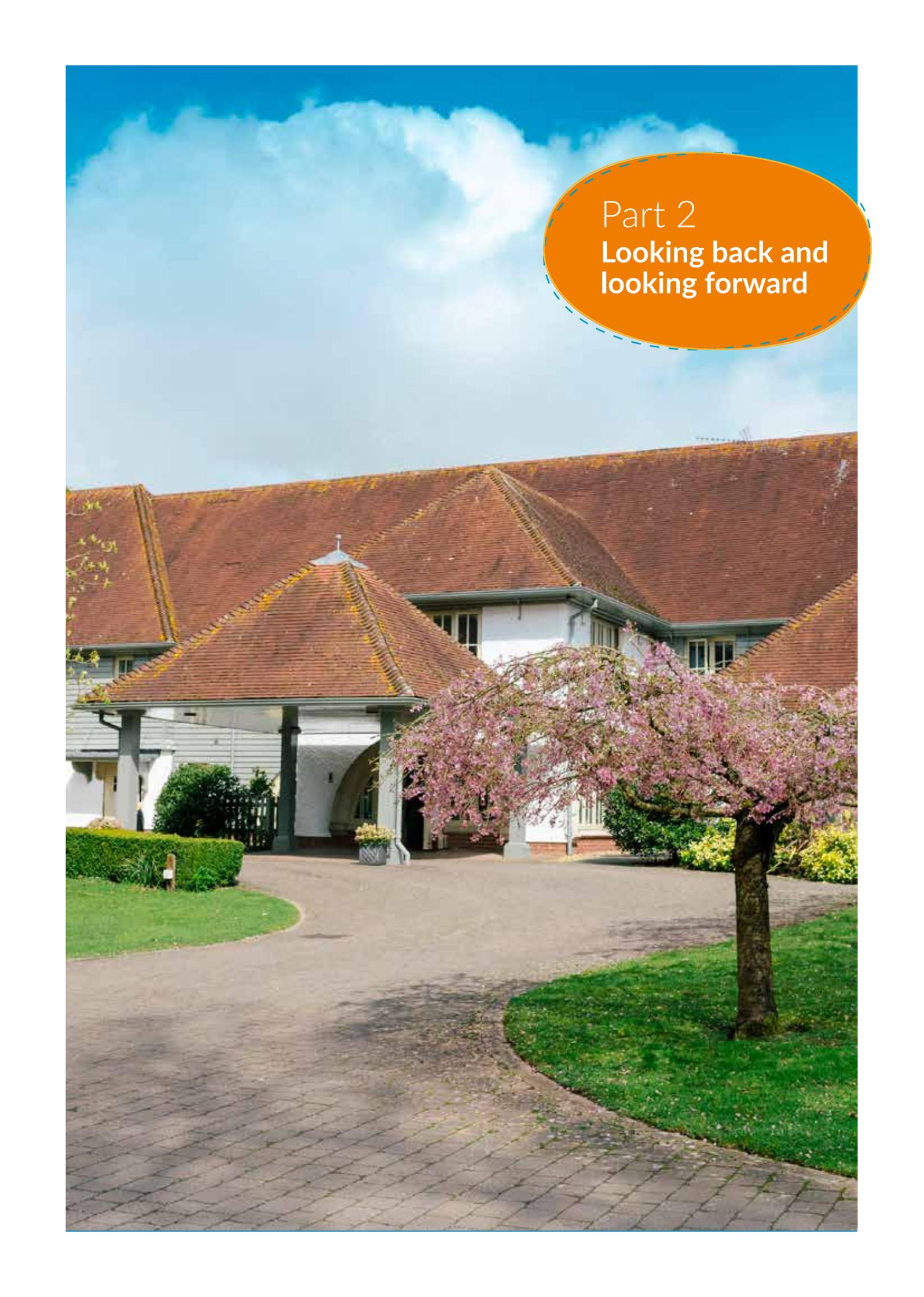
This Quality Account is a means by which we can publicly share information about the quality of care services Chestnut Tree House provides. It is in a format common to other providers of services to the NHS.

