

St. Gemma's Hospice – Strategic Review

Strategic Review: Future Models of Hospice Services (Options Development)

Introduction

St. Gemma's is an exceptional hospice with an overall CQC rating of 'Outstanding' (2016 and 2022). In 2018 it developed a ten year strategy (2018 – 2028) that set out a clear vision that 'the needs of people living with terminal illness and those close to them are met with care, compassion and skill' and its broad ambition built around three pillars of Impact, Connect and Extend.

Its current clinical model offers a comprehensive and holistic service to patients, carers and their families. The breadth of care on offer to meet the needs of complex patients is extensive and is not often mirrored by other community healthcare providers or hospices in the region. Its service model is dynamic and continues to evolve with a significant focus on continuous improvement. Services adapted quickly and effectively in response to the COVID-19 pandemic, working collaboratively with partners to deliver high quality care, and maintain continuity of care for people in their homes and care homes, and also to provide ongoing education and support.

Set against a backdrop of the pandemic, the ever growing pressures on the health and care system and recent changes in legislation, the hospice felt that it was the right time to initiate a strategic review that sought to refresh the strategy. This included a project to identify options for a future clinical service model, specifically in relation to inpatient and community services. SGH commissioned external consultancy support to assist with the early stages of this work.

Support Provided

Co-designed a structured approach to a review to develop the thinking around future hospice models, specifically in relation to inpatient and community services. Initiated the review and completed the first three stages. This involved the following key activities:

- Undertaking a rapid baseline review of the current clinical operating model structured around six dimensions: A. Service Model; B. Activity; C. Quality and Clinical Performance; D Finance; E. Workforce; and F. Infrastructure (Estates, Technology).
- Extensive engagement (semi-structured interviews) with key stakeholders, both internal and external.
- Developing a comprehensive SWOT (Strengths, Weaknesses, Opportunities and Threats) Analysis.
- Drafting a Case for Change that provided clear justification for why the current clinical service model needed to change.



- Facilitating a workshop with the Board of Trustees to assess their level of ambition to change the clinical model.
- Stimulating ideas for potential models through a rapid desktop review of good practice and soft intelligence garnered from stakeholder discussions.
- Identifying and obtaining consensus to potential options through a series of facilitated workshops.
- Developing an approach and timeline to appraise the shortlist.

Value Delivered To Client

- A shared understanding of why the clinical model needed to change, bought into by all key stakeholders.
- Insight into what the hospice could do better.
- Confidence that all potential options had been explored and that an appropriate shortlist had been reached.
- Clarity on the level of ambition of the Board of Trustees.
- A structured way to get from a shortlist to the preferred model(s) of care.