

Quality Account 2025/26



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INTRODUCTION TO THE ACCOUNT

EXECUTIVE OFFICE STATEMENT

The past year has been one of resilience, focus and strategic determination for Willowbrook Hospice.

Across 2025-2026 we have continued to deliver high-quality, compassionate palliative and end-of-life care through both our Inpatient Unit and Outreach Services, despite sustained pressure across the wider health and care system. Ongoing uncertainty in NHS funding structures, and continued reliance on fundraising and trading income have required careful stewardship and disciplined governance.

Throughout this period, our central priority has remained unchanged: ensuring that people in St Helens and Knowsley receive safe, effective and dignified care when they need us most.

Securing and Strengthening Support for Families

One of our most significant achievements this year has been securing funding from Oliver Lymes Charity to expand our Bereavement and Family Support Service. This investment enables us to extend our reach both within the hospice and across the community, ensuring earlier intervention, improved psychological support, and more equitable access for families navigating grief.

This expansion reflects our commitment to holistic care – recognising that quality in hospice care extends beyond symptom management to emotional, social and spiritual wellbeing.

Embedding a Culture of Safety: PSIRF

This year has also seen the implementation of a new hospice role, the Patient Safety and Quality Lead. This role has supported the full embedding of the Patient Safety Incident Response Framework (PSIRF). Transitioning from the former Serious Incident Framework has allowed us to strengthen our learning culture, improve transparency, and focus on system-wide improvement rather than individual blame.

PSIRF aligns with the National Patient Safety Strategy set by NHS England and reflects our ongoing commitment to high standards as regulated by the Care Quality Commission.

We have strengthened:

- Daily safety huddles
- Risk surveillance
- Medicines governance
- Board-level assurance reporting

This approach ensures we continue to deliver care that is safe, responsive and continuously improving.

Sustaining High-Quality Care in Challenging Times

Despite significant financial and system pressures, we have maintained high standards of clinical care in both our Inpatient Unit and Outreach Services. Patient feedback, audit outcomes and quality metrics demonstrate sustained performance across:

- Symptom management
- Patient dignity and respect
- Emotional and spiritual support
- Community partnership working

At a time when many parts of the healthcare system are under strain, the hospice sector remains heavily dependent on charitable income. In 2025-2026, the majority of our funding continued to be generated

through fundraising and trading activity, reflecting both the generosity of our community and the financial vulnerability inherent within independent hospice provision.

A Year of Vigilance and Strategic Focus

What has weighed most heavily this year is the responsibility of ensuring continued access to hospice services for the people of St Helens and Knowsley amid wider financial uncertainty.

We have maintained close oversight of financial sustainability, workforce resilience and system engagement to safeguard provision locally. Through active engagement with system partners, we have continued to advocate for equitable funding and recognition of the hospice's role within the wider health economy.

Proud of Our People

Above all we are most proud of the resilience, professionalism and compassion shown by our staff and volunteers.

In a year marked by operational pressure and sector uncertainty, our teams have continued to demonstrate extraordinary commitment to patients and families. Their ability to adapt, innovate and support one another reflects a deeply embedded compassionate culture.

Quality is not only measured in metrics and audits – it is experienced in the daily acts of care delivered with dignity and kindness.

As we move into the next year, our focus remains clear:

- To protect and strengthen clinical quality
- To embed learning and safety systems
- To expand family and bereavement support
- To advocate for sustainable hospice funding
- To ensure every person who needs us can access outstanding, person-centred care

Willowbrook Hospice remains committed to delivering safe, effective and compassionate care for our community – today and into the future.

Willowbrook Hospice Executive Team *(from left to right)*

Dr Kate Campbell
Executive Medical Director

Simon O'Leary
*Executive Director Of
Corporate Services*

Lynda Finney
Executive Clinical Director



Patient Quotes...

Here are some stories from our patients....

"I couldn't ask for more, they have given me confidence, hope and a reason to go on living. It saved my life, I was low, not going out, lonely, not eating. Willowbrook has given me friendship, and hope for the future, always there to help lift me up. I don't know what I'll do when the course finishes; they all need medals. Thank you!"

– Outreach patient

"Just wanted to say thank you all for looking after my husband. Although we knew his time with us was limited, he was very grateful for the care given."

– Inpatient

"Thank you so much for the care and support you gave to my wife during her stay. You are all amazing and will have a place in our hearts forever."

– Inpatient

"I think the team does an excellent job. The talks they give are informative and interesting, it's good how it connects people who aren't well, people have different illnesses but understand each other's difficulties. All the team are kind, listen, and give great advice."

– Outreach patient

A YEAR IN REVIEW

IMPROVEMENTS IN 2025-2026

During 2025–2026, we have focused on strengthening patient experience through improved access, coordination, and personalised care.

A key priority has been increasing Outreach referrals and expanding networking opportunities with relevant services, including Frailty and Chronic Obstructive Pulmonary Disease (COPD) teams. This work is intended to support individuals with life-limiting conditions and ensure smoother transitions of care, while also identifying future service gaps. We have also promoted awareness of the Outreach Referral Service (ORS) through hospice open days as part of the National Hospice and Palliative Care Month. This event was a success, with more planned through 2026 and beyond.