This document is an account of the quality of healthcare in the form of an annual report, evidencing our achievements over the past year and our commitment to excellence through our quality improvement priorities.

The report has been prepared jointly by the Clinical Director and Business Development Officer and it is endorsed by the Board of Trustees.

To the best of my knowledge, the information within this Quality Account is accurate and a fair representation of the quality of care services provided by Chestnut Tree House.

Cathy Stone
Interim Chief Executive Officer
St Barnabas House

A photograph of a large, white building with a red-tiled roof and a covered entrance, with a pink cherry blossom tree in the foreground. The building has a prominent gabled roof and a covered walkway supported by columns. The foreground features a paved area and a well-manicured lawn. The sky is blue with scattered white clouds.

Part 2
Looking back and
looking forward

Looking back 2019- 2020

The hospice has seen a few changes over the 2019-20 period which have presented new and exciting opportunities.

There have been some departures and new appointments amongst our Trustees. We would like to take this opportunity to thank our former and current Trustees for their support and dedication to St Barnabas Hospices.

After a short period as Interim, Rosemarie Finley was appointed as the hospices' CEO. We also had some changes within the Senior Management Team, with our HR Director, Steve Richards, and long-serving Income Generation and Marketing Director, Stephanie Smith, taking up new positions and challenges with other organisations. We wish them the very best in their new endeavours.

This has meant that there were two new appointments, and we have welcomed Dave Hays as the HR, Research and Education Director, and Becki Jupp as the Income Generation and Marketing Director. Both Dave and Becki bring a wealth of knowledge and expertise in their respective fields, and we are looking forward to working together.



Priorities for Improvement

Chestnut Tree House provides hospice care services and community support for children and young people with progressive life-shortening conditions throughout East and West Sussex, Brighton and Hove and South East Hampshire.

Priority 1 – Care Model review

What we wanted to achieve:

Following the previous year's work around the programme of research, we wanted to undertake a full caseload review to ensure those under our care receive the support they need.

We wanted to complete our hard to reach project (initiated in Q4 2018-19) to ascertain our reach and understand communities that do not access our facilities, or care and support services.

We wanted to fully assess the feasibility of expanding and developing additional services identified by our families during the previous year's research study. Parents had expressed a need for additional services such as more respite sessions (day and overnight), more facilities and activities for siblings, more outreach/community services and support.

What we achieved:

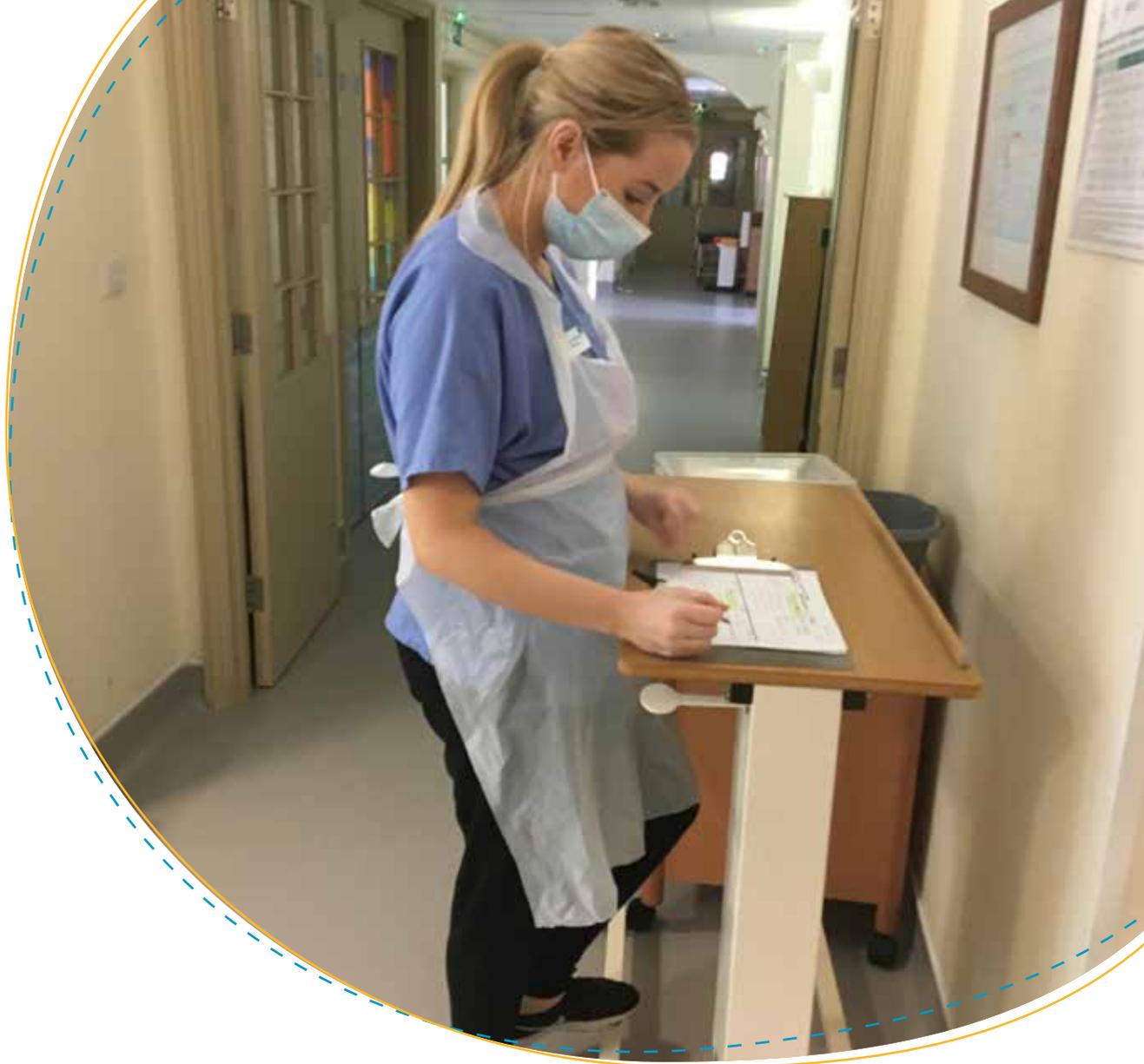
We appointed a new Activities Team to provide support across the three counties (South East Hampshire, West Sussex, and East Sussex, including Brighton and Hove). We also reviewed the overall staffing which enabled us to evaluate current skills.

Following the caseload review, and expansion of some of our services, we have extended our offer for respite care to those patients that have extra need.

We did not cancel any stays during the year and formed a partnership with Western Sussex Hospital Foundation Trust's Strategic Bereavement Group to enhance the care of those bereaved families.

In the latter part of the year, during the COVID-19 pandemic, the Care Team successfully adapted their provision to provide on-line Packages of Care and continued to visit children's homes, where possible and appropriate.





Priority 2 – Clinical Governance

What we wanted to achieve:

We had already made big strides in ensuring our clinical policy framework was in line with quality assurance standards, and we wanted to build on this work by aligning clinical and non-clinical governance as one unit. This will ensure that all policies and procedures are consistent across the organisation.

As part of the Governance framework, we aimed to hold regular meetings with continuous review of the Governance structure, ensuring the system implemented is fit-for-purpose.

What we achieved:

We have a fully established Quality Assurance Committee (QAC) which incorporates non-clinical and clinical governance, as well as Information Management and Technology, which provide assurances of compliance across our services.

Priority 3 – Review staffing structure and skill mix

What we wanted to achieve:

With the ever-changing needs of our communities, our goal was to review our staffing structure and the existing skill mix. We wanted to expand on the staffing of the house to include additional allied health professionals, such as therapists. This was to ensure that children received this much needed support in-house as part of a holistic package of care.

