



The Sara Lee Trust
Charity Number: 1055048

The Sara Lee Trust Evaluation Report 2016-17

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The Sara Lee Trust

The Sara Lee Trust is an established charity that aims to significantly improve the quality of life of people living with cancer and other life threatening illnesses (and their carers and family members) in Hastings and Rother (East Sussex), through the provision of free psychological and counselling support, complementary therapies, and therapeutic group support and activities. The Trust directly supports over 600 people a year, providing over 4,000 hours of therapy care.

The Trust is the only provider of this combined range of specialised services in the region, and is also the dedicated provider of these services for St Michael's Hospice (St Leonards on Sea) and The Rye, Winchelsea and District Memorial Hospital (Rye).

The Evaluation Process

The Trust is committed to developing the services it provides to best meet its users' needs. Essential to achieving this core aim is effective and ongoing monitoring and evaluation.

Monitoring is how the Trust measures progress, identifies problems, and makes modifications and interventions accordingly. This is enabled by a number of tools and mechanisms including: bi-monthly performance reports covering referral and appointment activity; significant event monitoring; regular attendance at multidisciplinary team meetings; and the holding of regular meetings of the therapy team, service user group, operational team and Board of Trustees.

Whilst monitoring is an ongoing process, the aim of our annual **evaluation** is to step back, reflect on the year, and learn from our experiences and the information obtained, to make our operations more effective and efficient in the longer term. The aim of this report is to summarise the evaluation process for 2016-17, highlight key findings, and communicate the resulting action plan for 2017-18. The action plan will serve as a road map in the ongoing monitoring process for the year ahead, and a benchmark against which to evaluate our progress at the end of the year.

Our monitoring and evaluation processes also cover reviews of other regular Trust reports which include:

- Trust Performance Reports
- Financial statements and reports
- Corporate Governance reviews
- Relevant external updates (e.g. legislative changes, Information Commission and Charity Commission Guidance)

All stakeholders including staff, service users (including family members and carers), volunteers, local partners and the wider local community are actively involved in the monitoring and evaluation processes through a variety of forums, regular events and feedback mechanisms which include:

- Service User Group
- Annual Service User Survey
- Focus group reviews
- Annual Evaluation workshops
- Feedback forms and case studies
- Board of Trustees
- Specific Project Groups / Committees (e.g. Big Lottery Fund Project Board)

Data collected

This report takes account of a wide range of feedback and information from key stakeholders, including patients, their carers and family members, staff, referrers, volunteers, community partners, and regional and national organisations to help evaluate and contextualise our service.



TRUST SERVICE USERS

Quantitative data on service provision
Results of annual service user survey
Feedback from Service User Group (pictured above)
Complaints/suggestions forms and other feedback
Individual outcome and monitoring tools (CORE and MYCaW)



THE SARA LEE TRUST

Referral and appointment activity data
Therapy team meetings
Therapy team personal development plans
Operational and strategic meetings
Performance Reports



LOCAL HEALTH AND SOCIAL CARE PROFESSIONALS

Survey of local referrers
Multidisciplinary team meetings
Letters of support from local referrers
GP and Secondary care activity data
Local partner service feedback



THE WIDER COMMUNITY

Feedback back from volunteers, local community groups and organisations including 1066 Pink Ladies, The Pelham, The Heart of Sidley, Sidley Surgery, local church organisations and traders
Open forums at visioning events (inc. the Trust AGM)



REGIONAL & NATIONAL DATA

Learning from South East Counsellors in Palliative Care Group and the National Association of Complementary Therapists in Hospice and Palliative Care (NACTHPC)
ONS Data
Public Health Statistics (Local area indices of deprivation)

How this information was evaluated and used

Quantitative data on operational areas including service provision was compared to that of previous years to measure growth year-on-year, and track themes and patterns relating to seasonal and other variations. Data from the service user survey and the referrers' survey, along with other feedback from service users, stake holders and community groups, was analysed to highlight key areas of achievement and areas for improvement.

These findings were shared with the Service User Group, Trust therapy and operational teams, and Board of Trustees. Recommendations for improvement and development were collated through these discussions by the Trust CEO and Lead Therapist, resulting in a Trust Action Plan which identifies the areas of learning and plans for improvement, and also highlights areas of best practice to support internal development and recognise good performance.