To enhance the experience of patients and carers, we have increased face-to-face nursing interventions and continue with the use of Measure Yourself Concerns and Wellbeing (MYCAW) within assessment and care planning. This has enabled a more personalised approach to care and highlighted areas where additional support is needed. In response to this feedback, we are strengthening links with local services to better support mobility and rehabilitation needs which is an identified gap within ORS – we are also developing our own staff with training opportunities.

We are also committed to expanding our patient and family support services. We plan to grow our Bereavement Service so that it can reach more people both within the hospice and across the wider community.

Quality Effectiveness

Over the past year, we have worked to embed our new organisational values – Integrity, Dignity, Respect, Kindness, Compassion and Care – alongside a compassionate culture model. This has included delivering organisation-wide workshops to share the values, encourage open dialogue, and gather feedback. These principles are now being integrated into key people and culture processes such as recruitment, appraisal, and staff recognition.

We have also introduced a new learning platform, Bluestream, to strengthen compliance with mandatory training and Care Quality Commission (CQC) requirements. This platform supports the development of “learning passports” for staff, ensuring essential skills and knowledge are maintained and developed. It also provides a central system for managing internal and external training and for communicating policy updates.

In addition, we are continuing to develop our external training offer to domiciliary care providers and nursing homes across St Helens and Knowsley.

Clinical Effectiveness

Sustainability and efficient use of resources remain central to our clinical strategy.

We are exploring innovative approaches such as rewilding and maximising the contribution of volunteers, and making best use of staff resources and external funding opportunities.

Patient safety continues to be a priority. Building on our 2024-2025 Quality Improvement agenda, we are promoting a strong culture of safety and risk management. This has included the introduction of a new hospice role, Patient Safety and Quality Lead. This role will focus on quality improvement and lead on the support and implementation of patient safety improvement.

We are also investing in workforce development to ensure a highly skilled clinical team. Practice Development Facilitators are undertaking a comprehensive training needs analysis with nursing staff, using Benner’s model to guide development and progression of clinical skills.

Communication Effectiveness

We are continuing to strengthen communication and digital infrastructure across the organisation. This includes promoting the use of Microsoft 365 tools such as OneDrive, SharePoint, and other applications to improve collaboration and information sharing.

A new maintenance and incident management system (Vantage) has been implemented to enhance feedback and responsiveness. We are also developing systems to better track training and organisational activity.

To improve engagement with patients and visitors, we have introduced digital signage within the hospice and installed terminals to support feedback and donations.



PRACTICE DEVELOPMENT FACILITATORS

In 2025, our Practice Development Team delivered an Introduction to Palliative Care programme at Parr Care Home. This was facilitated by Lauren Lloyd and Catherine Owens and covered key areas including end-of-life care, holistic care, nutrition, and mouth care.

The training was requested by the Home Manager, Kelvin Bessant-Smith, in preparation for a review of their Gold Standards Framework (GSF).

Feedback from the service was highly positive. The Home Manager reported that the training had been a valuable and empowering experience for staff across all roles, highlighting both the quality of delivery and the accessibility of the content. The inclusive approach, ensuring attendance from staff at all levels, supported a consistent understanding of palliative care principles across the organisation.

Following evaluation of the pilot delivered at Parr Care Home, the Practice Development Team has strengthened training to better support safe clinical practice. Enhancements to both the Introduction to Palliative Care and Syringe Driver Training programmes have resulted in CPD accreditation, ensuring internal and external staff are equipped with up-to-date, evidence-based knowledge.

They have gone on to secure a grant from the Pilkington Charity Fund which has enabled us to offer this valuable CPD-accredited training at significantly subsidised rates to the local community, improving accessibility.

Early feedback has been very positive, with some external providers indicating their intention to embed this training as mandatory within their services. This reflects our responsiveness to local needs and demand, as well as our role in supporting the local community.

Internally, the Practice Development Team has taken a strategic approach to workforce development through creating a comprehensive training calendar delivered by our clinical team. This includes Basic Life Support, Moving and Handling, Oxygen Therapy, Verification of Death, Dementia Care, Mayfly Advance Care Planning, Opening the Spiritual Gate, and Syringe Driver Training.

Through 2025, the team has developed a structured clinical induction programme for nurses and healthcare assistants, supporting safe onboarding and consistent standards of care. External collaboration with Chester University continues to support the development of student nurses, ensuring alignment with current educational standards and best practice.

Over 2026, the Practice Development Team is continuing to develop relationships with local care providers to further expand the range of external courses available. This will include highly sought after training such as Oliver McGowan Part 2 training, Advance Care Planning and Opening the Spiritual Gate, ensuring continued professional development opportunities that respond to growing demand.



EXPANSION OF FAMILY SUPPORT TEAM

Over the past year, we have secured funding from the Oliver Lymes charity. This has enabled the hospice to strengthen and expand our Patient and Family Support Team to continue to meet the growing and increasingly complex needs of patients and those important to them. This development reflects our commitment to delivering holistic, person-centred care that extends beyond the individual patient to include emotional, psychological, and bereavement support for families.

