



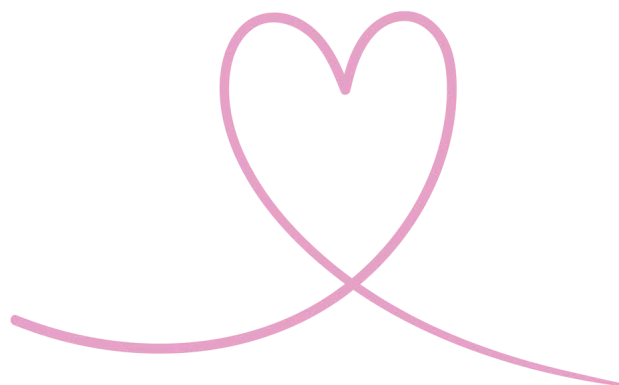
2025-2028

Strategic Plan

Dr Kershaw's Hospice

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Introduction.

Dr Kershaw's Hospice provides free, specialist, end-of-life and palliative care (an area of healthcare that focuses on relieving and preventing the suffering of patients) for adults with life-limiting illnesses in Oldham and its surrounding areas in a peaceful and homely environment. The Hospice opened in 1989 following the conversion and development of a 1930s cottage hospital originally built with a legacy from Dr John Kershaw, a local GP.

The Hospice has a team of dedicated clinical staff including doctors, nurses, health care assistants and mental health practitioners who support patients in the Hospice's Inpatient Unit and Wellbeing Centre, along with supporting patients in the community through the Hospice at Home service and Caring Hands, the Hospice's domiciliary service. The Hospice has a Bereavement Support Service and trained counsellors as well as Complementary Therapies available for patients and carers. The Christie – Chemo Closer to Home service and Oldham's Macmillan 1-1 Support Service Team also provide vital support for the local community from their local base at Dr Kershaw's.

As an independent Hospice and a registered charity (Charity No. 1105924), Dr Kershaw's Hospice receives less than one third of its funding from the Integrated Care System (ICS) with the remaining £5.3 million annual budget coming from

fundraising activities and donations. To ensure the continuity of our services, and to provide care for future patients, the Hospice needs the community's support through fundraising activities, donations, legacies, income from the Hospice shops and revenue from the Hospice Lottery. None of the work the Hospice does would be possible without the support of our wonderful team of over 120 staff members and the generosity of over 420 individuals who support us as volunteers.

The Strategic Plan for 2025-2028 will build upon the work completed in the previous Strategic Plan which ran from 2020-2025. Despite the additional challenges which arose as a result of the pandemic we managed to successfully achieve all of the objectives which were set across the 5-year period. Dr Kershaw's Hospice has undergone a transformation in recent years, with the development of a state-of-the-art Inpatient Unit (IPU). The IPU provides modern en-suite patient facilities combined with beautifully transformed gardens. The strategic plan will again focus upon the five domains of Patient Services, Governance, Finance and Resourcing, Workforce and Collaborative Working to ensure we continue to provide high quality palliative care for the people of Oldham.

Our Mission Statement is

'to add quality to the lives of people with life-limiting illnesses.'



Statement from Chair of the Board.

The Board of Trustees have agreed overarching broad strategic directions for Dr Kershaw's Hospice over the next three years. These were developed over two joint Board/Senior Management workshops led by the Chair and the CEO.

They build upon the excellent progress achieved in the last Strategic Plan. The Board congratulates our staff on their achievements and hard work over the last five years. Our strategic objectives were delivered despite the huge challenges of the Covid-19 pandemic, financial constraints and extensive site development. The Board recognise how difficult this was, thank you to all involved.



Our direction of travel over the time course of our 2025-28 Strategic Plan are:

- Demonstrate our values with our actions. We will strive for quality, excellence, safe and effective services in all areas of the Hospice.
- We will further develop and diversify our high quality clinical and supportive services to serve all parts of our local community, who continue to support us unwaveringly.
- We will ensure financial resilience. Funding continuity will be enhanced via budgetary discipline and devolved and monitored financial controls, including active assets management. Income Development will seek iterative improvement in performance and enrich engagement with all our local community, whilst demonstrating our services and good reputation.
- Be a 'good neighbour' in our community, being open and transparent, when developing our services and estates.
- Our IT, hardware and software systems will be integrated to reduce duplication of staff time and improve our operating effectiveness; increase our organisational security to the best current standards at that time.

