



'Catwalk for a Cause'

Combining inspiring stories and pre-loved fashion to raise funds for your Highland Hospice

Annual Review 2023/24

Read all about our activities during this incredible year inside...



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Introduction



Stephen Pennington
Co-chair of the Board of Trustees

Welcome to the Highland Hospice review of the financial year 1st April 2023 to 31st March 2024. This was the final year of our three-year strategy, 'Caring for our population Together'. Back in 2021, this strategy set out our vision that 'people in the Highlands have access to world leading care and support towards the end of life and in bereavement.' We wanted to take our experience of working differently during the Coronavirus pandemic and apply it to the redesign of services and to building a better way of supporting each other as we reach the end of our lives.

We knew that fundamental to success would be collaboration, which led directly to the establishment of End of Life Care Together. End of Life Care Together (EOLCT) is a partnership in which we have invested considerable resources to lead significant change and to improve care towards the end of life for all in Highland.

EOLCT now spans the health, social care and voluntary sectors in Highland. Led by Highland Hospice, our partners, which include NHS Highland, Macmillan Cancer Support, Social Finance, Connecting Carers, Marie Curie, Highland Senior Citizens Network, Scottish Ambulance Service and more, work together to create positive change.

In May 2023, EOLCT launched the 24/7 Palliative Care Helpline. The service provides a single point of access for 24/7 advice, support and information for patients nearing the end of life, their families, carers and professionals across Highland and Argyll and Bute.

Analysis by the NHS Highland Public Health Intelligence unit shows that people who died having used the Helpline spent on average six fewer days in hospital in their last year of life than would have been expected for this patient cohort.

Further to this, the 70 people who died between April and December 2023 having been supported by our Palliative Care Response Service - launched in 2022 based on need identified through EOLCT - spent on average 20 fewer days in hospital in their last year of life.

These are hugely positive results which confirm our strategic collaborative approach is delivering valuable change and improved care.

These services weren't the only Hospice service subject to evaluation this year.

The Care Inspectorate undertook an unannounced inspection of our Sunflower Home Care service and noted that **'people experienced support that promoted their dignity, independence and choice, from a kind and caring staff group.'**

An independent evaluation of our community partnership work found that **'all partners identified that the model of partnership working with Highland Hospice is invaluable in enabling the provision of befriending and care at home services within their local communities. Without the support of the Hospice, these services would not be available within many of these communities.'**



Shona MacDougall
Co-chair of the Board of Trustees



Receiving the Business Excellence Award for 'Purposeful Business'.



Our IIP assessment led to reaccreditation at Gold Level.

Introduction continued

Our Investors in People assessment led to reaccreditation at Gold Level, with the report noting that **'people are empowered, enthused, engaged and committed to delivering and exceeding high standards across the organisation'**.

Using a methodology developed by the Charity Retail Association, it was identified our 15 shops generate almost £75m of social value in the Highlands – this is over and above the income they generate to support the provision of our services.

Finally, perhaps in recognition of all of this, we were awarded the Highlands and Islands Business Excellence Award for 'Purposeful Business'.

These validations from third parties reflect our own experience and are a credit to the commitment and dedication of our staff and volunteer team – undoubtedly the Hospice's most valuable and important resource, and to whom we would like to extend our heartfelt thanks.

With the timeframe for 'Caring for our population Together' complete, we are working towards 'Ambition 2030' – our blueprint for the next six years as we strive to achieve our vision that people in the Highlands have access to world leading care and support towards the end of life. Ambition 2030 will be published towards the end of 2024.

The development of new services and inflationary pressure has increased our cost base. This year we continued to grow our fundraising and commercial activity and were fortunate to benefit from strong legacy income and a healthy performance by our investments such that we are reporting a surplus. However, cost pressures remain high, public-sector finances are tightening and income, especially from legacies, can be volatile. We are forecasting several years of deficit whilst we grow our sustainable income base. We have the reserves to support this and remain enormously grateful to the Highland public for their generosity which means we can provide advice and support to over 2,000 people every year.

Thank you!

Shona MacDougall and Stephen Pennington
Co-chairs of the Board of Trustees

“These are hugely positive results which confirm our strategic collaborative approach is delivering valuable change and improved care.”

Who We Are



Our Vision

“People in the Highlands have access to world leading care and support towards the end of life and in bereavement.”

Our Mission

Working together with all organisations and communities who share our vision, we will use our resources to help the people of the Highlands to live and die well and support families and carers to navigate the experience of death and dying.

Our Values

For those we serve:

Facilitating patient choice and independence is key to delivering good care.

Providing sanctuary, respect and dignity is at the heart of our philosophy of care.

Supporting family members and carers is integral to our model of care both during illness and after death.

We will achieve this through our:

Commitment – We will strive to deliver the best for those we serve and the organisation.

Compassion – We will be concerned for each other, and we will support each other to achieve the organisation’s objectives.

Team working – We will work together and in partnership with others to achieve the best outcomes.

Transparency – We will demonstrate openness and transparency in all decision making.

Trust – We will act with integrity and be honest, respectful, and sincere in dealings with each other and our partners.

Our Services

- An 11-bed **Inpatient Unit** in Inverness.
- **Rehabilitation and Wellbeing** services at our Netley Centre in Inverness and in the community.
- A 24/7 **Palliative Care Helpline** for patients nearing the end of life, their families, carers and professionals.
- A **Palliative Care Response Service** providing care in the home for people nearing the end of life.
- **Adult and Child Bereavement Services.**
- Care at home through our **Sunflower Home Care** partnerships.
- **Helping Hands** volunteer befriending and support.
- **Knowledge Exchange**, training and mentoring with the wider health and social care workforce.

In addition, through our leadership role in the **End of Life Care Together** partnership we work to create positive change which enhances and improves end-of-life care for all in the Highlands.

Our Ambition

Our Strategy for the period 2021-24 was titled 'Caring for our population Together'. This strategy had at its heart the need to work in partnership as we strive to deliver our vision that 'People in the Highlands have access to world leading care and support towards the end of life and in bereavement.'



Our first Community Partnership Conference brought together over 120 people to share experiences and develop new activity.

During the three year period of 'Caring for our population Together' we established and developed many partnerships and networks, each delivering for our population in its own way:

The **End of Life Care Together** partnership now spans the health, social care and voluntary sectors in Highland. Led by Highland Hospice and NHS Highland, our partners, which include Macmillan Cancer Support, Social Finance, Connecting Carers, Marie Curie, Highland Senior Citizens Network, Scottish Ambulance Service, Scottish Care and more, are working together to create positive change. Together, we launched the 24/7 Palliative Care Helpline and the Palliative Care Response Service both covered in detail later.