The enhanced service has ensured continued engagement with families, improved continuity of support throughout the patient journey, and extended bereavement provision following death. The team continues to offer a broad range of interventions both pre and post bereavement. This includes helping patients to plan for their future care, legacy work, one to one and group bereavement support, ensuring that families feel supported, informed, and prepared during challenging times.

This expansion has also improved multidisciplinary working, with the Patient and Family Support Team playing a key role within the wider clinical team, contributing to care planning and supporting complex situations. Feedback from patients and families highlights the significant positive impact of timely, compassionate support on their overall experience of care.

We will continue to develop this service to ensure equitable access, responsive support, and high-quality care for all families, recognising the vital role they play in the wellbeing of our patients.

A selection of responses from users of the service (anonymised for confidentiality)

What was most helpful about the support you received?

Responses from those receiving one to one support:

- *The support was unimaginable. I felt in a very lonely place and with the amazing support of xxxx and xxxx I learned ways to manage and understand my grief journey. Nothing was too much trouble; no question was too daft to ask. I really don't think I could have got through that time without the support from the hospice. A million thank yous will never be enough.*
- *I was at my lowest ebb when I received the call from Willowbrook Bereavement Team. The initial conversation enabled me to talk about my feelings. I didn't feel so alone in the world! This person really understood and gave me hope I would feel better again. The bereavement group provided me with an opportunity to connect with people in the same situation, and I was given information about grief and its impact, that I still read to this day. I also learnt to laugh again. I credit xxxx personally, and the Willowbrook Bereavement Team with literally saving my life! I have now reconnected with life again and, if I need it, continuing support is available to me through the New Horizons Monthly Support Group, another crucial service. The Bereavement Support Group is superb and needs to be replicated across the NHS as it is rare to find such a fantastic service in the Community.*
- *xxxx was compassionate and gave me the opportunity to lead our discussions in a way that was needed for me in the moment. She listened and always asked about / referred back to things we'd mentioned previously. I felt heard. She validated and confirmed things for me in a non-judgemental way. I felt lighter every week after talking to her.*

Responses from those receiving six-week group support:

- *Support from members of the group in understanding emotions. Talking through grief and understanding it. Feedback from staff*
- *Listening and being with others who are going through the same experience.*
- *Being in the group with others who are going through the same thing*
- *Given opportunity to meet other people in the same situation.*

- *That there was someone who listened and then when I became part of the bereavement group I was with people who were experiencing the same thing that I was going through.*
- *Being with people in the same situation and them understanding the pain you are going through. People we all would not have met if we were not in our bereavement group. People of all different personalities and we are all good friends now.*
- *Being able to have a space to talk about how I am feeling without any judgement and to help me to learn and use the tools to manage my own grief.*
- *The knowledge and understanding shown by the support staff to navigate a hard time.*
- *Being given the opportunity to speak with others about my experiences. Facilitated with empathy and compassion which allowed us to connect quickly with others in similar situation*
- *Having someone understand your grief and feelings and the opportunity to talk openly and honestly with others in your situation.*
- *I had a few one to one sessions and six-week group – both were amazing. The support was compassionate and understanding. Group gave me coping mechanisms and guidance. The handouts and the diary were extremely useful.*
- *Talking and listening to other people in the same situation as yourself.*

Any further comments: (anonymised for confidentiality)

- *Willowbrook Bereavement Service is a crucial service needed in the community and should be fully supported. Its impact has meant people are able to find joy and live life again. It eradicates loneliness as people share experiences and become friends. I have seen personally, the positive changes in people who are offered this service.*
- *I can't thank you enough for the care given to my mum firstly. Our family was supported not only during mum's care but also following her death and that of my dad too, so soon after. It has felt comforting to sit and talk about them both, not just Mum in surroundings that feel familiar and safe. Xxxx has been gentle, understanding and compassionate. Talking to her has come easily despite some weeks thinking I had nothing to share.*
- *The group was wonderful. It gives you the chance to hear other people's troubles. You realise you're not alone.*
- *Took up the offer of support at the right time. Appreciated the time and support of the team.*
- *This group has done so much to help me, I honestly can't imagine what would have happened without the support I have received, it has been a lifeline.*
- *Just like to say a big thank you to Helen and the team and Willowbrook of course. Being in the bereavement group has made a whole lot of difference in my life and I know everyone feels the same. When I have had the pleasure of meeting other members of other groups coming through, I have always told them to stick with it. It is so beneficial. When my wife was in Willowbrook, she was looked after so well and I must say I was too. I can't thank everyone enough. Thank You.*
- *Please give xxxx some recognition as he absolutely deserves it, his approach to the sessions is brilliant. I thought I would attend one session and decide it wasn't for me, but he has truly, truly helped me.*
- *The support offered is invaluable- I didn't know what I needed but knew I needed help - Willowbrook were able to provide the support to help me take steps forward with my grief*
- *It made me feel listened to and to know that other people were going through the same.*
- *Having the opportunity and space to speak to someone about my feelings and thoughts was really helpful in allowing myself time to think and reflect on losing my Dad. Also, being able to say things out loud and be reassured that what I was feeling was normal was very supportive.*

EXAMPLES OF NEW AND ONGOING, PARTNERSHIP WORKING

YMCA Together Training

EOLC Education for Organisations Supporting Homelessness now within its fourth year of collaboration/success.