We aimed to continue to review our staffing requirements against caseload, clinical need, and expansion of services.

What we achieved:

To ensure we met the clinical needs of our patients, we undertook several training sessions for our staff, and 80% of our clinical team have acquired the necessary skills to provide safe ventilation to children that need it.

We have reprofiled the therapeutic caseload, and prior to COVID-19 we were in the process of implementing an integrated care model to include allied healthcare professionals and therapists.

Priority 4 – Enhanced education programme

What we wanted to achieve:

Learning disabilities and autism are amongst the four clinical priorities outlined in the NHS Long Term Plan which sets out to improve community support and halve the number of people in mental health hospitals with learning disability or on the autism spectrum.

We wanted to explore working with families to further understand needs in this area and aimed to join up services to provide seamless care.

Training and upskilling remained a priority for the following year to mitigate against the complexity of care some of our children require, together with the natural turnover of experienced staff. It was planned that the focus would be on increasing uptake of apprenticeships and nurse associates programme, as well as reviewing need for additional therapies and social care support.

We aimed to organise topic-specific training sessions for all our clinical staff to include learning disabilities and autism awareness.

What we achieved:

Alongside the ventilation training, we organised early (neo-natal and baby deaths) bereavement care training and have successfully extended this to the wider local health economy.

We maintained an active programme of education which was recognised as exemplary and was to be presented at March's Together for Short Lives (TfSL) National Conference. The Conference has been postponed until later in the year, and we hope to be able to showcase our Education Programme at a later date.

FREEDOM TO SPEAK UP

LISTENING TO YOUR CONCERNS

Priority 5 – Freedom to Speak Up

What we wanted to achieve:

All NHS trusts and foundation trusts are mandated by the NHS contract to nominate a Freedom to Speak Up Guardian. Whilst our hospices are not NHS organisations, we do provide NHS services, and it is considered best practice by the Care Quality Commission to make provisions for such a role.

Coupled with this, following the Gosport Independent Panel Report, the Government committed to legislation requiring all trusts in England to report annually on staff who speak up (including whistle-blowers).

Our aim is to deliver the best quality care, compassion and wellbeing to our patients, their carers, families, and colleagues. An important part of ensuring we continue to provide this is to create an open and honest reporting culture, where everyone feels safe to speak up and raise concerns at work. Regardless of the issue, it is important that it is listened to and dealt with effectively.

We therefore aimed to appoint a 'Freedom to Speak Up Guardian', a person who will be responsible for helping to raise the profile of 'speaking up', by providing confidential advice and support to colleagues in relation to concerns they have about patient safety, and/or the way their concern(s) have been handled.

What we achieved:

We successfully appointed two Freedom to Speak Up Guardians, both of whom have been fully trained through the National Guardian Office training sessions.

The hospice's Whistleblowing Policy has been reviewed and updated to include information regarding FtSU, and regular reports will be submitted to the hospice's Board of Trustees to enable them to keep up to date on speaking up matters (including whistleblowing). Reports will be presented in a way that maintains the confidentiality of individuals who speak up.



Looking forward – 2020-2021

Underpinned by our mission and values, the next five years' strategic ambitions are:

- Be excellent in all we do with compassion, innovation, and integrity
- Reach everyone who needs our help
- Become leaders and innovators in research and education
- Provide sustainable healthcare true to our values

In support of our organisational strategy, we have identified three key quality improvement areas:

Quality Goals 2020-2021

1. Refurbishment Project
2. Integrated Care Model
3. Implementation of the next stage of Research Strategy



Areas for improvement

Priority 1 – Refurbishment Project

Earlier in the year we undertook a Feasibility Study looking at the refurbishment of Chestnut Tree House to ensure the environment, facilities and related activities were fit-for-purpose and future proofed. We also explored the additional costs this work would incur long term, and whether such a project would be sustainable.