Our services, care, values and reputation, remain our greatest assets. Our flexibility to respond to the needs of our local community, will allow us to best serve them.

The Board appreciates the challenges within this Strategic Plan and are assured by the Strategic Objectives developed within this document by our Executive Team.

Dr P Cook
Chair, Board of Trustees

Our Values

Our Core Value:

You are at the heart of everything we do!

Inclusiveness

We recognise, respect and embrace the diversity of our communities and will ensure and promote equality in all that we do.

Openness & Transparency

We promote and encourage an open culture across all our services and departments and encourage you to share your opinions and ideas with us.

Dignity & Respect

We will treat you with respect and uphold your privacy and dignity at all times.

Responsiveness

We will be responsive to your individual and changing needs and preferences and will be proactive in how we manage these within the wider health and social care system.

Compassion

We will treat you with compassion and be sensitive to your personal needs and wishes.

High Quality Care

We are dedicated to providing the highest quality, holistic care that delivers the very best outcomes for you.

Our Mission:

To add quality to the lives of people with life-limiting illnesses.



Clinical Services.

INPATIENT UNIT

WELLBEING CENTRE

- Bereavement Services
- Counselling
- Dementia Hub
- Carers Support
- Men's Group
- Nightbird Project
- Music in Mind

COMMUNITY SERVICES

- Hospice at Home Service
- Caring Hands Domiciliary Service

COMPLEMENTARY THERAPIES

24 -HOUR ADVICE LINE

TRAINING AND EDUCATION

IN-REACH AND STEP-DOWN SERVICE

SERVICES BASED AT DR KERSHAW'S

- Christie's Closer to Home
- Macmillan 1-1 Support Service



Non Clinical Services.

QUALITY

HUMAN RESOURCES

VOLUNTEERING

FINANCE

CATERING

HOUSEKEEPING

FACILITIES

RECEPTION

INCOME DEVELOPMENT
AND MARKETING

RETAIL:

- The Furniture Hub
- Lees
- Royton
- Shaw



The Strategic Plan.

The Strategic Plan has been created by the CEO in conjunction with the Hospice Quality Lead and supported by the Extended Senior Management Team. The strategic directions have been approved by the Board of Trustees.

Each Strategic Objective has been assigned to the relevant Steering Group within the organisation and an appropriate Director, who holds responsibility for ensuring the outlined initiatives are completed.

A Vantage module (the Hospice database system) has been populated with all of the Strategic Objectives including the details outlined below.

- Strategic objective ID number
- Domain
- Strategic objective title
- Initiatives
- Steering group
- Responsible director
- Responsible direct reports
- Year due
- Linked to comprehensive operational action plan

The operational actions will be assigned to relevant staff members across the organisation and Steering Groups, who will be responsible for reviewing progress of their allocated Strategic Objectives each time they meet.

The operational actions set for each objective outline a clear path to achieve the objective, while also allowing flexibility for teams to assign further actions as progress is reviewed. A number of operational actions have been assigned a due date of March 2028, with the intention that they will be worked on across the 3-year period.



Finance and Resourcing.

Implement a robust retail strategy (SO1)		
Responsible Steering Group: Financial Resourcing Steering Group Responsible Director: Director of Income Development and Marketing		
Initiatives <ul style="list-style-type: none"> Enhance online sales Develop and monitor KPIs Develop Gift Aid processes and grow Gift Aid income Expand supporting structures and processes for donations, stock control and stock management 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> Introduce eBay and Vinted Review other potential online platforms Introduce and review additional KPI's for each shop including The Furniture Hub Enhance Gift Aid processes via digital platform Benchmark gift aid against other Hospices Develop and implement Gift Aid training Implement new structures and processes for stock control and stock management 	<ul style="list-style-type: none"> Implement new structures and processes for donations/wider Income Development sales 	<ul style="list-style-type: none"> Grow Gift Aid income within each retail outlet

Finance and Resourcing.

Achieve long term financial sustainability (SO3)		
Responsible Steering Group: Financial Resourcing Steering Group Responsible Director: Director of Finance		
Initiatives <ul style="list-style-type: none"> • Produce a thorough and relevant Scheme of Delegation • Achieve devolved budgets in each department • Collaborate with commissioners regarding funding streams, secure finances and address financial challenges • Develop relationships with community supporters and increase income generation (Link to SO5) 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Sustain existing income streams • Produce a thorough Scheme of Delegation, suitable for operational purposes • Improve the report outputs on Sage to Budget Holders • Finalise accurate authorised signatories details 	<ul style="list-style-type: none"> • Communicate the Scheme of Delegation with wider staff team and incorporate into relevant Vantage Modules 	<ul style="list-style-type: none"> • Explore new opportunities for income streams

Finance and Resourcing.