Our **community partnerships** now number 10, all of them providing befriending services and three also supporting our Sunflower Home Care service. Each also has local services, run alongside those they operate collaboratively with the Hospice.

In October 2023, we published an evaluation of our community partnership activity which concluded that 'it is evident that the Hospice has built excellent partnerships with local community organisations across the Highlands. The model of partnership working is operating well and enabling the delivery of vital social care services within local communities.' Read the full report at highlandhospice.org/CPEvaluation.

In November 2023, we brought all these partners and many other communities, agencies and charities together in our inaugural **Community Partnership Conference** attended by 120 people. The conference was itself a partnership between the Hospice, Highland Third Sector Interface and Connecting Carers. You can download the report from this conference at highlandhospice.org/CPCReport.

Our Ambition continued

Established and led by Highland Hospice, **Grief Matters Highland** has been active for many years, offering information, networking, and sharing of best practice to its members, all of whom are committed to supporting bereaved people in the Highlands.

With the timeframe for 'Caring for our population Together' now complete, we are considering the next stage of our development and have identified that we want to set out our aims for the Hospice, how we can support our partners and what we can provide our community in '**Ambition 2030**' – our blueprint for the next six years. We expect Ambition 2030 to be published by the end of 2024.



Margaret climbing her stairs the height of Suilven.



Margaret and Nicky celebrating their 'Suilven climb'.

Margaret's Story

During the first Covid lockdown in Spring 2020, Margaret Payne gained national profile and huge public support for her 'Suilven on the Stairs' challenge, during which she climbed the height of Suilven on her staircase, raising over £400,000 for charities including Highland Hospice.

Margaret's fundraising challenge was supported by her daughter Nicky, who was also with her mum during her final few weeks in November and December 2023. Nicky recalls, 'Mum's final days were spent at her home, Ardvar, but this was only possible because of the support provided to us by our local district nurses and the invaluable help over her last few days from the Highland Hospice Palliative Care Helpline. The support the Helpline arranged for us at home came at a critical time. Whilst Mum's final days were hard, the essential support we received from the Helpline allowed her to remain in her own home which was her absolute wish. She died quietly, peacefully and with dignity in the place she loved.'

“ The essential support we received from the Helpline allowed her to remain in her own home which was her absolute wish. ”

Nicky, Margaret's daughter

What We Do

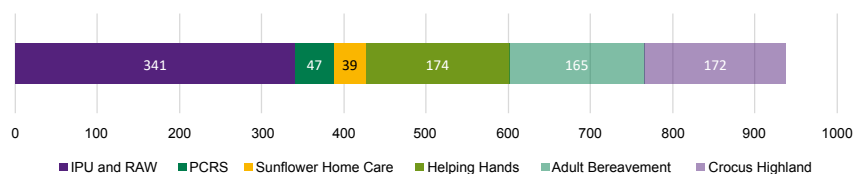
Approximately 2,800 people die in Highland every year. Around 80% of these deaths are people with palliative and end-of-life care needs – in other words they are predictable and follow a period of declining health. These people should have access to the best quality care and support to make the most of their limited time. Furthermore, all deaths impact on loved ones, and in some cases, people dealing with grief can benefit from additional support. **This is who Highland Hospice is for.**

“
Around 2,800 people die in the Highlands every year. Our services provided advice and support to over 2,000 of them.”

We recognise that support from Highland Hospice can take many forms. There are those people who receive care and support directly from Hospice staff and volunteers. There are more who access advisory services such as the Palliative Care Helpline and services delivered by our community partners. Finally, there are those that receive improved quality of care because of the training and support we have given to the person providing their care.

In 2023/24, 938 people received care and support directly from Hospice staff and volunteers.

Highland Hospice Service-users



In excess of 1,300 people accessed the Palliative Care Helpline, Palliative Care Advisory Service or services provided by our community partners.

We cannot count the number of people who benefitted because their care provider received education, training or mentoring from the Hospice, but we do know that over 500 professional and lay carers accessed these services.



End of life care
Together

As part of our aim to reach right across the Highlands and support as many people as possible we have established and lead the End of Life Care Together partnership. End of Life Care Together is a collaboration across voluntary, health and social care, led by Highland Hospice and including NHS Highland, Macmillan Cancer Support and Social Finance. The shared aim is to take a population approach based on the fundamentals of value-based health care, developing services that provide:

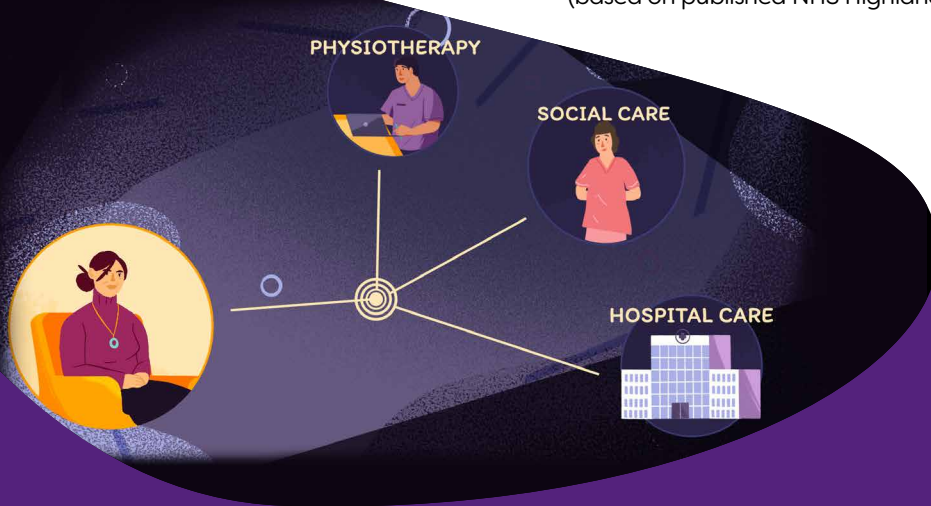
- Personal Value – meeting the outcomes that matter most to people nearing the end of life, their family and carers.
- Allocative Value – measuring and ensuring fair access to care based on need.
- Technical Value – refocusing resources as efficiently as possible to increase community support, reduce unscheduled care and meet the outcomes that matter most to the people of Highland.