There is more work to be done before deciding on the most appropriate approach, and due to the Coronavirus pandemic, this was suspended. However, there is a need to improve the house. Since Chestnut Tree House opened 17 years ago, children with life-limiting conditions are living longer, and the caseload has increased exponentially. We are keen to progress with this work as soon as circumstances allow it.

Priority 2 – Integrated Care Model

Back in 2018, we commissioned a programme of research that involved a series of interviews with our families. Part of the research objectives were to evaluate how our care services met the needs of children and families, and to measure levels of satisfaction in relation to services provided.

Following this work, we implemented the findings of the full caseload review to ensure those under our care receive the support they need. We still need to complete our Hard to Reach project to ascertain unmet need and understand communities that do not access our facilities, or care and support services.

We will continue to fully assess the feasibility of expanding and developing additional services identified by our families during 2018's research study.

We also want to apply the learning and experience from the challenges brought about by the COVID-19 pandemic and implement cross-site working with our sister adults' hospice.

Priority 3 – Implement the next stage of the Research Strategy

Following the appointment of the Research Lead, we will be focusing on taking the Research Strategy forward with the main goal being to undertake our own research projects, thus enabling us and the wider community, to provide the most appropriate care to our patients.

The immediate activity is to continue in participating in local and national research programmes, and nurture the relationships already forged with local, regional, and national research organisations.

Mandatory statements

Review of service

During the period 1st April 2019 – 31st March 2020, Chestnut Tree House provided the following services:

In-house provision for residential care for children and families:

- End-of-life care
- Specialist palliative care
- Bereavement support
- On-going respite and management of children with life-limiting conditions

Community support services:

- End-of-life care
- Specialist palliative care
- Bereavement support
- On-going respite and management of children with life-limiting conditions

Chestnut Tree House has reviewed all the data available to the organisation on the quality of care in all these services.

The income generated by the NHS services reviewed in 2019-20 represents 100% of the total income generated from the provision of NHS services by Chestnut Tree House. The income generated from the NHS represents 4.8% of the cost of running these services, this is down from the 5.2% reported for the previous 12-month period.

National Audit

There were no national audits applicable to Chestnut Tree House in the period 2019-20.

Local Audit

The annual multi-professional audit programme is reviewed monthly at Clinical Governance meetings. The programme covers both local and national audits, and it includes statutory activities.



Clinical governance – audits and reports 2019-20

1. Statutory/Legal Audits

Audit	Timeframe	Group Reporting To	Status	Actions Taken/Planned
Controlled Drugs	January 2019	Formulary & Medicines Management	October 2019	Completed using HUK audit tool. No issues of concern. Action plan implemented to address minor issues raised.
Infection Control	February 2019	Management, Effectiveness & Governance	2019	Actions to be updated: Issues in respect of fabric beings addressed. External evaluation had been completed; report awaited.
Environmental Audit	September 2019	Management, Effectiveness & Governance	2019	Completed. To be repeated annually.
Medicines and Drug Charts	September 2019	Formulary & Medicines Management	2019	Completed
Accountable Officer (CDs)	December 2019	Formulary & Medicines Management		Fully compliant

2. On-Going Regular

Documentation	March 2019	Management, Effectiveness & Governance	2019	Completed overarching audit. No issues raised.
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3. Other On-Going Audits

University Audit	February 2019	Management, Effectiveness & Governance	January 2020	Re introduce student folder
Child Integrated Reviews	December 2019	Management, Effectiveness & Governance		A Full Case review was undertaken in May 2019. Further work will be undertaken as part of the new model of care.
Referral, Initial Assessment and Admissions	May 2019	Management, Effectiveness & Governance	October 2019	Audit indicated number of children who were not receiving either in house or community care, but this was known. Indicated that number of children on case load was far greater than bed capacity.
Risk Assessment Care Plan Audit	July 2019	Management, Effectiveness & Governance		Completed as part of documentation audit

