

**Hospice at Home**  
Carlisle and North Lakeland  
Local Care for Local People



# Strategic Plan

## 2025-2030

### Executive Summary





200 volunteers  
across the charity



Charity Shops /  
Community Hubs

# 45

Business Partners from  
around the county

## Outreach

Bereavement  
Together, Penrith

Patient Support  
Group, Dalston

Lymphoedema Clinic,  
Wigton and Penrith

# 12,300

hours of face to  
face care

# 1,500

square miles  
covered



855  
total  
referrals



790  
nights of  
care



550  
hours of  
Complementary  
Therapy



413  
hours of  
Occupational  
Therapy



140  
hours of  
Befriending  
Therapy



650  
hours of  
Bereavement and  
Family Support



funded by the  
community

# **Introduction:**

Hospice at Home Carlisle and North Lakeland exists to provide outstanding palliative and end-of-life care to adults in our community. We are committed to providing individualised care for our patients and support for their loved ones, families and carers. Our mission statement and values are underpinned by this philosophy.

This Strategic Plan provides a roadmap for the direction Hospice at Home Carlisle and North Lakeland will take over the next five years. This Strategy is underpinned by financial, workforce, retail and income-generation business plans as well as the Volunteer Strategy. It is a dynamic document that will be continually monitored and adapted in response to changing need.

The strategy has been developed with contributions from our staff, volunteers, members and directors and included a review and refresh of our Vision, Mission and Values. A comprehensive analysis of the current national and local environmental and economic context and horizon scanning to determine future trends in patient care needs was undertaken (see appendix one). We also commissioned a survey of staff and patient perceptions of our organisation (Healthwatch Cumbria Survey, 2024).

# **Who we are:**

Hospice at Home Carlisle and North Lakeland is a Company Limited by Guarantee registered under the Companies Act (2006). We are registered with the Charity Commission under the (Charities Act, 2011). We are regulated by the Fundraising Regulator and the Care Quality Commission (CQC). Our last CQC inspection in May 2018 resulted in a GOOD rating across all five key areas: Safe, Effective, Responsive, Caring and Well-Led.

Care is provided free at the point of delivery, funding for which is from a range of sources: business partners, legacies; donations; fundraising events NHS and retail outlets.

The Articles of Association (revised 2024), our Governing Document, invests the Board of Directors (Trustees), who are volunteers, with powers to lead the organisation. Directors' main concerns are with direction, policy, risk and strategy. Responsibility for management of the organisation is delegated to the Chief Executive Officer who is a member of the Board and is closely involved with strategic planning and liaison with key external stakeholders.

# **Our Purpose**

*Hospice at Home Carlisle and North Lakeland exists to relieve the suffering of and provide palliative and supportive care to persons who are suffering from a terminal illness or from any other physical or mental infirmity, disability or disease (Patients) by the establishment and provision of domiciliary and supportive care, day care, residential care and in such other ways as the trustees shall from time to time think fit (Articles of Association, 2024).*

## Our Values:

<b>Care</b>	We provide high quality, holistic care and will always put the patient first.
<b>Compassion</b>	We demonstrate kindness, compassion and consideration for others.
<b>Dignity</b>	We maintain the privacy and dignity of patients at all times.
<b>Respect</b>	We are courteous and polite to all people and listen actively to what they tell us.

## Our Vision:

A future in which all in our community living with life-limiting illness receives outstanding palliative and end-of-life care and their families are supported.

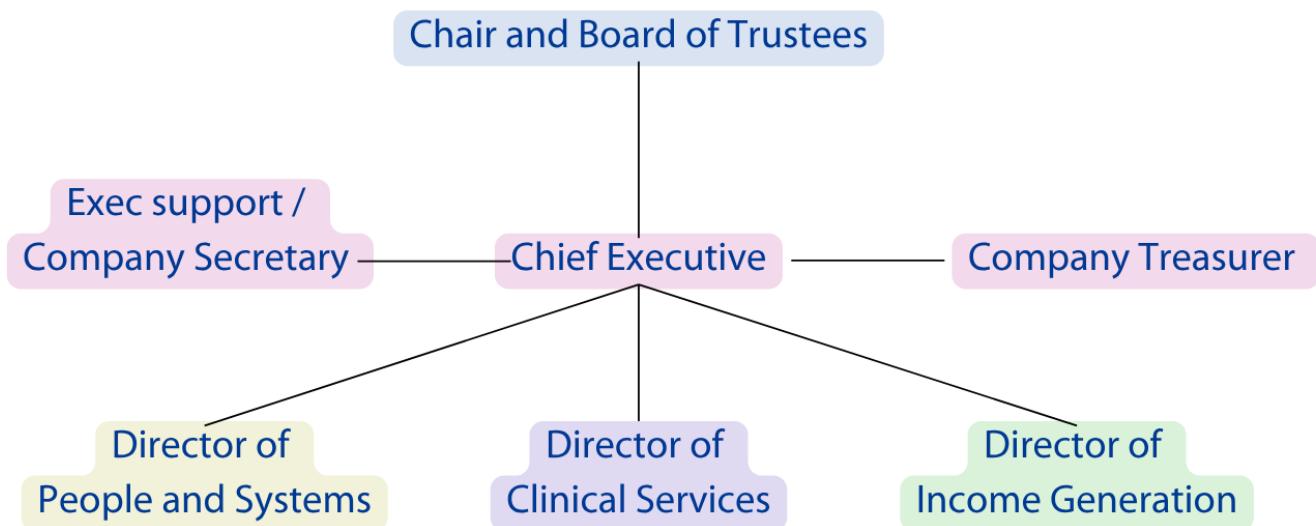
## Our Mission:

To provide outstanding palliative and end-of-life care for people in our community.

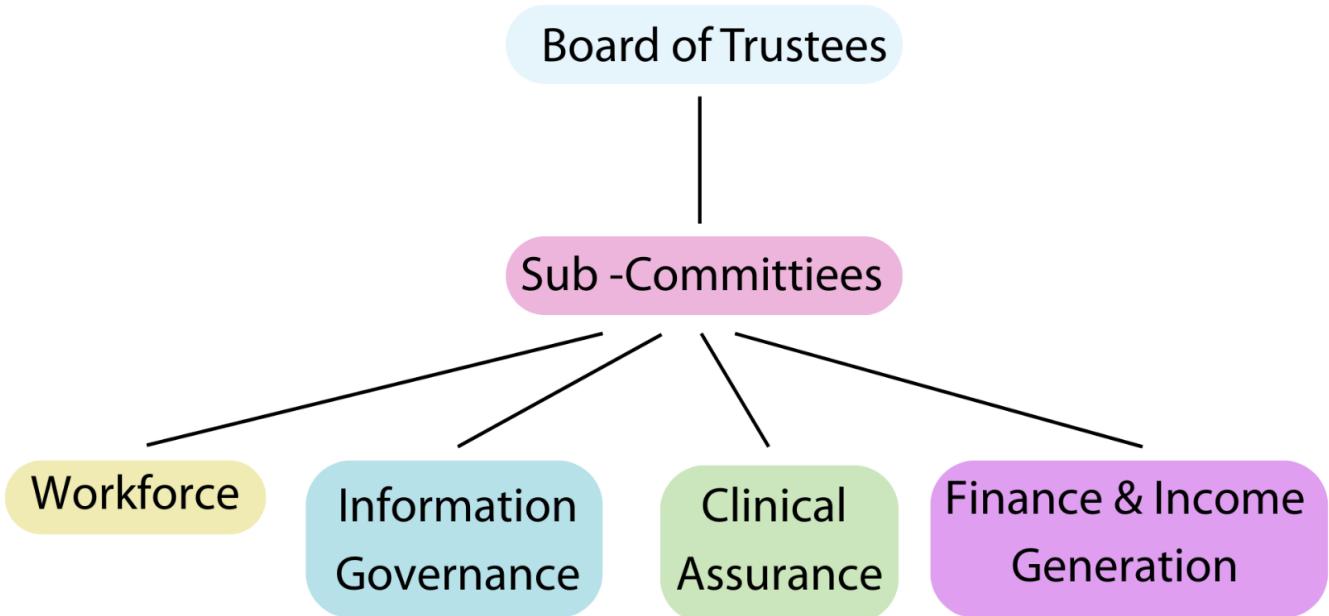
## Our Aspirations:

To be ambitious, innovative, inclusive, community – focused.

## How we are governed:



# Committee Structure



**To illustrate our organisation, we use the metaphor of the tree:**



## **The roots:**

Hospice at Home is rooted in our local community; this is the where we are visible and where many of our volunteers are located and it is their valuable work, together with the support of our business partners, the generosity of the public and all those who donate funds, goods and services that helps to sustain a healthy root system on which the charity can grow and thrive. Without solid roots the tree would wither and die. For all the good work that goes on in our community for the Hospice's benefit we are extremely grateful.

## **The trunk:**

This is the centre of the tree where all the “back of house” work happens to keep our charity working efficiently and effectively and ensures that we are safe, compliant with legal and regulatory bodies and communication channels flow well. The trunk is the core of the organisation supporting the roots and branches.

## **The branches and leaves:**

These are the parts of the tree that provide the services people rely on when they are in need; they reach out to provide outstanding care to those who are living with life-limiting illness or are at the end of their life. This is the reason Hospice at Home exists.

## **The need for a new strategic plan:**

We have to deal with the here and now, but to provide the best possible service to our patients and their carers we must build on the commitments and priorities we identified in the strategic plan 2021-24. The actions we take now and the plans we have for the next five years will impact our sustainable future.