The Trust Action Plan was ultimately presented at the Trust's AGM and made publicly available via our website. Where appropriate, specific highlights and action points were shared with service partners and colleagues, in the interests of promoting best practice and improving partnership working. This included sharing findings and developing plans through the following forums, initiatives and channels:

- 2017 Meeting of the Forum for South East Counsellors in Palliative Care
- The Trust's bi-monthly newsletter, sent to various stakeholders including local healthcare professionals and Trust volunteers
- Regular meetings with the Hospice multidisciplinary team to explore ways of working in partnership to develop group activities and other opportunities
- Local Reference Group meeting for the University of Birmingham's research study on community hospitals
- Planning of the Rye Hospital Day Care Centre

Limitations of the evaluation

Our evaluation is conducted internally, using the limited resources of the existing team, and, in relation to service provision, the limited reporting capabilities of our in-house clinical database. We have improved our ability to capture meaningful feedback by introducing comprehensive, anonymous online surveys (paper copies are available to those without internet access). The results of these, combined with letters of support and feedback from service users and other stakeholders, provide a wealth of information indicating where we are performing well and where there is room for improvement.

However, there are significant barriers to obtaining additional feedback that would further detail our service user experience. Foremost is the fact that many of the people we support have a terminal prognosis and are therefore receiving our support very close to the point of death, making evaluating their experience inappropriate or impossible. Participant mistrust regarding data collection, and literacy levels are also factors limiting the effectiveness of our current evaluation methods.

Plans for enhanced service evaluation

In 2017-18 we are introducing a new clinical system (EMIS web) which will greatly enhance our ability to capture data on our services activity and outcomes. We are also introducing a new Monitoring and Evaluation form which will be provided to service users at the end of their therapy, counselling or group sessions and provide essential feedback on outcomes.

The Year in Review

Summary highlights:

- Overall care provided increased by 30%
- Evening and weekend support extended
- Care delivered in the home increased
- Increased involvement in regional and national organisations
- Improvement of existing facilities and imminent opening of new Sara Lee Centre in Sidley
- Therapy team development supported through training and improved group supervision
- Services increasingly service user led
- 2017 Annual Service User Survey provides positive feedback on services:
 - *Our therapists were described as supportive (100%), caring (100%), informative (97%), helpful (100%) and knowledgeable (97%)*
 - *Overall our services were rated as Excellent by 81%, Very Good by 17% and Good by 2%*

There have been a number of significant achievements during the year which include:

Regional and National Initiatives

Within the period, The Sara Lee Trust hosted the 2016 meeting of the Forum for South East Counsellors Working in Palliative Care. Hospice counsellors from across the South East of England attended, taking part in discussions about counselling practice in the hospice setting and the challenges of being with suffering at the end of life.

The Trust is also now represented on the committee of the National Association of Complementary Therapists in Hospice & Palliative Care. This is an important body that supports and guides the delivery of complementary therapy on a national and regional level. The Trust was a founding member of the Association and looks forward to playing an active role in learning and sharing best practice.

Awareness and Promotion

The provision of information on Trust services has been significantly improved over the last financial year with dedicated service-based leaflets and information boards now widely available across all Trust and Trading operations. New and improved information leaflets for all our individual therapies were made widely available from July 2017. Improved local awareness of our services has been supported by a series of events and talks held throughout the year as well alongside promotional activity by our corporate and other partners.

Training and Development

A regular Staff Development Event continues to be run to help team members and supporters improve their knowledge of the history and vision of The Sara Lee Trust, and to understand how people may be impacted by a life-threatening illness and how the Trust can support them. The Development Event also aims to build confidence in talking about illness and dying when dealing with the people we support. The format of the event is being reviewed to make it increasingly accessible.

Therapy team training this year included a number of mandatory areas including Safe-Guarding Children. Therapy Team supervision has been enhanced by the introduction of a new and highly regarded Clinical Group Supervisor in August 2016 who is making a very important contribution to the ongoing support and development of the therapy team.

Increasing Provision

In response to patient feedback highlighting the need for our services to be available at times that best suit the patient, we have continued to improve access to support in the evening and at weekends. Our volunteer therapists have in particular made a significant contribution to this patient led improvement.

To meet the considerable increase in demand for home visits for patients and their family members/carers, we have increased our community therapy capacity, with an additional 14 hours a week dedicated to home visits.

At the end of the 2015-16 financial year the Trust was successful in securing a £10,000 grant from the Hastings and Rother CCG Reducing Health Inequalities Fund for a 12-month fixed-term post to develop community based counselling in Bexhill Central and Sidley. Demand for this service has been very high since the outset and the Trust has taken the decision to continue with this additional provision on a permanent basis.

Improved Facilities

The development of a Therapy Centre in Sidley, Bexhill is fundamental to the Trust's long term objective of improving access to its services and reducing local health inequalities. The Centre is due to open in July 2017 providing the following facilities:

- Secure and tranquil therapeutic garden and outside area
- Safe and secure parking and drop off zones
- A safe and private counselling room
- Calm and welcoming therapy rooms
- Larger rooms for therapeutic group activities

Following the fire at St Michael's Hospice and the subsequent rebuilding work, the Trust's main counselling room has been moved to the ground floor of the Hospice. The newly refurbished room is larger and more accessible, and is being well used for couples and family therapy, which was not possible in our previous second floor room.