Audit	Timeframe	Group Reporting To	Status	Actions Taken/Planned
Initial Risk Assessment Audit-Community	June 2019	Management, Effectiveness & Governance		Completed as part of the community audit
Post-Bereavement Bereavement Service Audit	September 2019	Management, Effectiveness & Governance		Being updated to reflect need to find out parents' thoughts about split events, repeat events.
Nutrition & Hydration	January 2019	Management, Effectiveness & Governance	July 2019	Audit completed with full compliance. Minor issues that had arisen had been addressed.
Pre-admissions Audit	November 2019	Management, Effectiveness & Governance	Complete	Decision made to have a RN rotate to undertake pre-admissions as well as a set team.
Acute admissions to hospital	November 2019	Management, Effectiveness & Governance	Complete	No issues raised. Demonstrated that PEWS is a successful tool.
Overnight and Day Observation	August 2019	Management, Effectiveness & Governance	Complete	Repeated July 2019 no issues
Staffing Night Breaks	August 2019	Management, Effectiveness & Governance		Repeated July 2019 no issues
West Midlands Ventilation Audit	March 2019	Management, Effectiveness & Governance	August 2019	Complete - no issues
Syringe Driver Audit	October 2019	Management, Effectiveness & Governance	Complete	Need to ensure that we can gather information from tertiary centres when a child dies.

Clinical Research

The number of patients receiving NHS services provided or subcontracted by Chestnut Tree House in 2019-20 that were recruited during this period to participate in research approved by a research ethics committee was none.

Throughout our care and support services, we aim to provide palliative care that is shaped by research where healthcare professionals are empowered to deliver services based on the latest evidence and to develop new and innovative approaches to improve patients' outcomes.

Our ambition is to become leaders and innovators in research and education and the re-formed Research and Innovation Group aims to build the capacity and capability of our charity to become research engaged.

One of the two scholarships awarded to one of our nurses, was to develop organisational capacity and capability for research. This scholarship led to the robust formation of the Research and Innovation Group, learning and education sessions to raise awareness of research and its importance, and formulate our Research Strategy.

What does the Care Quality Commission (CQC) say about us?

Chestnut Tree House is required to register with the Care Quality Commission (CQC), the regulatory body that ensures that we meet our legal obligations in all aspects of care.

Since the opening of the house in 2003, we have had one unannounced inspection, in August 2014. Following this inspection, the CQC gave Chestnut Tree House an overall rating of 'Good'.

Registered manager

The charity has developed a new governance structure to provide compliance against the new Care Quality Commission standards. This work is being taken forward by our Clinical Director, Cathy Stone, who is the CQC Registered Manager for both St Barnabas House and Chestnut Tree House.

Accuracy of our data

Chestnut Tree House shares recorded information in accordance with the Data Protection Act and monitors the handling of data through our Information Governance Working group.

NHS Number and the General Medical Practice Code

During 2019-20, Chestnut Tree House did not submit records to the Secondary Uses Service for inclusion in the Hospital Episodes Statistics. Chestnut Tree House is not eligible to participate in this scheme.

Self-Assessment Score

With the new General Data Protection Regulations (GDPR) introduced in May 2018, the NHS Information Governance toolkit has been replaced by the Data Protection and Security Toolkit.

All organisations that have access to NHS patient information must provide assurances that they are practising good information governance and use the Data Security and Protection Toolkit to evidence this by the publication of annual assessments. DSP Toolkit submissions were made for St Barnabas Hospices (both St Barnabas House and Chestnut Tree House) with the required standards being met.

Clinical Coding Errors

Chestnut Tree House was not subject to Payment by Results clinical audit coding during 2019-20 by the Audit Commission.



Part 3
**Review of quality
performance**

Activity

To enable a robust management of the data entry and collection system we have been working closely with the clinical staff to review and refine input into patients' notes. We have implemented a new database. Extensive work on the care plans continued throughout 2019 and into 2020; the launch of these has been delayed by the COVID-19 lockdown. The new Charities Statement of Recommended Practice (SORP) has meant a review of the work undertaken, and revision of our care plans was needed. We are currently in the pre-launch phase, with implementation for admissions starting in November 2020.