Service development is currently focused on increasing identification of people who need support by better future care planning, and fast-tracking palliative and social care at home through the 24/7 Palliative Care Helpline and the Palliative Care Response Service.

“ People who accessed the Helpline spent on average six fewer days in hospital at the end of life. ”

The 24/7 Palliative Care Helpline evolved from an out-of-hours service to be 24/7 in May 2023. The PCH provides a single point of access for advice, support and information for people nearing the end of life, their families, carers and professionals across Highland and Argyll and Bute.

- The PCH received 2,543 calls from 811 individuals between 15 May 2023 and 31 March 2024.
- Through a grant provided by Hospice UK, the service was extended to provide clinical support and advice for any person who is living in a care home with frailty. The service received 408 calls from care homes regarding 173 people.
- The PCH is working with other organisations to ensure that the right care is delivered at the right time. As a result, the Helpline is now written into Scottish Ambulance Service pathways, providing a collaborative response and joint working.
- Between May and December 2023, people who died having used the Helpline spent on average six fewer days in hospital in their last year of life than would have been expected for this patient cohort.
- The 415 people who died having accessed the Helpline spent a total of 2,289 fewer days in hospital. This is the financial equivalent of £2,128,770 (based on published NHS Highland bed day rates).



The Palliative Care Helpline will coordinate all the services you need.

John's Story

“ With help from the 24/7 Palliative Care Helpline John was able to access the care and support he needed to remain at home. ”

When John's pain and agitation levels steadily increased through the night his partner and carer Sarah called the 24/7 Palliative Care Helpline (PCH) for advice. Sarah had been unable to contact their GP or district nurse and was worried that she wouldn't be able to cope with John's increasing personal care needs and may not hear him if he needed her through the night. Angela, one of our PCH Senior Nurses, provided advice regarding the pain management of John's symptoms, talked through Sarah's concerns, and discussed the options available.

Sarah and Angela also spoke about John's mobility, physio and occupational therapy requirements and organised a follow-up re-assessment from the Highland Hospice Rehabilitation and Wellbeing team. After offering some much-needed reassurance, Angela created a plan to meet John's additional support needs. She arranged the necessary referrals, filled out an application for end-of-life care funding and sourced private home care support before compiling a report of John's symptom control to share with his GP and District Nursing team.

With help from the 24/7 Palliative Care Helpline John was able to access the care and support he needed to remain at home and Sarah was able to relax knowing his pain management was under control and the helpline was just a call away if she needed them.

Palliative Care Response Service

“Having the care team on hand meant we could be there for her as a family rather than her carers.”

Our Palliative Care Response Service (PCRS) provides flexible and timely access to social care at home and other support services for people nearing the end of life across Inverness. In an emergency we aim to assess patient care needs and have social care in place within four hours. In all other cases this will be done within 24 hours. By coordinating access to urgent social care services, we can help to prevent unwanted hospital admissions or accelerate discharge from hospital, supporting people to remain at home longer and helping manage hospital capacity.

- During the year the PCRS accepted 105 referrals of whom 47 were directly supported with care in their home.
- The PCRS Coordinator also sources care from other providers and refers to agencies such as Marie Curie and Connecting Carers.
- Between April and December 2023, people who died having been supported by the service spent on average 20 fewer days in hospital in their last year of life following an emergency admission than would have been expected for this patient cohort.
- The 70 people who died having been supported by the PCRS spent a total of 1,345 fewer days in hospital. This is the financial equivalent of £1,250,850 (based on published NHS Highland bed day rates).
- The service is still in its infancy. Using a quality improvement approach, the team is reflecting and analysing on what is working well with the aim of expanding the model across the Highlands over the next few years.

Senior Community Staff Nurse...

‘I would just like to pass on my and my colleagues’ appreciation of the Palliative Care Response team’s work. On two separate occasions last week, the team stepped into the breach when a care company withdrew on the day of discharge for a palliative patient, enabling discharge of the patient. And today, within three hours the PCRS had organised and fulfilled a 3-times daily care package for an actively dying patient. We really appreciate the speed and approachability of the team.’

Liz and Craig.



Liz’s Story

Due to a prior battle with cancer, Liz lived with resulting health complications, but she never let it hold her back. She was truly a force to be reckoned with and refused to be a burden to anyone. Her grandson Craig recalls how devastated the family was when her cancer recurred. He stated:

‘Nana was a fiercely independent woman. We knew that she wanted to stay at home and that the care she received would need to be on her own terms.’

Liz and her family were put in touch with the Palliative Care Response Service through her GP. Care was arranged, and the family were given the number of the 24/7 Palliative Care Helpline if they had any questions or concerns about Liz’s health, day or night.

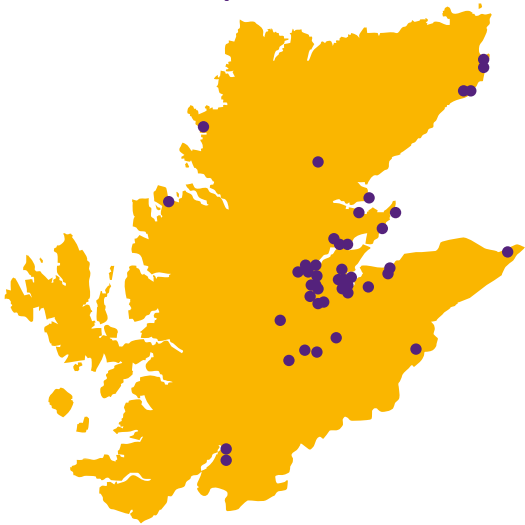
‘We’re hugely grateful to the Palliative Care Response Service and Palliative Care Helpline for helping Nana to remain at home, where she wanted to be. She was in control the whole time, and that was so important to her.’

‘Having the care team on hand meant we could be there for her as a family rather than her carers. Not that she’d have let us do anything for her though. She was independent until the end, and she’d have wanted it no other way.’

Inpatient Care

Integration with the wider Hospice team delivers high-quality, specialist care for those most in need.