End of Life Care education as a collaborative approach continues with the YMCA and other homelessness sectors, Willowbrook Hospice ORS, Knowsley Advance Care Plan (ACP) Facilitators and the Community Specialist Palliative Care Team. This continues to be effective and has been recognised by Knowsley commissioners as an example of good practice and has received previous recognition at Hospice UK conference.

Overview

This report summarises participant feedback from the End-of-Life Care (EOLC) education sessions delivered through 2025/2026. Evaluations were gathered across multiple YMCA staff members who attended the training.

Key themes identified

- Improved recognition of early and late end of life stages.
- Greater understanding of Advance Care Planning tools such as Advance Statements, ADRT and LPA.
- Increased awareness of EOL symptoms, nutrition and hydration needs.
- Recognition of the role of Specialist Palliative Care Teams.
- Value of holistic care including physical, spiritual, emotional, psychological and social aspects.
- Usefulness of breathing techniques, stress awareness and mindfulness.



Selected participant feedback

- *“Very informative, learnt a few things that I can take back to my workplace.”*
- *“It demystified end of life and made difficult conversations easier.”*
- *“Staff were very knowledgeable and friendly.”*
- *“This session was so helpful; I understand more about specialist palliative care.”*

Participant suggestions for practice changes

- Introduce or update EOL notice boards and registers.
- Review and regularly update residents’ care plans.
- Improve recognition tools for identifying dying.
- Increase staff confidence in palliative emergencies
- Incorporate more holistic assessment approaches.
- Encourage routine discussions about the power of attorney and ACP.

NEW District Nurse (DN) Training

As a new initiative for 2026, Outreach (ORS) also has started to support the Community Specialist Palliative Care Team (CSPCT) with facilitating EOLC education as a collaboration with DN’s within Liverpool, Knowsley, St Helens, Halton and Warrington localities, with further sessions planned throughout 2026. This widens awareness and understanding of local hospice provisions, potentially increasing referrals and building relationships.

ORS Chatty Cafe/Social Cafe

More patients are expressing social isolation as a higher concern for them. Being responsive in this area, we set up a social café here at the hospice Outreach Centre, specifically for our people twice a month to help address this concern. This is done as a collaborative approach between our Chatty Café Coordinator and Outreach Therapy Helper.



Music Therapy Placement

Context

A new/trialled music therapy student placement commenced in January 2025 (for six-months) with Nordoff and Robbins, the UK's largest music therapy charity. With support and oversight of the Head of Outreach, through recommendations/suggestion, a placement timetable was devised, and various Music therapy sessions were delivered with support each Tuesday within ORS and IPU.



Key findings from questionnaires

100% of service users who responded agreed that...

- Music therapy improved their well-being. They noticed an improvement in anxiety/stress levels. They were very satisfied with the music therapist service.
- They would recommend music therapy to others.

"I have found the sessions to have really helped improve my mood and reduce my anxiety. I always come out of the sessions feeling uplifted, relaxed and happy."

– Outreach Music Group Member

Conclusions and recommendations

The questionnaire responses indicate that music therapy has had a significant positive impact on patients/ service users and has been a welcomed addition to the wide range of therapeutic services already on offer at Willowbrook Hospice. The hospice is currently exploring ways to try and get this service funded.

Child Bereavement UK has been working in partnership with Willowbrook, who have kindly allowed us to use one of their rooms at The Living Well building to offer support to families. This has allowed us to offer in person bereavement support to local St Helens families, who may not have been able to access our nearest service in Widnes.

Due to the existing relationship, hospice staff do reach out to ask about signposting and resources they can suggest to families. The hospice can also refer families to Child Bereavement UK for pre-bereavement support when someone is not expected to live. We work with these families around subjects including difficult conversations, talking to children about death and dying and memory making. Some of the families we have supported at Willowbrook, have told us they have found it helpful to access their support somewhere linked to the hospice where their family member died.

Child Bereavement UK was happy to support the 'How to Look after a Grieving Elephant' project which ran at Willowbrook Hospice in April 2024.

EXTERNAL FEEDBACK FROM SOME OF OUR KEY PARTNERS 2025-2026

Mersey and West Lancashire Teaching Hospitals

Upper GI cancer is one of the most complicated group of patients to manage due to late diagnosis and complex symptoms. Working in collaboration with the Outreach Services gives patients the perfect therapeutic environment to address sensitive end of life issues. This enables an open discussion not only with professionals in the Upper GI Team but other patients and their Carers with supported contacts from Willowbrook Hospice staff as appropriate. The environment is relaxed calming and an ideal place to support and prepare for future care.