IM&T Development

The first stages in gaining access to the NHS Internet (N3) have been completed. This is an important step in our plans to introduce a recognised clinical system that is secure, efficient and with good reporting capabilities to keep up with the continued growth of our services.

The Challenge Ahead

Whilst excellent progress continues to be made, we know that the level of need across Hastings and Rother far exceeds our current capacity and that many people, particularly in the more deprived areas, continue to live with the impacts of cancer and other life threatening illnesses without the support and care they need. This, combined with the wider changes in society of increasing rates of cancer and an ageing population, means the future demands on our services will almost certainly grow at a significant rate. Our challenge looking forward is to continue to develop the scope and scale of our services to address this unmet need and to continue to tackle local health inequalities.

Case Studies and Personal Stories

A case study demonstrating how the Trust has made a difference to the life of an individual and their family through the service it provides.

Names and identifying details have been changed to protect the privacy of the patient and her family.

Mary was first referred to The Sara Lee Trust for counselling in October 2016. She had an aggressive form of breast cancer that had metastasized to her lungs and bones. At this point her mobility was good enough that she was able to attend our counselling room at St Michael's Hospice for her appointment.

Mary expressed terror at the prospect of dying, but talked more of her anger at her GP who had been slow to diagnose her cancer, and the hospital doctors who were unable to offer her curative treatment because her disease had progressed so far. Because of her disappointing experience in the hands of the medical team, she was initially very wary of engaging with our services, and it became apparent at the first appointment that she was highly anxious about being in the hospice environment.

When Mary failed to attend the next 2 scheduled appointments I called her and suggested a home visit which she accepted. In the comfort and safety of her home Mary was more able to relax and explore her fears of leaving her two teenage children and partner. Within a matter of weeks her condition had also deteriorated such that she was no longer physically able to leave the house. By this point enough trust had been developed for her to agree to trying complementary therapies and I arranged for one of our community massage therapists to visit her at home.

Mary later expressed how wonderful she found the aromatherapy massage. In the last year she had been prodded and injected, and experienced a great deal of physical pain. She was surprised and relieved to find that she could enjoy what she called "kind hands". She relaxed and had a good night's sleep for the first time in many months. Further massage sessions offered her some relief from pain, and she continued to sleep well after her treatments.

As my work with Mary progressed, she used the time to prepare herself and her family for her death. In a situation where so much was out of her control, she took what control she could by writing letters and having important conversations with her loved ones. She also mended bridges with an estranged sister.

As Mary's pain increased and her mobility worsened, she became more willing to accept the help of other services. I made a referral to a Community Nurse Specialist who was able to help her with specialist pain relief and make further referrals for an Occupational Therapist who helped adapt Mary's home so that she could stay there in her final weeks of life.

Mary died at home surrounded by her family. She suffered, and so did her family, but they believed that the suffering was eased significantly because of the holistic care she was able to receive at home.

A service user describes what the Trust's support means to her

On the last of my treatments having completed six sessions of chemo therapy and three weeks of radiotherapy I was pleased to be at the end of a difficult time as I'd been ill for most of my treatments, resulting to stays in hospital. My family was delighted treatment was completed, but I felt a tad empty, I'd relied on my treatment plan to get me through and hadn't spoken about my feelings in finding out I'd had cancer in the beginning. I work for the council who suggested during my phased return to work I use their counselling service. Although this was a good option, I felt I would benefit from counselling that focused mainly on my experience with cancer. I'd heard of the Sara Lee Trust running at the Hospice during my treatment, but hadn't been well enough to think about what they were offering. I decided to contact Kerry and ask if I could use their counselling service, at the same time I was offered different treatments and I decided to attend the massage with natural oils.

Attending the counselling session I thought I had little to say, and I'd coped reasonably well during my treatment. But through talking things through I realized my coping skills weren't the same as others in my family and I was shutting people out to protect them, but also not wanting to make a big deal out of things. The short of it was I didn't want family and friends to worry. After talking through my coping strategies, I was able to have an open conversation with my mum and hear how she was feeling. I've been attending monthly appointments (appointments have been led by me). I found the counselling a great help with returning to work and with the death of another cancer patient.

I've also received massage with natural oils, my first treatment the therapist shared I was very tight in my muscles, this we worked out was due to my past experiences during treatment, anyone coming close usually meant something painful was about to happen so I'd become accustomed to bracing myself. Through massage treatments I'm relaxing.