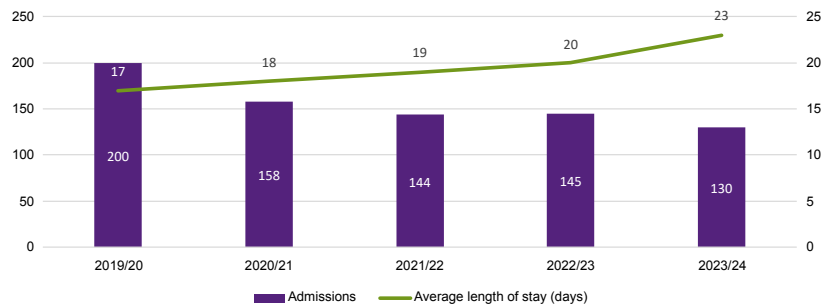
Home locations of our inpatients



Our 11-bed Inpatient Unit (IPU) provides specialist palliative care, improving the quality of life for those who require specific treatment for difficult issues such as pain and symptom control, or who would benefit from rehabilitation. A significant number of our patients stay for a short time before returning home or to an alternative care environment, and we offer end-of-life care for those who need it and who benefit from being in a hospice environment at this stage of their life. Through effective integration with the wider Hospice team we are able to deliver high-quality care for those most in need of specialist support.

- During the year, there were 130 admissions to the Inpatient Unit, made up from 118 individuals (some people are discharged and readmitted).
- Over the past five years we have seen a decline in the total number of people cared for in the Inpatient Unit, alongside a corresponding 35% increase in the average (mean) length of stay.
- A small number of long stay patients skew the mean length of stay. The median length of stay was 13 days and 21% of patients were admitted just once for five days or less.
- Our discharge rate rose to 35% (2023: 27%) and our bed occupancy to 78% (2023: 66%).
- Although IPU admissions have fallen, the complexity of care provided in the unit has increased and we are seeing more people with lower needs supported to remain at home through services such as the 24/7 Palliative Care Helpline, Palliative Care Response Service and the Rehabilitation and Wellbeing team.

IPU Admissions and Length of Stay



Kath Fraser and her family.

Cliff and Elaine's Story

Cliff was diagnosed unexpectedly with terminal stomach cancer only a couple of weeks after his wife, Elaine, had been diagnosed with ovarian cancer. Given the advanced stage of his illness, treatment was not an option, and he was discharged home so they could spend one last Christmas together with family.

Sadly Elaine's health deteriorated rapidly over Christmas. On New Years' Day she was admitted to Raigmore Hospital ICU to be placed in an induced coma and subsequently ventilated; having suffered multiple organ failure. It was her 70th birthday whilst in ICU. Cliff's health also deteriorated rapidly, and only a few days later he was admitted to the care of Highland Hospice.

After being brought out of a coma it was clear that there were no further treatment options for Elaine and she made the brave decision to be transported on a ventilator to the Hospice so she could say goodbye to her husband of 48 years. Elaine passed away only a few hours later by Cliff's side.

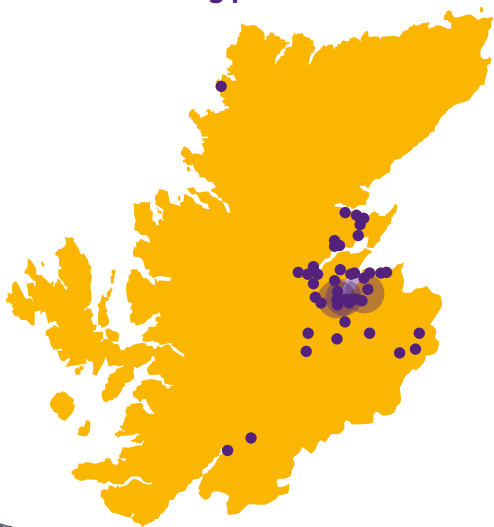
The image of our parents being reunited and reaching to hold one another for one last time is hard to put into words; however, the coordination, care and compassion shown by the Hospice and ICU staff in enabling them to be together at the end, is something we as a family will always be grateful for.

Kath Fraser, Cliff and Elaine's daughter

Rehabilitation and Wellbeing

“ Helping people live well with a life-shortening illness. ”

Home locations of our Rehabilitation and Wellbeing patients

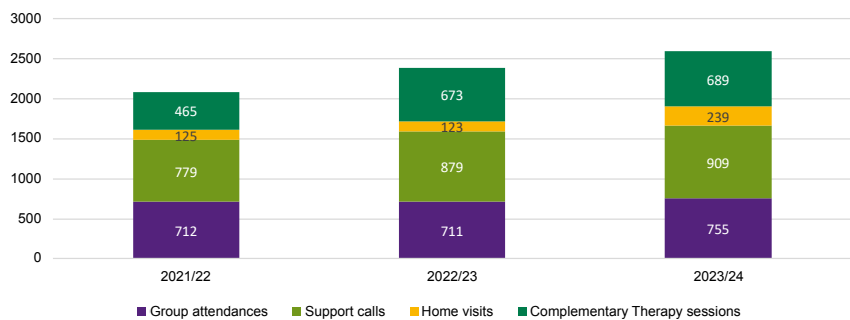


The Rehabilitation and Wellbeing team at Highland Hospice offers a range of services to help people live well with a life-shortening illness. This includes management of symptoms such as breathlessness, fatigue and anxiety; practical support to help people maintain their independence; advice about finances, benefits and accessing social care; creative sessions to try out new techniques, make gifts or capture memories; and complementary therapies. The majority of people admitted to the Inpatient Unit receive support from the team as do people living in the community who access the service on an outpatient or domiciliary basis.

During the year:

- Activity continued to grow (see graph below).
- The addition of two part time rehabilitation assistants enabled the team to respond to increasing demand for specialist therapeutic support in the community.
- We were able to increase the number of people receiving physiotherapy through improvements to the rehabilitation gym and the introduction of group exercise sessions.
- Increasing demand for wellbeing groups, such as Tai Chi, led to additional volunteer recruitment, supporting session delivery and bringing different expertise to the sessions.
- The memory and concentration group, delivered jointly by occupational therapy and Maggie’s Highland, continues to demonstrate the value of effective partnership delivery.

Rehabilitation and Wellbeing Activity



Physiotherapy can play a major role in improving quality of life.