“ Both teams work collaboratively to ensure a seamless service is provided. The ORS have contacted our team on several occasions on having concerns with patients who have attended the wellness for you sessions. This has enabled us to direct the patient to the appropriate place of care, with some requiring a GP review. The ORS have supported our sessions for bereaved relatives, future care planning, and group activities providing holistic well-being interventions which has improved patient and carer experience.

The partnerships formed are paramount to the success of our sessions. We can rely on the team to support in group sessions when needed and always willing to provide their expert advice.

Sharon Roberts

Specialist Nurse Practitioner Gastrology/UGI Team



Mersey and West Lancashire
Teaching Hospitals
NHS Trust

Motor Neurone Disease Association (MNDA)

“ The MND Association is very pleased to work in partnership with Willowbrook Hospice to provide a calm space for people with Motor Neurone Disease. It provides an opportunity for people with MND to meet others, share issues and concerns in a welcoming environment.

The range of services provided at the hospice are helpful for the people we support and provides some respite from dealing with such a difficult condition. The hospice staff are helpful, friendly and knowledgeable which makes the partnership work so well.

Gary Birkenhead

Community Support Coordinator



Patient story

Eleanor Keegan

In 2020, my amazing dad, **Dave Keegan**, was diagnosed with bowel cancer at the age of 64. After major surgeries, living with (and later reversing) a stoma bag, and months of treatment, we were overjoyed when he was given the all-clear. For five years he remained cancer-free.

In 2024, Dad underwent surgery for sciatica, and during this time he was briefly removed from the cancer monitoring list. When he returned to routine checks in 2025, five years after beating cancer, we hoped for another clean bill of health. Instead, after further investigations and referrals to Clatterbridge, we received the heartbreaking news that his cancer had returned. This time it was stage four, having metastasised to his lungs with a very large tumour in his pelvis. The cancer was classed as non-treatable.

Dad tried one round of chemotherapy, but it resulted in a hospital stay and left him feeling worse than ever. He made the incredibly brave decision to prioritise quality of life and spend whatever time he has left outside of hospitals. The large pelvic tumour has caused a blockage affecting the blood flow to his right leg, leaving him in pain and struggling with mobility.

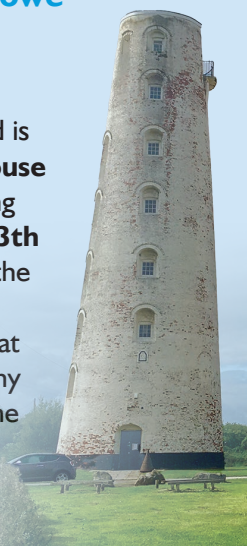
Amid all of this devastating news came a ray of light, **Willowbrook Hospice**.

Their support has been nothing short of extraordinary for Dad and for our family. As I'm writing this, Dad is staying at Willowbrook for stabilisation, and the difference they've made already is unbelievable. The staff and volunteers are absolute angels - kind, patient, and endlessly compassionate. They have helped Dad regain his appetite, his colour, his comfort, and, most importantly, his dignity. His pain is finally under control, and the relief this has brought to our family, especially to my mum who cares for him around the clock, cannot be put into words.

To say thank you, and inspired by my dad's lifelong daredevil streak, Harley-riding, scuba diving, skydiving and all - I've decided to take on my own challenge.

I'm abseiling down Leasowe Lighthouse!

Leasowe Lighthouse stands at **33.5 metres (110 feet)** and is the **tallest and oldest lighthouse in Britain built of brick**, dating all the way back to 1763. On **13th June 2026**, I'll be stepping off the top of it (on purpose!) to raise money for the incredible team at Willowbrook who have given my dad comfort, dignity and genuine joy. during the hardest chapter of his life.



Patient story

At Willowbrook Hospice, we pride ourselves on being a place that doesn't just care for a person's physical needs but also for their emotional and social needs too.

We wanted to fulfil our patient Julie's wish, to kiss a donkey. Fiona the donkey visited Julie at our hospice where she received our specialist care.

Fiona not only brought joy to Julie but also to our staff, visitors and other patients.

Heartfelt thanks to Alwood Donkeys and our staff for all the effort they went to, to grant Julie's wish. We also appreciate the continued community support as without that, we could not continue to provide free exceptional palliative care to all in our community who need it!



2025: OUR YEAR IN NUMBERS

1,214

received in memory
donations which raised over
£130,000

Our community
raised

£320,000



£40,000

raised from
regular giving



£278,000 raised
from our own events
and challenges



STATUTORY INFORMATION AND STATEMENT OF ASSURANCES FROM THE BOARD

This section of the Quality Account includes responses to any National requirements defined by a set of statements which are common to all Quality Accounts. Some of these, however, are not directly applicable to hospices. The statements provide assurance that we are performing to essential standards, measure our clinical processes and performance and show where we are involved in any National projects and initiatives that are aimed at improving quality and safety.