The Sanctuary Days have been so rewarding. I didn't think I needed to talk but being with others going through Cancer has really helped. Listening to other people's journeys has been inspirational. Practical tools from reading material, dietary ideas (I'm now Juicing daily, well nearly every day. Also learning that its ok to not do things if you feel like a day off!)

I've met some amazing people along the way and with my new outgoing head that says its ok to say I'll give that a go, I'm heading off to Powdermill Woods to see what Natural Rhythms has to offer.

I'm very grateful to everyone involved in the Sara Lee Trust

Thank you

Lisa Lee

Services Delivered

In the 2016-17 financial year the Trust provided 4,420 hours of therapy and activities, a 30% increase on the last financial year.

Current range of therapies and activities provided

Counselling, Psychotherapy and Cognitive Behavioural Therapy (CBT)

A life-threatening illness can affect a person's life in many ways, including how they relate to others, feel about life, and think about the future. One-to-one counselling and psychotherapy can help support patients with the psychological and emotional impact of their illness and treatment. Cognitive behavioural therapy (CBT) can be particularly effective for those experiencing symptoms with a psychological component, such as breathlessness or insomnia. Family members and carers can also benefit from support, helping them cope with the mental and psychological impact when a loved one has a life-threatening diagnosis, and come to terms with the prospect of bereavement when their prognosis is palliative.

Complementary Therapies

Our range of therapies can help with pain, stress and sleeplessness, and reduce some of the side effects of medical treatment. Therapies provided include:

- **Aromatherapy** - a therapy that uses essential oils extracted from plants for their therapeutic effect. The oils are carefully blended for each individual, and used in gentle massage.
- **Reflexology** - a therapy based on the principle that reflexes on the feet and the hands correspond to different parts of the body. Massaging these reflexes in a special way can help reduce some side effects and symptoms.
- **Shiatsu** - during a Shiatsu massage the body is gently manipulated using palm and fingertip pressure in flowing movements. This therapy is performed through clothing.
- **Acupuncture** - a traditional Chinese practice using very thin needles inserted through the skin at certain points on the body.
- **Craniosacral therapy** - a highly developed sense of touch is used, mainly on the head and tailbone, to gently sense and respond to the movement of cerebrospinal fluid in the body, to encourage healing.

Therapeutic Group Activities

- Our weekly group, **Natural Rhythms**, combines group support and creative therapy in a natural setting. The group is sensitively facilitated to encourage sharing and group work.
- Once a month, a small group of people with life-threatening illnesses join facilitators and therapists for a **Sanctuary Day**. These days are designed to create a safe space within natural settings for individual and group support. Complementary therapies are available during the day, and transport and lunch are provided.

Hours of therapy and activities provided

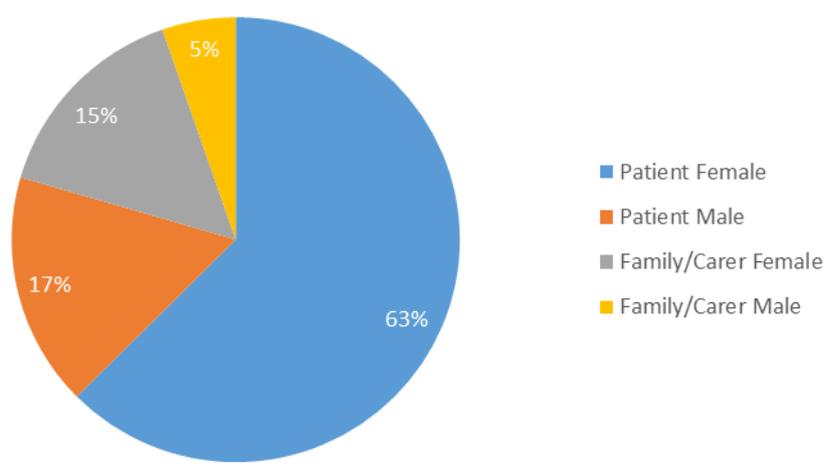
Location / Service	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Total
Hospice	215	226	182	187	205	192	209	198	212	213	270	168	2478
Acupuncture	3	1		2	6	4	6	5	2	2	1	5	37
Aromatherapy	71	61	68	79	42	43	54	48	47	65	65	39	682
CBT	7	8	1	1	4	3		3			2	2	31
Counselling	55	56	43	46	57	46	52	56	58	58	85	64	674
Craniosacral	10	18	10	10	9	6	9	5	1	3	4	6	91
FAB clinic	7		5										12
Massage						2	11	7	23	9	12	10	74
Natural Rhythms	2			2	6	4	2	6	4	2	8	6	42
Reflexology	35	44	29	35	51	54	47	37	41	54	62	30	520
Sanctuary Day	18	30	18	12	18	24	12	24	24	12	18		210
Shiatsu	7	10	7	1	12	7	16	7	12	8	13	7	105
		11			14	14			12	11		12	
Other	76	5	98	96	2	3	149	126	3	0	148	1	1445
Acupuncture	7	5	9	5	13	14	23	9	14	8	6	7	120
Aromatherapy	18	14	10	13	14	15	4	7	16	20	17	14	160
CBT					1	2	4		3	1	4	4	19
Counselling	16	24	18	21	37	31	38	32	37	30	44	34	362
Craniosacral	3	1	4	9	14	14	13	13	5	5	7	7	95
Massage											2	3	5
Natural Rhythms	12	50	30	12	22	32	34	28	22	10	34	18	304
Reflexology	1		7	5	20	12	15	8	20	18	15	2	122
Sanctuary Day	18	18	12	30	18	24	18	30	6	18	18	24	234
Shiatsu	1	3	8	1	3							8	24
Rye	32	33	43	39	55	41	53	44	21	38	51	47	497
Acupuncture						2	2	4					8
Aromatherapy				3	11				2	1	1		17
Counselling	5	2	2	10	8	8	9	6	7	7	5	9	78
Reflexology	27	31	20	21	33	27	29	34		30	33	21	303
Sanctuary Day			18	6			12				12	18	66
Shiatsu	1		4		3	4	2		12				25
		37	32		40	37			35	36		33	
Total	324	4	2	322	2	7	411	368	5	1	469	6	4420