Plans include:

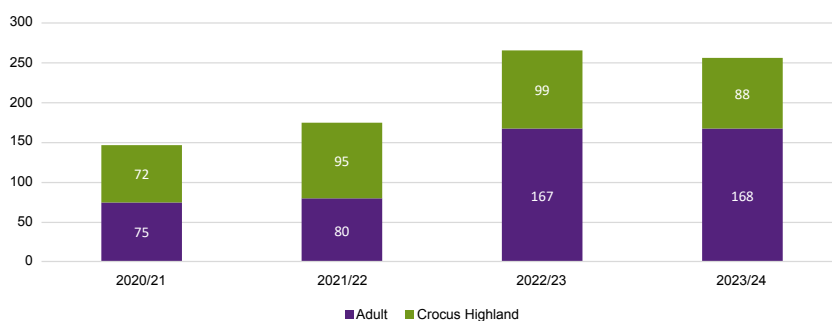
- Increase opportunities for participation and feedback to ensure that service provision continues to be shaped by the people it serves.
- Expand volunteer complementary therapy provision into locations outwith Inverness.
- Improve access to therapeutic activities such as arts and crafts, horticulture, music, movement and storytelling to help support wellbeing.

Adult and Child Bereavement Services

“ Processing and talking about grief doesn't have to be clinical, it's about forming and building relationships. ”

Highland Hospice offers bereavement support for people of all ages living in Highland, regardless of the cause of death of the person they have lost. The service is not restricted to the families of Hospice patients. Support can take many forms including access to a library of materials to help understanding of grief, informal and social support groups, group therapy work and 1-2-1 counselling. For people under the age of 18 the service is called Crocus Highland. Through our leadership role in Grief Matters Highland, the Hospice facilitates partnership working between agencies and charities, with the aim of ensuring support is available for all those in Highland living with grief, regardless of age or location.

Bereavement Service Referrals



During the year:

- Referrals flattened (see graph above), but with continued support for people referred in previous years the bereavement service worked with 337 adults, young people and children in the year
- We recruited bereavement support volunteers to the adult service who, once fully trained, will offer a broader range of services for clients.
- We piloted bereavement awareness sessions for referred adult clients and will be extending this provision.
- With high demand for adult bereavement support, we have had to implement a waiting list for counselling. People on the waiting list are offered information and informal support.
- Within Crocus Highland we worked with a group of young people to become mentors in developing a peer support group.
- We have delivered eight training sessions on the 'principles and practicalities of supporting bereaved children and young people' for people working in the statutory, education and charitable sectors.

Responses from the young Crocus Highland mentors...

Why did you get involved?

We all know how much Crocus helped us, and when we were given a chance to help bring back the group then we wanted to take it. We wanted to be able to offer young people what we had.

What are you looking forward to for the future?

Showing people that it isn't only hospice staff who can help, but that young people can be supported by people of a similar age. We're excited to show people that the process of meeting with other bereaved young people helps, because our experience tells us it does. For each of us, coming to a group helped our mental health and to make friends with people who understood about our grief. We want to show people that processing and talking about grief doesn't have to be clinical, it's about forming and building relationships.

Plans include:

- Further strengthening of partnership working through Grief Matters Highland.
- Continue to expand delivery of bereavement awareness sessions to empower communities and influence what support needs to look like.
- Support communities to develop the right therapeutic peer group for them.
- Strengthen links to support the progression of young clients to partner agencies such as The Place Youth Club (AIness) and The Ledge (Inverness).



Sunflower staff are based in three rural communities.



People experienced support that promoted their dignity, independence and choice, from a kind and caring staff group.



Our Sunflower Home Care communities

Sunflower Home Care is our care-at-home service. We work in partnership with communities to recruit locally based care workers when other providers aren't meeting demand. We contract with NHS Highland to deliver high quality, tailored social care. We have established the Sunflower Home Care service in three rural communities, on South Loch Ness, Fort Augustus and surrounding glens, and Glenurquhart.

During the year:

- We provided care to 39 people (2023: 25).
- The Glenurquhart service was established in July 2023.
- Care worker recruitment remained challenging, but we were able to meet our contractual requirements and, towards year-end, staffing levels improved.
- Sunflower Home Care assumed responsibility for the Palliative Care Response Service (PCRS) and resources were focussed on getting this up and running.

Plans include:

- Consolidating existing rural partnerships to develop resilience and meet local need.
- Growing the number of people supported by the PCRS and investigating establishing similar services outside Inverness.



The Care Inspectorate undertook an unannounced inspection of Sunflower Home Care in June 2023. The service was graded 4 – Good, with the following key messages:

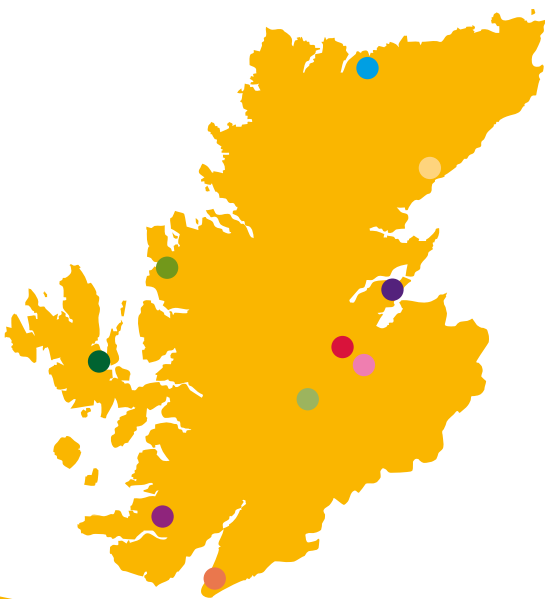
- People experienced support that promoted their dignity, independence and choice, from a kind and caring staff group.
- Staff were quick to identify changes in people's health and seek relevant health advice.
- Leaders had taken steps to improve areas of provision and recognised further improvements could be made.
- Leaders were responsive to feedback from people receiving a service. Staff felt well supported by the management team.
- The provider's improvement plan needed to be more detailed. (Following publication of the report the improvement plan was revised as recommended).



“
When her befriender came in,
Mum’s eyes lit up.”

Helping Hands is a volunteer befriending service delivered and supported by Highland Hospice in communities throughout the region. Each Helping Hands volunteer and the person they support is unique. The amount of time and activities will vary but every volunteer will provide a friendly ear to listen as well as extra assistance to help reduce anxiety and stress for individuals and carers. We support 10 community partners to provide a local befriending service.