The data tabled below shows some of the activities that were undertaken at Chestnut Tree House:

	2017-18	2018-19	2019-20
Caseload	278	261	250
Number of children supported (all) in the year	366	345	310
New referrals (accepted)	80	67	43
Occupied bed nights	1,990	1,806	1,452
Day care sessions	431	495	595
Counselling and therapy support sessions	973	1,173	1,343
Supported bereaved families	211	238	242
Community Nursing Team visits	1,492	1,461	982
Respite opportunities for parents and carers	616	711	663
Children and siblings' events opportunities	626	672	684

Age groups	2017-18	2018-19	2019-20
0-4	44	47	19
5-11	114	109	108
12-15	54	52	46
16-18	44	37	21
19-21	16	14	21
22+	6	2	5
Total	278	261	250

We currently have 47 young adults aged 16 and over and we are working with them to provide transition arrangements to appropriate adult services.

Mandatory training

Over the past year, we have worked closely with our staff, HR, and the Education departments to provide on-line and face-to-face training sessions. All our staff are required to complete the mandatory training listed within the table below. Our overall average target for completion of mandatory training is 90%, and this year we achieved 95%.

Course title	2017-18	2018-19	2019-2020
Assessing Mental Capacity (E-Learning)	65%	97%	94%
Basic Life Support and Defib. Annual Update (2018+)	75%	96%	87%
DOLS (E Learning)	64%	96%	93%
Equality & Diversity (E-Learning)	71%	95%	92%
Fire Awareness (E-Learning) Care	67%	97%	94%
GDPR (E-Learning)	47%	95%	91%
Health & Safety Essentials (E-Learning)	55%	94%	97%
Infection Prevention and Control (E-Learning)	54%	93%	100%
Moving and Handling (E-Learning)	74%	97%	100%
Safeguarding Adults (E-Learning)	70%	97%	94%
Safeguarding children V3 WSCC (E-Learning)	51%	96%	94%
Average	63%	96%	95%

Alongside mandatory training, we are continuing to implement an enhanced education programme enabling our staff to provide care to more complex children safely. Approximately 80% of the clinical staff were trained in ventilation of children, to enable teams to support our patients holistically.

We have and are continuously reviewing our care team numbers and we can demonstrate a child-centred staff level.

Medical Revalidation – statement received from Western Sussex Hospital Foundation Trust and we are in line with the statutory requirements.

NICE guidance

The NICE Quality Standard for End of Life Care for Infants, Children and Young People was published in 2017. Chestnut Tree House is regularly reviewing the guidance to ensure ongoing compliance.

Quality monitoring requirements

CTH is required to report to NHS Commissioners on the quality of its services. There are variations to reporting requirements, however generalised reporting requirements may include:

- Serious incidents requiring investigation
- Infection prevention and control
- Training needs analysis (clinical)
- Safeguarding (children and vulnerable adults), including training levels
- Medicines management
- Mandatory and competence-based training compliance
- Safety alerts
- Medication incident review
- Staff appraisals and clinical supervision
- Regulatory compliance
- Clinical incident review
- Timely discharge summaries for patients
- NICE guidelines implementation
- Care plans audit
- Equality / equity of access
- Patient safety
- Patient nutrition and hydration
- Support for patients with Learning Disabilities
- Safe staff
- Patient / user experience and feedback
- Progress against local clinical priorities
- Clinical audits
- Complaints review

There are several metrics, such as clinical incidents, staff turnover (both clinical and non-clinical), vacancies rate, etc. that fall under a monthly reporting framework:

- Complaints received
- Clinical incidents (not serious incidents (Sis))
- Staff turnover (clinical and non-clinical)
- Provider-acquired infections
- Provider-acquired catheter associated urinary tract infections (UTIs)
- Sickness absence (clinical and non-clinical)
- Never Events reported
- Provider-acquired Venous Thromboembolism
- Agency / Bank Staff utilisation
- Serious incidents logged
- Provider-acquired falls (with and without harm)
- Medication errors
- Provider-acquired pressure ulcers (all grades)
- Staff compliance with statutory and mandatory training (clinical and non-clinical)

Chestnut Tree House performs in the top decile of these care metrics. Where applicable, incidents are reported in a timely manner both to the Clinical Commissioning Groups and Care Quality Commission.