Referrals received

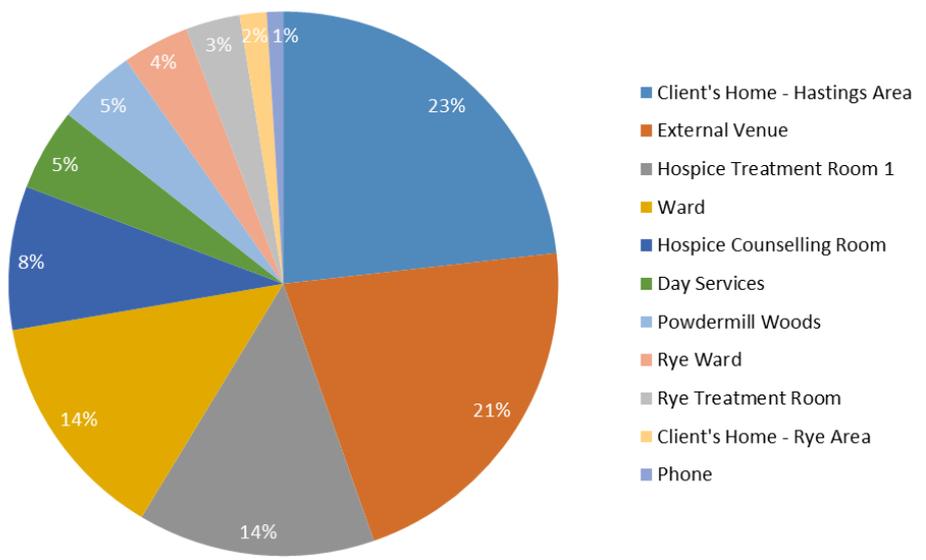
Referrer	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	Total
Ward	24	24	22	24	17	28	22	22	25	34	21	16	279
Nurse Specialist	8	17	12	14	14	21	46	19	28	24	22	25	250
Community Nurse	2	7	13	19	26	10	8			2	5	6	98
H@H	12	4	9	10	3	3	15	9	4	3	12	10	94
Day Services	8	3	2	2	13	3	1		4	4	2	1	43
SLT Therapist	4	1		3	3	4	1	3	5	1	5	1	31
GP / other doctor	1	5		1	2		6	1		2	5	4	27