Our partner communities



- **Black Isle Cares**
- **Boleskine Community Care**
- **Gairloch and Loch Ewe Action Forum (GALE)**
- **North Coast Connection**
- **Oban Hospice**
- **Skye and Lochalsh Council for Voluntary Services**
- **Soirbheas (in Glenurquhart and Strathglass)**
- **Sutherland Care Forum**
- **Urram (in Acharacle, Ardgour, Morvern, Sunart and West Ardnamurchan)**
- **3 Glens Community Care (in Fort Augustus, Glenmoriston and Glengarry)**

During the year:

- Highland Hospice led services supported 207 individuals and those of our community partners worked with a further 191 people – a total of 398 (2023: 391).
- With increasing awareness that the Hospice is there to support people through ill-health and not only at end of life, demand continued to grow.
- We saw an increase in the number of requests for carer support and a greater need to work collaboratively to offer timeous support to enable people to remain at home.
- Befriending coordinators provided ongoing training and support to ensure volunteers remain equipped for this vital role.

Helping Hands family member...

Mum really hadn’t been herself over the past few days and we were becoming concerned. I arrived today and she was better, but when her befriender came in, Mum’s eyes lit up. She then produced an afternoon tea from her bag – everything, tablecloth, flower, crockery and baking. The two ladies had a lovely chat. I now have a very happy mum.

Plans include:

- Following a successful pilot, looking at how group befriending may support more people.
- Investigating how we might work with hospital discharge teams to offer short term support at the time of discharge.

Helping Hands continued



“
The Hospice is so well known and established... it ticks all the boxes if you say that you're working with Highland Hospice.”

Widening the role of befriending services: Hospital and Post Discharge Befrienders – Skye & Lochalsh Council for Voluntary Organisations.

SLCVO has worked in close partnership with Highland Hospice to develop its befriending service. Initially centred on face-to-face and telephone befriending, SLCVO is now piloting befriending for people who need short-term support while in hospital or after being discharged, with referrals being made by NHS Highland.

SLCVO did not have a reputation or established track record in the delivery of social care services, so the knowledge, expertise and reputation of Highland Hospice were invaluable in designing and securing funding for this new pilot.

In addition, the Hospice:

- used their clinical knowledge and expertise to enable and support SLCVO to engage with health and social care professionals to co-design the befriending service;
- used their knowledge and expertise in helping to complete funding applications to pilot the service;
- gave health and social care professionals reassurance that SLCVO was capable of delivering the service;
- has given the SLCVO CEO the confidence to talk about befriending and the provision of social care services more widely within her community.

Through this partnership approach SLCVO secured £60,000 from NHS Highland and £20,000 from Highland Council for a three-year pilot befriending project.

In July 2023, Highland Hospice commissioned SKS Scotland CIC to undertake an independent evaluation of our community work including Sunflower Home Care and Helping Hands. SKS reported the following experiences of community partners:

- All partners identified that the model of partnership working with Highland Hospice is invaluable in enabling the provision of befriending and care-at-home services within their local communities. Without the support of the Hospice, these services would not be available within many of these communities.
- Partners value the flexibility and understanding that the Hospice shows, supporting them to deliver the befriending service in a way that best supports the needs of their community.
- The Hospice provides a range of resources to its community partners to support befriending service delivery including information, training, promotion, networking opportunities, and small grants. This support is highly valued by the partners in supporting the establishment and ongoing delivery of these services.
- Partners highlighted the value of working in partnership with the Hospice, due to the organisation's reputation and standing within their local communities and with other organisations.
- Partners welcome the support and advice of the Hospice in helping them to develop approaches to widen access to befriending services and to attract a more diverse audience of volunteer befrienders.
- Better links are needed between befriending and Sunflower Home Care to ensure appropriate support for changing client needs over time.
- Partners welcome the Hospice's new Community Engagement Officer as a sign of their commitment to supporting and working with them to address community needs.

Knowledge Exchange

“Our aim is to develop skills and confidence amongst carers, helping people to receive the best care, wherever they are.”

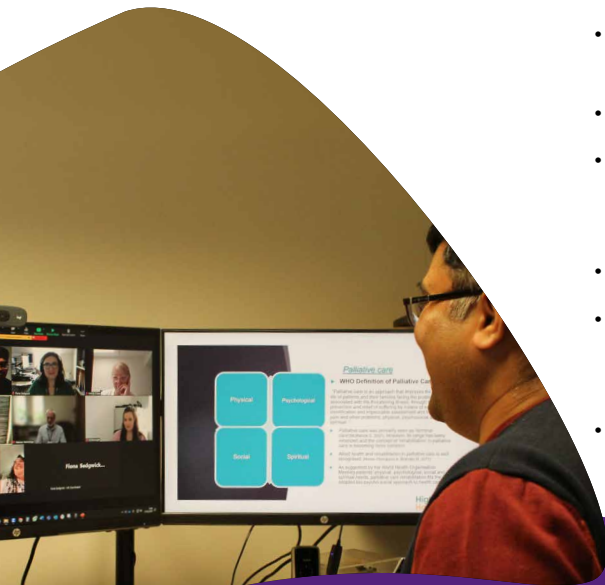
By offering support, mentoring and learning, our specialist staff are able to undertake knowledge exchange with the wider health and social care workforce and informal carers across Highland. Our aim is to develop skills and confidence levels amongst carers, helping people to be provided with respect, dignity and choice during their declining health wherever their care is taking place.

Our Knowledge Exchange activity includes:

- Project ECHO, an online methodology designed to support healthcare professionals through mentoring and building communities of practice aided by multi-site videoconferencing.
- Last Aid, a simple half-day course which helps to educate the community about the basics of palliative care and care for dying people.
- Each year we run two palliative and end-of-life care conferences, one focussed on social care.
- As well as using the ECHO methodology to support the Highland workforce, with the support and encouragement of the Scottish Government, we have established the 'Scottish Centre for Project ECHO' (SCfPE) to facilitate the use of ECHO across the Scottish health and social care sector. This places Highland Hospice in a lead position for delivery of mentoring and support across the NHS in Scotland, using the ECHO methodology. Read more at echo.scot.

During the year:

- The Highland Care Home ECHO was attended by 44 people in 14 care homes.
- We ran three Non-Medical Prescribing ECHO's reaching 114 people, mainly nurses working in or with care homes.
- The Gynaecology ECHO had 56 learners with a focus on diagnosing and managing female malignancy.
- 28 GPs joined the Rural Fellows – Palliative Education ECHOs.
- We provided 2700 hours of placement support to health and care professionals to develop their knowledge and understanding of palliative and end-of-life care.
- Last Aid was completed by 194 people in the Highlands (2023: 127)
- We trained colleagues in Fire Service Scotland, Police Scotland and the Scottish Ambulance Service to deliver Last Aid to their teams, reaching a further 265 individuals.
- Our palliative and end-of-life care conferences were attended by over 200 people.