Patient Safety Incidents

Chestnut Tree House continues to report incidents and clinical events of concern and there is evidence of organisational learning. The Risk Register, when tested, reflects concerns and issues consistent with those identified at ward level.

The Quality Assurance Committee review themes, trends and improvements relating to serious and other untoward incidents (both staff and patients). The Committee reviews recommendations from site-based clinical and non-clinical governance reviews.

Duty of candour

NHS England requires providers to indicate how they are implementing Duty of Candour. The Duty relates to the culture as well as the practice of being open and transparent with service users

and relevant stakeholders, regarding care and treatment.

In the case of any serious clinical incidents reported, Duty of Candour has been considered and followed.

Infection Control

There were no hospice attributable cases of MRSA, or C-difficile at Chestnut Tree House during 2019-20.

There were two reported outbreaks of Norovirus during 2019-20, where the hospice was required to close because of the infection.

The first outbreak closed the hospice for 13 days. The outbreak was reported as required to the Clinical Commissioning Group and Public Health England. The Clinical Commissioning Group commended the hospice for its proactive management of the outbreak. The second outbreak closed the hospice for 7 days and was reported as required to the Clinical Commissioning Group and Public Health England.

To ensure compliance and regular review, external audits are undertaken 6-monthly. Internally there is a schedule of on-going monitoring for infection control compliance.

Covid-19 Pandemic

In response to the COVID-19 pandemic the organisation has implemented all Public Health England (PHE) guidance related to the care and management of suspected and confirmed cases of COVID-19. A weekly briefing is provided to a subcommittee of the hospice board which includes activity and adherence to compliance relating to the pandemic.

Safeguarding children

The serious case review previously reported within the Quality Accounts for 2018-19 preceded a criminal case. Several staff were requested to give evidence and the criminal proceedings were completed. There were no concerns raised in relation to Chestnut Tree House.

Statutory and mandatory training regarding children's safeguarding compliance stands at 98% reflecting the positive attention provided to safeguarding children.

Complaints

	Number of complaints
2017-18	7
2018-19	7
2019-20	3

There has been a marked decrease in the number of formal complaints received at Chestnut Tree House during 2019-20 and reflects the positive care that is offered to our patients.

All complaints whether formal or informal were fully investigated and were resolved in a timely and acceptable manner. A review of these complaints has not identified any theme relating to staff members or absence of training.

"I also want to say that I cannot fully express how valuable the service has been [...] over the years he's been going to CTH. It's allowed us all to have a much needed, proper annual holiday, and the outreach service has been incredibly supportive to us in sometimes very dark times. Sending a heartfelt "thank you!"

"Great day at CTH Summer Party, thank you xx"

"To all the staff at Chestnut. A big thank you for all your help and support you have shown our whole family over the last 16 years!"





Quality Account Feedback

It is an NHS requirement that Quality Accounts are shared, in draft, with Healthwatch and external scrutineers. (e.g. NHS England, CCGs, Healthwatch, Overview and Scrutiny Committees or the Health and Wellbeing Board).

Coastal West Sussex Clinical Commissioning Group (now West Sussex CCG)

A copy of this account has been shared with the local commissioners.

We have requested supporting statements from external partners and stakeholders, and we are yet to receive their statements. We will publish these within this document as soon as received.

HealthWatch

Other Healthcare Professionals and Partners

Doctor at a London Children's Hospital:

“Again, many thanks for all your help and support with X and his family. You did an amazing job. Thank you for visiting the family yesterday. Now we’ll continue working together to offer the best to our shared patients.”



We are connected



We are courageous



We are caring

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