Other				2	2	1	6	1	2		3	2	19
Total	59	61	58	75	80	70	105	55	68	70	75	65	841

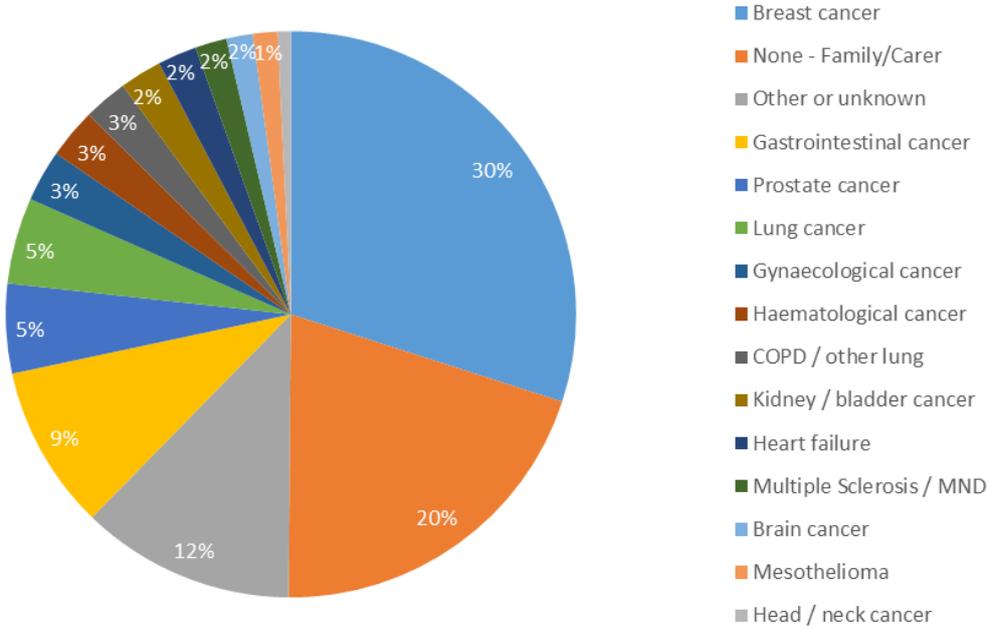
Provision of therapies and activities by service user type



Location of treatments and activities



Provision of treatments and activities by diagnosis



Service User Views

The Trust has an established process for engaging service user views on its services and care, with a comprehensive survey being undertaken annually during May and June. The form and content of the Service User Survey is reviewed and agreed on an annual basis in partnership with the Trust Service User Group (SUG).

Data collection and analysis

The survey is hosted and completed online using SurveyMonkey, an off-the-shelf interactive software provider. Aggregation of data and the provision of detailed analytical reports are provided as standard by the provider. Access links are circulated to service users electronically with paper copies being made available from Trust officers or upon request.

To ensure the survey is representative, the Trust requires a minimum of 10% of its service users to complete and return the annual survey. This is a challenging target given the acute ill health and short prognosis of many of the people we support.

2016-17 Survey Action Plan review

The Action Plan resulting from the 2015-16 Service User Survey and Trust Evaluation has been well progressed with many items now complete. Details are provided throughout this Service Evaluation Report and items that are still in progress have been included again in the 2017-18 Action Plan detailed below.

2016-17 Survey findings

This year 72 questionnaires were completed compared to 75 last year. 38 of these were electronic entries and 34 paper copies, compared with 69 and 6 respectively last year. We sent out a similar number of emails with the web-link but a much greater number of paper copies, in response to service user feedback that paper copies were appreciated and more likely to be completed. Similarly to last year, the return rate was around 50%.

Highlights from the survey are given in the **Summary**, and more detail, including benchmarking against last year's results, is given in the **Detailed Analysis**, which is following by the resulting **2017-18 Action Plan**.

Summary

Awareness of and access to our services

75% of respondents were guided to our services by a health professional, with the remainder finding out about us through word of mouth, Trust promotional events and our charity shops.

Only 44% were aware of our full range of services which is down from 55% last year

37% of people were referred within 2 weeks of needing our support compared to 52% last year. 29% had to wait for more than 2 months compared to 23% last year.

75% were offered an appointment within 2 weeks of referral, compared to 78% last year. 18% had to wait for 2 weeks or more, compared to 19% last year.

The number of people selecting 'Does not apply' to the question about how far they had to travel to access services has risen from 4% to 18% this year. This reflects an increase in the number of respondents receiving home visits.

Related service user comments:

"When my mum was in the hospice I learnt that family members could access your services."

"I found information in the health pack I was given by a breast care nurse. Sara Lee organisation was not actually mentioned when going through the pack together."

"Unfortunately I was not told about services until more than a year after my diagnosis and would have really valued knowing about it from diagnosis."

"A small poster up at the Conquest Oncology department and I was aware of the shop in Silverhill."

"When I first used the website the information seemed out of date...It has improved in the last year."

Our care

Respondents felt their initial experience with the Trust was supportive (99%), informative (97%), helpful (99%) and easy to access (92%).

95% rated appointment scheduling as 'Good', 82% rated telephone support as 'Good'. Both slight improvements on last year.

Online information was rated 'Good' by 49%, printed information was rated 'Good' by 71%. That these figures are down on last year might reflect a slight time lag in the introduction of our new service information leaflets and website review.

Our therapists were described as supportive (100%), caring (100%), informative (97%), helpful (100%) and knowledgeable (98%).

75% were aware of how to access further care if they felt it was needed, compared to 86% last year.