The ECHO methodology links practitioners from all over the Highlands for mentoring and support.

Plans include:

- Developing evaluation capabilities in-house so that it becomes embedded in all our Knowledge Exchange activity.
- Delivery of an Informal Carers ECHO / Living Well hybrid with potential to collaborate in an international project to compare experience and develop evidence-based delivery.
- Development of the Hospice steering group for palliative ECHO activity, using evidence from the Palliative Care Helpline and other sources to identify need and design programmes.
- Utilising our leadership role in the Scottish Centre for Project ECHO we will expand collaborative learning and the sharing of best practice across multiple health and care disciplines in Scotland.

People

“ People are empowered, enthused, engaged and committed to delivering and exceeding high standards across the organisation. ”

Staff and volunteers are the Hospice's most important resource. Every individual plays a vital role in delivering the achievements described in this report and is valued for their contribution.

- Staff salaries account for 66% (2023: 71%) of expenditure.
- The average monthly number of employees during the year was 213 (2023: 187), 71% of whom were part-time.
- New posts were within our care at home and hospice services teams.
- Staff turnover reduced to 19.7% from 22.1% the previous year, and absence fell to 2.6% from 3.3%.



Our Voluntary Services Team.

In September 2023, the Hospice was reaccredited at Investors in People Gold Level. This award reflects the commitment of staff to the organisation and to supporting those in the community who need us.

Achievements noted by the report to be 'proud of' included:

- People are empowered, enthused, engaged and committed to delivering and exceeding high standards across the organisation.
- People at all levels fully embrace and live by your well communicated and embedded values.
- Senior leaders instil confidence, with people enjoying being part of a highly respected organisation.
- Managers at all levels are viewed in positive terms: approachable, accessible, there when needed and willing to listen and support.
- Communication is effective and inclusive, supported by the open and transparent style of working.
- The phenomenal level of pride in working for the organisation.



“
 Staff and volunteers
 are the Hospice’s most
 important resource.”

**Volunteers in our
 Hospice café ‘By the River’.**

People continued

From a new volunteer at her three month review...

I wanted to say that I have been really impressed with how you and your colleagues have managed the whole induction/support process for new volunteers. It is also clear that you all have excellent communication skills which is so vital to make all of this work for everyone. I have volunteered with a few different organisations since I moved up to Inverness and can honestly say that you guys are the Gold Standard from my point of view.

Across Hospice services, volunteers provide support including reception, ward clerk, driving, events, office administration, gardening, flower arranging, bereavement support and befriending. In addition, over 500 of our volunteers help keep our 15 shops, warehouse, two cafés and Ness Islands Railway open throughout the year. The contribution of volunteers is critical to our success as a community-supported organisation, and we are hugely grateful to each and every one of them for their hard work and dedication.

During the year:

- At year-end the total number of volunteers was 931 (2023: 969).
- We received 294 (2023: 265) applications to volunteer, with 218 of these leading to individuals joining the team.
- Younger volunteer recruitment continued to grow with 31% of new starts aged 25 or less.
- We recruited new volunteer roles within Bereavement Services to support the team.
- We successfully developed our approach to targeted volunteer recruitment, seeking people for specific roles using social media.
- We invested in the Voluntary Services team to support recruitment and ongoing engagement of volunteers.

There is an immense social value to our volunteering. Volunteering provides many benefits to both mental and physical health. The social contact aspect of helping and working with others can have a profound effect on overall psychological well-being. Using a methodology developed and championed by the Charity Retail Association, a Social Value Report was completed for our Beauty Shop. This identified a total of £4,934,265 of social value generated by the shop. This is one of 15 shops operated by the Hospice – assuming a similar average impact, our shops generate almost £75m of social value in the Highlands.

Sustainability

Our Sustainability Action Plan brings our existing approaches to sustainability into a focussed and cohesive organisation-wide strategy summarised below:

A sustainable Highland Hospice will place equal emphasis on our social, economic and environmental goals. We will measure success not solely in terms of patients and families supported or financial performance, but also through the health of our organisation and the impact we have on our communities, and on the environment. In so doing, not only will we make Highland Hospice a sustainable organisation, but we will also contribute to the United Nations Sustainable Development Goals.

See more on our Sustainability activity at highlandhospice.org/sustainability

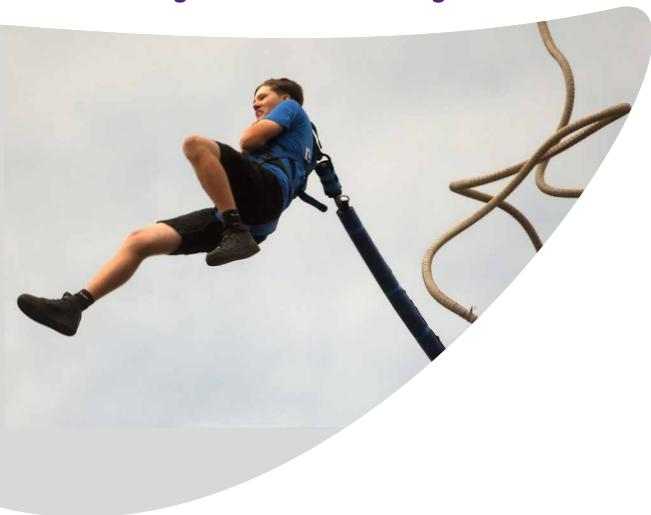
In the last year we have made significant progress in furthering our plans for a sustainable hospice:

- We have measured our CO2 emissions across the organisation for the financial year ended 31st March 2023 and plan to prepare comparative data during 2024. By 2025 we will report our emissions annually.
- We purchase 100% of our electricity from a company making significant progress towards net zero in terms of energy supplied through the grid.
- We changed our copier/printers resulting in a reduction in usage.
- The Finance and HR teams have progressed paperless systems and processes.
- We have changed the giveaways used in fundraising, removing or choosing more sustainable options when this is not possible.
- We've moved from a twice-yearly printed newsletter to a monthly eNews for supporters.
- We introduced biodegradable medicine dispensers in the IPU.
- Through our 15 shops we redirected over 491,000 items of pre-loved clothes, bric-a-brac and books to new owners.
- We introduced the topic of sustainability into our annual appraisal system to encourage everyone to think about and make changes to the impact of their work.
- We committed to the 'Fair Work First' principles.
- We have established an Equality, Diversity and Inclusion (EDI) group who are looking at how we increase voice, understanding and involvement in what and how we do things across the Hospice.