Improve Income Development streams (SO5)		
Responsible Steering Group: Financial Resourcing Steering Group		
Responsible Director: Director of Income Development and Marketing		
Initiatives <ul style="list-style-type: none"> • Enhance digital presence and engagement • Identify core capital projects • Expand and diversify events • Boost corporate partnerships and support • Develop TFG strategy • Enhance major giving • Raise profile of legacies and implement a strategy • Introduce regular giving as a new income stream 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Revise and promote the 1989 club • Launch of new Hospice website • Enhance digital communications and implement email campaigns • Introduce participant feedback at events • Develop a TFG pipeline for grant support, working in collaboration with the Exec Team • Raise profile of legacies both internally and externally • Increase the promotion and celebration of legacies • Introduce regular giving as a new income stream through a DD offering 	<ul style="list-style-type: none"> • Establish relationships and engage with community leaders of diverse groups • Develop a suite of professionally made videos depicting Hospice life 	<ul style="list-style-type: none"> • Identify annual Capital opportunities • Diversify event portfolio and review annually • Expand audience engagement through direct mail and digital communications • Increase major donor support through identified pipeline

Governance.

Progress Hospice quality governance (SO2)		
Responsible Steering Group: Safety, Quality, Workforce, Innovation & Development Steering Group Responsible Director: CEO		
Initiatives <ul style="list-style-type: none"> • Acquire outstanding CQC status • Develop quality improvement strategy • Develop overarching quality framework • Seek accreditation for training opportunities • Develop overarching HR strategy (including workforce planning, health & wellbeing, organisational development) 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Populate CQC module with up to date evidence • Acquire Outstanding in a CQC mock inspection • Review Hospice CQC reports • Review other Hospice's Quality Improvement Strategies • Collate relevant HR activities into one overarching strategy 	<ul style="list-style-type: none"> • Write Quality Improvement Strategy • Communicate the Quality Improvement Strategy with staff • Collate Existing Quality processes and areas of improvement into a Quality Framework • Identify training courses which can be accredited 	<ul style="list-style-type: none"> • Implement plan to gain accreditation for identified courses

Governance.

Demonstrate a commitment to environmental sustainability (SO6)		
Responsible Steering Group: Safety, Quality, Workforce, Innovation & Development Steering Group Responsible Director: CEO		
Initiatives <ul style="list-style-type: none"> • Develop a focused health promotion / prevention strategy • Provide training to increase staff awareness • Produce a green plan strategy • Work towards a paperless organisation • Implement waste reduction and waste strategy 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Review other health promotion/disease prevention strategies • Develop a waste reduction strategy • Produce a strategy that outlines cost effective catering offers, stock management and reduction of food waste • Complete environmental sustainability plan 	<ul style="list-style-type: none"> • Identify opportunities to move towards becoming a paperless organisation 	<ul style="list-style-type: none"> • Develop a health promotion/disease prevention strategy • Design and deliver training to increase staff awareness • Produce a green plan strategy

Workforce.

Maintain Hospice buildings and associated land to a safe and high standard (SO10)		
Responsible Steering Group: Safety, Quality, Workforce, Innovation & Development Steering Group Responsible Director: CEO		
Initiatives <ul style="list-style-type: none"> • Develop health and safety framework • Address issues that affect the Hospice infrastructure (car parking, woodlands, life for life, boundary wall) • Complete landscaping project 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Ensure the Hospice adheres to National Standards of healthcare cleanliness (2025 framework) 	<ul style="list-style-type: none"> • Ensure each phase of landscaping is completed on time and to a high standard, utilising the new outdoor environment to enhance our wellbeing and bereavement services • Develop and implement a health and safety strategy • Explore additional space for car parking 	<ul style="list-style-type: none"> • Execute any works identified via physical condition survey

Workforce.