The level of counselling support depends on individual need. It would appear that this approach is working well as 100% of 59 respondents felt that they were receiving "the right amount", regardless of whether they were receiving 1-2 sessions, 3-6 sessions, 7-12 sessions or more than 12 sessions.

The results for complementary therapy were mixed, with the majority still feeling the Trust model of complementary therapy support of 6 initial sessions and further support depending on individual need was "the right amount" and 34% of those receiving 3-6 sessions saying that this was "not enough".

Related service user comments:

"A kind, caring service."

"Amanda provided reflexology at home and I really enjoyed her visits. She provided a good understanding of her therapy."

"My choice to only have 2 sessions [counselling] but I can ask for more if needed."

"The services are just the correct amount of time and it is nice knowing that if needs be I can request the same treatment a couple of months later."

Impact of our care

54% of patients felt our support reduced their use of other health services, with 30% saying that it had reduced their use of mental health services specifically, up from 21% last year.

Related service user comments:

"I would not have got through the last year without the support of my counsellor. The mental impact of having secondary cancer is very much underestimated."

"It has given me back some of the confidence I lost with my illness. Helping me come to terms with the changes in my life."

"I like to think they 'saved' me from going through the extreme trauma alone. Family and friends are supportive but having a therapist/counsellor who had the knowledge, expertise and skill appertaining to a life threatening disease was life-saving emotionally."

"Acupuncture helped pain and the dreadful sickness I had during chemo. I really found chemo hard. I cannot express how much this service helped me."

"The group therapy is great because it is an opportunity to meet others in a similar circumstance and how they are dealing with side effects, family life and life in general."

"Sara Lee Trust has been the main source of support and guidance for me during my journey through cancer."

Facilities

While feedback on our facilities has been generally good, room for improvement was indicated for accessibility.

Related service user comments:

"More disabled parking on site would be very good."

"I am having difficulty in driving to keep appointments because of my pain medication as a result I have had treatments at home and transport to sanctuary days."

"Despite my reservations in attending the hospice – the atmosphere is so lovely – so not scared to come in to the hospice for my appointments anymore."

"I have been lucky to have had several different types of treatment but I far prefer not going to the hospice."

Developing our care and services

We asked if people would like our complementary therapists to wear a simple uniform (e.g. dark trousers and a polo shirt with our logo). The response was mixed: 25% didn't have a view; of the remainder 53% said 'Yes' and 47% 'No'.

Service user safety, promoting the Trust and first impressions, were the main reasons given in favour of uniform.

"For therapists but not counsellors."

"When working on the wards in the Hospice, a uniform may be a good idea so that patients and relatives can identify them and thereby raise the profile of the Trust as some may think that the therapists work for the Hospice."

"I think it helps in not blurring the personal/professional boundaries."

The main reason against was that the complementary therapists are already appropriately dressed.

"Added to the relaxed tone of the treatment."

"Last thing user needs is someone in uniform."

Respondents wanted to see more group support and activities offered by the Trust, and identified the following gaps in our services provision:

- Gentle exercise (inc. T'ai chi and yoga) (69%)
- Mindfulness groups (30%)
- Information sessions (including healthy eating) (51%)

Reiki and Art Therapy were also highlighted as therapies that respondents would like to see introduced.

Summary of key themes from comments and suggestions:

People were generally very satisfied with the care they received and felt that it impacted positively on their health and well-being. Overall 99% rated services as Excellent or Very Good, compared to 92% last year.

Information on our services could be improved and it should be easier to access.

Care should continue to be centred around the needs of the individual rather than having a set number of sessions / appointments.

Feedback from other Stakeholders

A number of health and social care professionals depend on our service to provide essential care and support to the patients in their care. Here a number of them provide feedback on their experience of referring patients to us over the last year:

“The service is great and clients/carers really do seem to benefit from it. The fact that it’s open to carers and family members too is fantastic. All the best to you for the fantastic job you’re doing.”

Hannah Gould

Speech & Language Therapist

East Sussex Speech & Language Therapy Service for Adults (ESSAL TSA)

“The patients I have referred to the Sara Lee Trust have been seen and were happy with the treatment received. My experiences in making the referrals have been positive and I have had a quick response from the Sara Lee Trust.”

Ann Saxby

Tissue Viability Nurse, Bexhill Health Centre

“The Sara Lee Trust provides an invaluable service to our breast patients. It’s amazing that I am able to refer patients for a variety of complementary therapies. We know what a difference this can make when struggling to cope with the side effects of treatment and beyond. The counselling service is also a lifeline for some patients and the feedback we receive is always positive. We would genuinely struggle to access counselling with the volume of patients who are in need through the NHS in a timely manner.