We know that there are going to be increasing calls on the services we provide, both because of a growing elderly population with increasing levels of need and because of moves to ensure that more people can be cared for in or near their homes when unwell or approaching the end of life. We cover a large and often thinly populated area, so we need to ensure that the resources we do have are wisely used to meet the needs of our wider community.

We know from what people freely say that the care we provide is deeply appreciated, accompanied sometimes by a heartfelt wish that we had been able to come sooner. We are also conscious that there are instances where people simply do not know about us and so miss out on what we can offer.

We will continue to develop Hospice at Home, growing our community networks of volunteers and corporate partners engaged in raising the necessary funds to develop our work and to ensure that our presence is recognised within the wider community. We will continue to ensure that our office work is done well and efficiently, using technology to assist without losing the human touch when people are seeking help. We will continue to grow our nursing and healthcare teams, with the use of technology where appropriate, for the benefit of patients and their families, remembering always that the human voice and touch are usually the best communicators in time of need.

# Our Strategy for 2025-2030

## **Our major strategic imperatives are:**

- To ensure financial and workforce sustainability to enable the provision of outstanding clinical care to our patients and support for their families.
- To grow the business thereby ensuring sufficient funds to meet the challenges of the future.
- To collaborate with others to make best use of resources, support efficiencies and share expertise where appropriate.

## **To enable these, we have identified three key commitments**

- Outstanding Clinical Care
- Prudent Financial Management
- Robust Assurance

## **Key priorities for outstanding clinical care**

- Influence the allocation of resources from commissioners and other key stakeholders to further develop and enhance patient care.
- Ensure our charity is known and valued in the community to enable access to our services.
- Continually assess patient satisfaction and care outcomes to drive improvements (Healthwatch, 2024).
- Embrace innovation to develop services for individuals living with frailty and/or dementia.
- Ensure adequate healthcare staff to meet the increasing demand for care.
- Utilise local and regional data to shape services and support the case for funding.
- Provide care in accordance with the Ambitions for End of Life Care Strategy (NHS, 2021).
- Increase collaboration with partners in the Health and Social Care system and build on the positive relationship with other hospices.
- Invest in Information Technology across all systems to develop services and promote efficiency.

### **Impact:**

- Increased confidence and competence in our staff to innovate new ways of working.
- More efficient and effective use of technology.
- More efficient use of time and resources.

- Pooled resources and expertise due to closer collaboration with other to ensure patients where their condition enables can fulfil their choice to be at home.

## **Key priorities for prudent financial management:**

- Generate more revenue through diverse sources.
- Further strengthen financial systems and processes.
- Identify potential shortfalls and mitigations in our finances/ business.
- Generate more revenue through diverse sources.
- Increase the volunteer base to generate income more from fundraising and support cost efficiencies.
- Develop a robust retail plan and monitor quarterly.
- Produce and maintain a robust finance plan to ensure long-term viability.
- Produce and maintain a robust income-generation plan.

### **Impact:**

Managing our finances and business ventures well will underpin financial concerns to ensure the long-term sustainability of the charity.

# **Key priorities for robust assurance:**

## **We will:**

- Develop a culture of continuous improvement within systems and processes.
- Embrace equity and diversity for our patients, families, staff and volunteers.
- Invest in Information Technology across all systems to develop services and promote efficiency.
- Regularly audit policies to ensure adherence.
- Define Key Performance Indicators for patient care, financial health, staff satisfaction, community engagement and income-generation.
- Foster a culture of continuous improvement for all staff through education and training.
- Ensure regular monitoring and review of the Strategic Plan and related business plans.
- Upgrade the digital infrastructure to improve efficiency and ensure data security.
- Develop a comprehensive Workforce Plan that includes competency mapping.
- Implement an improved communication plan.
- Identify and manage risks and incidents effectively.
- Further develop the comprehensive Workforce Plan.
- Refine and implement an equity, diversity and inclusion policy.
- Develop Key Performance Indicators across services.
- Provide appropriate education and development for all staff.
- Ensure compliance with the law and regulatory and statutory requirements.

## **Impact:**

Hospice at Home Carlisle and North Lakeland will be safe, efficient, legally accountable, inclusive and sustainable.

All at Hospice at Home Carlisle and North Lakeland: our staff, patrons, trustees and volunteers are committed to providing the best possible palliative and end-of-life service to our patients and support for their families/carers. We are working with others in to support palliative care and develop choice in end-of-life care. We will continue to invest in our workforce to ensure that all have the knowledge, skills and competencies to deliver high quality palliative and end-of-life care.

# **Measuring success:**

Implementing this 5-year Strategic Plan will enable us to succeed as a viable, thriving organisation that continues to grow, innovate, develop and be the best we can be in providing palliative and end-of-life care to all who require it in our community.