Our shops redirected over 491,000 pre-loved items.

'Bungee Loch Ness' saw hundreds of people tackle this high adrenaline challenge.



'Team Himalayas' finally completed their fundraising trek in India following three years of Covid-related delays.

Income Generation



'Catwalk for a Cause' showcased the quality clothes on offer from our shops and gave our models a chance to share their personal experience with serious illness.

68% of our income is generated through fundraising and commercial activities and from donations and legacies.

- Income from fundraising and donations rose by 5% and the return on investment was 2.57 (2023: 2.69)
- We saw growth in income from our fundraising events with particular success for in-person challenge events at home and abroad. Virtual events based on Facebook declined.
- Major Gifts were boosted by two private donations totalling £160,000 and Trust income by over £70,000 from two local trusts winding-up and distributing their assets.
- Income from our commercial activity includes our 15 charity shops and Ebay shop, our subsidiary Highland Hospice Trading Ltd operating two cafes and selling a range of new goods and Christmas cards, and our subsidiary Ness Islands Railway Ltd.
- A one-off provision of £490,564 for potential dilapidations on leased retail properties was made.
- Commercial income rose by 18% and discounting the dilapidations provision, underlying profitability was 36% (2023: 33%).
- Income from legacies rose by 99% reflecting the unpredictable nature of this funding. In recognition that we cannot control this income, annual budgets are set with a minimal contribution from legacies to reduce risk.
- To secure legacy income long-term, we are collaborating with over 140 hospices across the UK to run a national legacy-giving campaign for local hospices. This is being coordinated by Hospice UK and is expected to run for three years from February 2025.

Financial Overview

Highland Hospice is a charity. No charge is made to our patients or their families and carers for any of our services. The majority of our income is generated through fundraising and commercial activities and from donations and legacies. We receive an annual grant from NHS Highland, equivalent to 22% of total expenditure in the year. The Hospice values the grant received from NHS Highland, acknowledges the ongoing tight financial constraints within which they are currently operating and is grateful for a further uplift in our grant to reflect salary increases within the NHS.

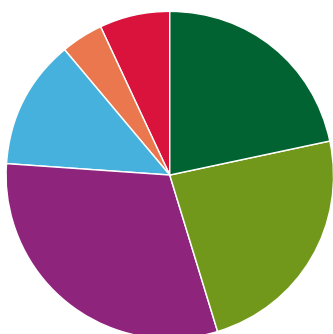
The Hospice recorded a net operating deficit of £324,543 (2023: surplus £47,387) before recording realised and unrealised gains on investments of £794,036 (2023: deficit £538,558) leaving a surplus for the year of £471,740 (2023: deficit £494,493).

The Board and Senior Management maintain a rolling five-year income/ expenditure forecast based on expectations for inflationary increases, service growth and fundraising and commercial income projections. This forecast shows a period of deficits driven by plans for service growth and the effects of inflation. Current surpluses and reserves are required to ensure the continued financial sustainability of the Hospice over the long term.

At 31 March 2024, the total assets of the charity including fixed assets, restricted funds, risk reserve and designated funds amounted to £20,655,681 (2023: £20,183,941). The Fixed Asset Fund represents the book value of fixed assets including buildings and equipment owned by the charity. Fixed assets account for 33% of all the Hospice's assets.

The Board of Highland Hospice recognises the importance of financial security, especially at a time of economic uncertainty. The risk reserves policy is reviewed annually by the trustees. The policy states that the value of the risk reserve should be based on a risk analysis of income, expenditure and balance sheet assets and all capital projects. At 31 March 2024, the total risk reserve was set at £3,764,600.

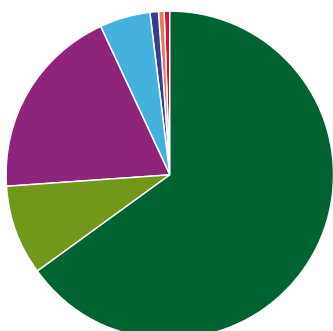
A copy of the reserves policy is available on request. A full set of Audited Accounts for the year ended 31st March 2024, is available at highlandhospice.org/accounts.



Income

£9,630,127

NHS	22%	£2,151,257
Fundraising and Donations	24%	£2,331,664
Commercial Activity	31%	£2,963,580
Legacies	13%	£1,209,064
Investments	4%	£337,751
Other	7%	£636,811



Expenditure

£9,954,670

Hospice Care	65%	£6,491,676
Fundraising and Donations	9%	£905,635
Commercial Activity	19%	£1,904,414
One-off Provision for Retail Dilapidations	5%	£490,564
Governance	1%	£80,753
Investment Management	<1%	£33,580
Other	<1%	£48,048

As the only hospice serving adults across the Highlands, our palliative and end-of-life care services have been a vital source of comfort and support for our patients, their families and our communities since 1987.

Our care increases quality of life by reducing pain and suffering, enabling our patients and their families to make the most of the precious time they have left together. Our rehabilitation and wellbeing team offers an extensive, tailored service to meet the unique and varying needs of those with progressive, life-shortening conditions and our 24/7 Palliative Care Helpline offers one-stop advice, support and information for people nearing the end of life, their families, carers and professionals.

As an independent charity, we rely on our communities both for their fundraising efforts and to help us extend our support outwith the Hospice building in Inverness. Working together, we provide home care in a number of locations, allowing people to live at home for longer; our befriending team tackles the loneliness and isolation which often accompanies deteriorating health and is exacerbated in rural and remote areas; and our social work and bereavement services help children and adults to deal with the complexities of their feelings both during their loved one's illness and following their death.

Our services are offered freely to everyone who needs them but they are also costly to deliver. We're hugely grateful to receive an annual grant from the NHS, but we must still raise more than 75% of our income, mostly through fundraising and commercial activity, to continue delivering our care.

Our ambition at Highland Hospice is to provide everyone living with a life-shortening illness with the best possible care, enabling them to enjoy the life they have left, cherish the things that matter most to them and die with the dignity they deserve.

Please support your Highland Hospice.

To contact Highland Hospice:
please call 01463 243132 or email
generalenquiries@highlandhospice.org.uk

highlandhospice.org

Highland Hospice, Ness House, 1 Bishops Road, Inverness IV3 5SB.
Highland Hospice is a registered Scottish Charity No: SC011227



INVESTOR IN PEOPLE