Some patients have told us that it would be great if more appointments were offered before or after work but also appreciate that you are a charity. Patients found it difficult returning to work and would benefit from your services but had already taken enough time off work through treatment, hospital appointments etc.. or that their employer was not supportive of the time off.

Keep up the brilliant work !”

Juliette Twyman

ESHT Macmillan Breast Clinical Nurse Specialist

East Sussex Healthcare NHS Trust

“The Sara Lee Trust is a much needed service for patients who have a medical condition which is severely impacting on their lives. The service is invaluable for providing patients with supportive care either through complementary therapies or counselling, when they are struggling to cope with their situation. Not only is it a great support for the patients but this also extends to family members who are often just as stressed if not more so than the patient.”

Karen Angel

Macmillan Specialist Dietitian

East Sussex Healthcare Trust

“Referral process is straight forward and it is really helpful that you Email to say received the referral. I am not sure what the wait time is to be seen but I have only received positive feedback about the service.”

Gill Butcher

ESHT Macmillan Lung Cancer CNS

“Day Service PWS have always been very grateful of the clinics provided to them in Day Services by therapist Debbie Jones, more so as Debbie moves her availability round to other days that ensures everyone gets access to the treatments they need. The pws have commented on how relaxed Debbie makes they feel and how at ease they are from the treatments she gives.

On a referrals point of view SLT are swift in replying to us if they need more information that then secures a swift response to the referrals. This is reassuring to us so that we know that the person needs are being met and that SLT are happy to come back to us with more questions if required.

Recently SLT have joined back with us as part of the complimentary therapist sessions for our breathlessness clinic, we are advised by those attending that Gaynor is always polite and knowledgeable taking the time to explain things well and includes where and how to get treatments and or equipment for their home. The opportunity to try things and also information to their carers (who often attend the clinics) has proved very welcome as they can continue things back home with their loved one after the clinic has finished its course.

Otherwise the team at SLT are accessible and are on hand for advise and help outside of the clinics, our pws have further commented on how information about SLT services is detailed and clear about what it does and doesn't do and that they would all recommend the services offered by SLT.”

Jay Godding
Day Services Manager
St Michael's Hospice

“The presence of the Sara Lee Trust in the Hospice adds considerable value to our provision of person centred, holistic care. Being able to draw on this resource is valuable to the Hospice in the support of both patients and their families and carers. I hear many positive stories about the benefits of hands on therapies as well as the counselling support and am grateful to the SLT for their contribution to the high quality of care we provide to users of Hospice services. A good example of the benefit of having the Trust in house is the contribution to the planning of holistic care which the SLT engages in at the multidisciplinary team meetings.”

Peter Ellis
Head of Nursing and Caring Services
St Michael's Hospice

“Experience of referring patients and family members:

- Some H@H staff find the referral process of family members via cross care problematic but this is an issue with cross care
- The process of referring patients to the service is straight forward and easy

Feedback on the service provided:

- Very responsive
- Staff have received very positive feedback from patients who had experienced the service

Suggestions for improvements

- Possibly more information for staff so that they can provide more information to patients when talking to them about the service – may be worth attending a team meeting?
- Is there a limit in the number of sessions that patients/families receive and is this negotiable?”

Felicity Barnett
Matron – Hospice @ Home
St Michael's Hospice

2016-17 Trust Action Plan

The following recommendations were presented to the Board of Trustees in November 2017. These were accepted and approved as formal actions for implementation in 2017-18.

Awareness and access

- Further increase capacity to meet local need
- Provide increasingly local and accessible services from the new Therapy Centre in Sidley, and in the home.
- Identify areas and groups with unmet need, including by comparing outcomes against local demographics.
- Establish a quality benchmark for initial contact with newly referred patients: 100% within 2 weeks.
- Develop awareness of Trust services within local minority groups or groups with particular / significant barriers to access.
- Improve access to group activities, including exploring solutions to transport issues.
- Ensure easy access to high quality, easy to read information leaflets / displays across our retail units and at fundraising and other events.
- Continue to develop our website information portal and ensure new therapy leaflets and other services literatures is widely available.

Meeting service user need

Improve our ability to support service users through the development of the following services:

- Gentle exercise and yoga classes
- Mindfulness groups
- Additional support groups
- Information sessions (including healthy eating)
- Reiki

Improving the therapy environment

- Introduce a uniform for complementary therapists.
- Review Sanctuary Day venues (ongoing).

Sustainability of services

Improve the overall sustainability of Trust services by:

- Developing new and enhanced income streams
- Increasing income from low risk sources
- Further diversify sources of income

Monitoring

The action plan will be monitored monthly with formal reporting to the Board required on a two monthly basis. A full review will be undertaken annually as part of the yearly Trust evaluation process.