Develop optimal IT use at Hospice (SO7)		
Responsible Steering Group: Information Governance Steering Group		
Responsible Director: Medical Director		
Initiatives <ul style="list-style-type: none"> • Move from an on premises storage solution for data to cloud based storage • Drkh.org.uk emails accredited to the same standard as NHS emails • Embed and utilise SharePoint throughout organisation • Automate processes on Donorflex 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Implement a solution for staff to log community care • Audit cloud-based system in teams to ensure MFA is set up where possible • Improve IG processes utilising Vantage • Implement Foresight Platform for staff to communicate issues • Connect Network Switches to UPS for improved resilience • Look at alternative providers for HSCN line • Draft and present business case to IGSG • Optimise Donorflex-Sage integration 	<ul style="list-style-type: none"> • Accredite drkh.org.uk to the secure email standard (DCB1596) • Complete a cost/benefit analysis of IT infrastructure in retail and look to improve where possible 	<ul style="list-style-type: none"> • Explore software that can integrate into Donorflex to improve efficiency in the ID/Marketing/Finance teams • Begin to move to a cloud-based data storage solution • Improve wireless network coverage to meet latest standards

Collaborative Working.

Strengthen the Hospice's integration with diverse communities (SO4)		
Responsible Steering Group: Clinical Governance Steering Group Responsible Director: Director of Clinical Services		
Initiatives <ul style="list-style-type: none"> • Develop strong links with local communities • Progress Diversity and Inclusion role and its outcomes at the Hospice • Collaboration with Community and Partnerships Team to strengthen our community involvement 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Identify ways in which we can become more accessible through our marketing and communications 	<ul style="list-style-type: none"> • Identify community groups and individuals in the community who we can collaborate with 	<ul style="list-style-type: none"> • Raise awareness of Hospice services within identified community groups • Diversify our Community and Partnerships offer to engage with communities we don't currently reach

Active participant within Greater Manchester Hospices Provider Collaborative (SO8)		
Responsible Steering Group: Safety, Quality, Workforce, Innovation & Development Steering Group Responsible Director: CEO		
Initiatives <ul style="list-style-type: none"> • Maintain position with Hospice UK and locally/regionally • Continue lobbying on Hospice behalf – funding and sustainability • Focus on data collection and link with intelligence hub • Produce risk assessment with GM Hospices re assisted dying • Provide consistent approach re social value using GMCA framework 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Link with GM intelligence hub and provide relevant data 	<ul style="list-style-type: none"> • Be actively involved in the production of relevant assisted dying risk assessment • Utilise GM Hospices provider collaborative meeting to promotes our social values within the local community 	<ul style="list-style-type: none"> • Maintain position within Hospice UK; locally and regionally • To attend all relevant lobbying events/ opportunities and promote Hospice

Patient Services.

Develop Clinical Services (SO9)		
Responsible Steering Group: Clinical Governance Steering Group		
Responsible Directors: Medical Director & Director of Clinical Services		
Initiatives <ul style="list-style-type: none"> • Sustain existing services to a high standard • Explore 7 day working by Medical Team • Expansion of Community Services (night sitting) • Implement Advance Care Planning • Explore non-medical prescribing • Feasibility of hospice care in your care home • Review of Wellbeing Services and secure relevant funding • Increase awareness regarding assisted dying 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Explore the feasibility of a Care in your Care Home offer • Survey staff regarding awareness of the Assisted Dying Bill (pre and post training) • Deliver training on Assisted Dying Bill to staff team 	<ul style="list-style-type: none"> • Review Wellbeing Services identifying areas of development re other life-limiting conditions • Secure funding for various Wellbeing Service groups • Explore the provision of a 7-day Medical Team rota • Explore potential to launch a night sitting service • Implement Advance Care Planning in the Wellbeing Centre/other Clinical areas • Establish a governance structure to support non-medical prescribing 	<ul style="list-style-type: none"> • Implement plan to expand Wellbeing Centre Services

Patient Services.

Develop and maintain Patient Safety Incident Response Framework (SO11)		
Responsible Steering Group: Clinical Governance Steering Group Responsible Director: Director of Clinical Services		
Initiatives <ul style="list-style-type: none"> • Develop staff awareness regarding this framework • Introduce relevant systems to report and document • Implement policy 		
Operational Actions		
2025-2026	2026-2027	2027-2028
<ul style="list-style-type: none"> • Review current PSIRF processes at other Hospices 	<ul style="list-style-type: none"> • Develop LFPSE module to support reporting • Develop a Patient Safety Incident Response policy • Develop a Patient Safety Incident Response plan 	<ul style="list-style-type: none"> • Communicate PSIRF responsibilities and process to staff



"The staff from the reception desk to the clinical staff were amazing, they were all so thoughtful, caring and nothing was ever too much trouble."

A Patient's Family

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