CORPORATE REVIEW AND DUTY OF CANDOUR

Willowbrook Hospice is required to register with the Care Quality Commission (CQC) and there are no conditions of registration. The CQC has not taken any enforcement action against Willowbrook Hospice during 2025-2026. There have been no investigations by the CQC during this period. The last CQC inspection was undertaken in February 2021 when the hospice was virtually inspected using the new Transitional Regulatory Approach (TRA) model. After all the relevant information was put into the algorithm by CQC it was confirmed that no further regulatory activity was required and no risks identified. Our overall rating remains Outstanding following the CQC inspection conducted by the team of inspectors in December 2019.

In July 2023 the CQC undertook a direct monitoring activity, this involved reviewing information and data about the hospice's clinical services. The CQC was satisfied with the information provided and no further regulatory activity was required. In 2024-2025 there were no notifiable safety incidents. As part of the quarterly Board Assurance and Risk reviews, all concerns, complaints, and risks are discussed.

Our Risk Register is very comprehensive, covering Reputational Risk, Liquidity Risk, Capital Risk, Operational Risk, Legal Risk, Conduct and Regulatory Risk, Strategic and Business Risk and Clinical Risk.

The hospice continues to promote Freedom to Speak Up and has two Freedom to Speak Up Guardians in post as well as a Freedom to Speak Up trustee. We are registered with the National Guardians Office and submit quarterly data and attend all network and regional meetings. As a Registered Charity (No 1020240) and Company

Limited by Guarantee (No: 2808633), Willowbrook Hospice submits an Annual Return for public display on the Charity Commission website <https://www.gov.uk/government/organisations/charity-commission> and files its Audited Accounts at Companies House. We contract with Mid-Mersey Digital Alliance through a comprehensive Service Level Agreement (SLA) that supports all our regulatory, mandatory, operational and strategic goals for the organisation. The SLA is monitored on a bi-annual basis and reviewed prior to any contract renewal by the Executive Leadership Team with input from the Board of Trustees. The last submission against the NHS Digital Data Security and Protection Toolkit was successful in June 2025, and all 44 standards were met. We will submit again in June 2026 to maintain our compliance with this requirement.

The hospice receives a statutory grant income, and this continues to represent less than 30% of the total costs associated with the provision of specialist palliative care services provided to St Helens and Knowsley. The hospice relies heavily on the Trading Company and Fundraising Team to generate the remaining income through events and campaigns, lottery team, a network of retail shops, donations, legacies and the continued generous support from the communities we serve. As an Independent Charitable Hospice, our statutory income in 2025-2026 was not conditional on achieving quality improvement and innovation goals agreed between Willowbrook Hospice and any person or body they entered a contract, agreement or arrangement with for the provision on NHS services, through the Commissioning for Quality and Innovation Payment Framework because none were identified.

HOSPICE QUALITY METRICS

= not applicable		2024 / 25	2025 / 26	2024 / 25	2025 / 26	2024 / 25	2025 / 26
Clinical Incidents	No harm	0	10	0			
	Low harm	0	0	0			
	Moderate harm	0	0	0		0	0
Clinical Indicators	RIDDOR	0	1	0	0	1	0
	Serious injury to patients			0	0	0	0
	Outbreak of infectious disease			2	0	0	0
	Duty of Candour	0	0	0	0	0	0
Staff/Visitor accidents/falls	No harm	0	4				
	Low harm	10	3				
	Moderate harm			1	1		
Patient accidents/falls	No harm	13	8				
	Low harm	8	6				
	Moderate harm			0	0	0	0
	Number of actual patients	15	13	0	0	0	0
Complaints	Formal Verbal	6	2	0	0	0	0
	Formal Written	1	0	0	0	0	0
Freedom to Speak Up	Patient safety/quality	0	0	0	0	0	0
	Behaviour	3	2	0	0	0	0
	Suffered detriment	0	0	0	0	0	0
	Worker safety/quality	0	0	0	0	0	0

MEDICINES INCIDENTS

= not applicable		2024 / 25	2025 / 26	2024 / 25	2025 / 26	2024 / 25	2025 / 26
Total incidents recorded		92	67				
No harm		91	67				
Low harm		1	0				
Moderate harm				0	0		
Severe harm						0	0
Prescribing		43	36	0	0	0	0
Dispensing		1	0	0	0	0	0
Administration		27	21	0	0	0	0
Documentation		21	10	0	0	0	0

COMPLAINTS AND COMPLIMENTS

Verbal	3	1. Complaint about behaviour of a spiritual support volunteer. This was investigated and learning and education implemented regarding boundaries of the role 2. Breach of confidentiality involving information being shared about a patient – Investigated fully. Further education and training implemented
Written	0	
Compliments – Written	1	1. Theme is thanking staff for the excellent patient care provided to both patients and families

PATIENT SAFETY INCIDENTS AND PATIENT SAFETY INCIDENT RESPONSE FRAMEWORK (PSIRF)

The Patient Safety Incident Response Framework (PSIRF) is a national approach to learning from patient safety incidents. It introduced a new way of responding to incidents by focusing on supportive oversight, system-based learning, proportionate responses, and compassionate engagement with patients and families.

The hospice has responded to this by the introduction of a weekly “Patient Safety Incident Meeting Group” led by our new Patient Safety and Quality Lead. Processes on responding to incidents and the introduction of daily safety huddles.

Patient Safety Incident Group ensures that the immediate actions needed to maintain patient safety have occurred, and to discuss and ensure the wider team is aware of current pressure points which may require additional resources, and to draw themes on areas for improvement.

The focus is to make real change to patient safety and quality care by learning from these incidents.

Team Daily Huddles

Daily safety huddles are now embedded in our clinical handover. It consists of a brief discussion to highlight patients at risk e.g. from falls and potential high-risk concerns such as oxygen usage. It also helps us to assess the acuity of the ward, handover key information such as appointments or any events which could impact the running of the unit. It also prompts the team to hand over any incidents that have occurred or any maintenance issue which will require investigation or resolutions.

Incident Huddles

When an incident occurs that affects our patients, staff will meet for a brief discussion on the event that occurred and the influences around this. This enables the team to highlight issues such as processes, training requirements, potential issues with equipment etc.

We can then discuss any immediate actions to resolve issues and recommend any further actions or investigations that are required.

After Action Reviews and Patient Safety Incident Investigation Reports

The Patient Safety Lead will then bring together the information from the Huddle and include any reflections/ reports from staff about how it occurred, they will investigate all potential factors involved and produce a report with the key findings and will provide actions and recommendations with specific time frames to implement any changes and key learning.

Shared Learning

The information is then shared in numerous ways to embed any learning and facilitate the changes. This is often done in small groups, newsletters with links to learning and supporting policies or documentation. We also share via our daily handover via HIGHLIGHT5 BRIEFING.

Patient Safety Incidents

Patient safety incidents are instances that affect the patients this could be:

- Medication errors
- Falls
- any incidents of pressure injury which occurred during their hospice stay
- hospice acquired infections

Example of Patient Safety Incident and Learning and Outcomes

Two under doses of medicines (no harm to patients).

Potential contributing factors: multi step process, very busy environment with multiple disruptions, staff stress. Learning and actions: Standard operating procedures reviewed and discussed, change in practice to state in Controlled Drug book that 2 x capsule dose [total dose] is given so that it prompts us how many capsules are required.

Wider medication actions were implemented because of these errors and others which prompted an in-depth review. We met with staff in groups to discuss incidents and gain insight into how they feel we can provide a safer environment, and how we can improve practice.

Following this we have made changes to our medication round, including change to times to enable staff to complete at quieter times. Information has been disseminated to all staff about distracting nurses during administration of medications. Disposable red tabards were bought to encourage staff to wear and manage infection control more effectively. Signs were made for the patient rooms to remind them to use their call aids and family not to disturb nurses with red tabards.

Pharmacy was asked to look at the time they provided stock check and housekeeping asked to change time they were attending the drug room to avoid time when drug round occurring.

Doctors were asked to refrain from teaching students in the drug room to provide a safer environment.

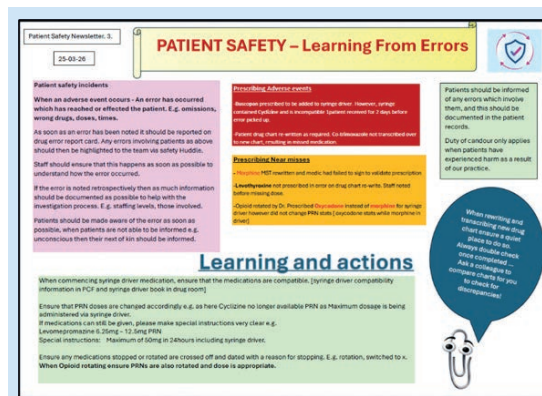


PATIENT SAFETY NEWSLETTER

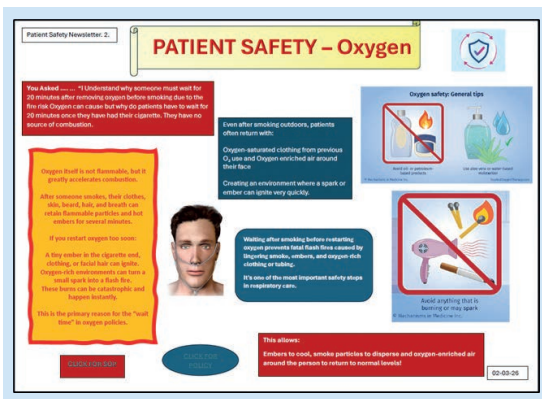
1. Medication administration



2. Learning from errors



3. Patient Safety Oxygen



INPATIENT UNIT CLINICAL ACTIVITY 2024-2025

Occupancy	Admission	Discharges	Deaths
78%	199	58	141
Knowsley	37%	34%	36%
St Helens	61%	64%	61%
Other	2%	2%	3%

INPATIENT UNIT CLINICAL ACTIVITY 2025-2026

Occupancy	Admission	Discharges	Deaths
81%	175	56	118
Knowsley	35%	41%	34%
St Helens	65%	59%	66%
Other	0%	0%	0%

CLINICAL REVIEW

We measure our services against national, local and internal performance standards. This is an effective way of ensuring we provide services that are safe, effective and efficient.

QUALITY ASSURANCE SCHEDULE OF REPORTS

Type	Content	Frequency	Contact
Statutory Notifications	Deaths, Serious Injuries, Abuse, Deprivation of Liberty, SUI's, Police incidents	As required	Care Quality Commission (CQC)
Safety Scorecard	Corporate, Clinical and Statutory focus	Monthly	Board of Trustees, Internal and ICB Quality team
Hospice UK Benchmarking	Pressure Ulcers, Falls, Medication Incidents, Bed Data	Monthly Quarterly	Hospice UK
Occurrence Report	Controlled Drug Medicines Activity	Quarterly	NHS England
Risk Register	Strategic and Organisational focus	Quarterly	Board of Trustees, Internal
Data Set	Clinical Activity	Quarterly	Cheshire and Merseyside Integrated Care Board (ICB)
Freedom to Speak Up	Focus on safety and quality	Quarterly	National Guardian Office
Infection Control Report	Statutory Review – Infection Control	Annual	3 Boroughs ICT
Quality Accounts	Focus on quality activity	Annual	Cheshire and Merseyside Integrated Care Board (ICB)
Annual Report	Focus on financial activity	Annual	Companies House
Medical Revalidation	Responsible Officer Report	Annual	NHS England
Controlled Drug Management	CD medicines incidents	Bi-monthly Quarterly	Meds management group Clinical Assurance Group internal
Quality Visit	Statutory Review – last visit March 2023 No actions	Annual	Cheshire and Merseyside Integrated Care Board (ICB)
Clinical Workforce	Safe Staffing	Quarterly	Board of Trustees, Internal
Statutory Review	Last inspection Dec 2019 – Outstanding	3 – 5 yearly	Care Quality Commission (CQC)

CLINICAL AUDITS

Infection Prevention and Control

All Health and Social Care facilities are required to have a mandatory, Annual Infection Control Audit. This audit is completed by a Clinical Nurse Specialist from 3 Boroughs Community Infection Control Team.

100% compliance was demonstrated in each of the subtopics as follows:

- Governance and assurance
- Preparedness
- General Environment
- Bathrooms
- Toilets
- Sluice and Waste
- Treatment Room
- Sharps
- Laundry
- PPE
- Cleaning and Medical Equipment
- Promoting IP strategies

Antibiotic Audit

The antibiotic audit was undertaken to assess compliance with antimicrobial prescribing standards, in line with the national “Start Smart Then Focus” framework endorsed by the Department of Health and Public Health England.

20 individual patients were included in the audit over five consecutive months from July 2025 – November 2025.

Standards include:

1. All patients must have their drug allergy status recorded.
2. All patients must have a clear indication documented for each treatment course.
3. All antibiotic choices should be compliant with the trust antibiotic policy or PCF.
4. All treatment not compliant with policy should be discussed with a Microbiologist.
5. All patients should have a review/stop date documented on the medicine chart and SystmOne at initiation.
6. All patients should have their treatment reviewed at 24-72 hours
7. All patients should have their review documented on the medicine chart and SystmOne
8. Antibiotics should be stopped at the review if no evidence of infection
9. If a course of antibiotics were initiated as IV, were they converted to oral, narrow spectrum antibiotics at review?
10. All patients should receive a dose of IV Antibiotics within one hour of them being prescribed
11. All patients should receive appropriate therapeutic monitoring

Overall compliance was very good. Some areas for quality improvements were identified:

- The development of guidance for infections not covered by Mersey and West Lancs guidelines e.g. lymphoedema cellulitis.
- Documentation of indications for use and the intended review or stop date on SystmOne and medicine chart was not always recorded.

Individualised Care and Communication Record (ICCR) Audit

The ICCR is a document on which we plan and record the care given to a patient and those who matter to them, at end of life.

All ICCR documents implemented over a three-month period were audited to ensure compliance with guidelines on care of people in the last days of life. Specifically, documentation of:

- NOK details
- Discussions regarding death and dying
- What is important to the patient and significant others, any concerns, and discussions around who wants to be present at the time of death
- Spiritual and religious needs discussed and addressed appropriately
- Discussions around personal care and preferences such as PPC and PPD
- Medically that symptoms have been addressed [pain, confusion, agitation, nausea and vomiting, respiratory secretion and other symptoms]
- Any inappropriate test/interventions discontinued
- There is documented evidence that the patient's condition and needs have been addressed at least every four hours. 

Although the overall documentation was of a good standard, quality improvements were identified. They have been actioned as follows:

- An updated information leaflet for patients and families
- Implementation of a new contact sheet to ensure full next of kin details are recorded on admission
- Refresher training to ensure that all care plans are person-cantered, clinically safe, regularly reviewed and that they clearly evidence communication, consent, wishes and shared decision making 

CQC Controlled Drug Governance

An annual CQC self-assessment tool is completed by our clinical Pharmacist to demonstrate compliance with regulations and guidance with regard to Controlled Drugs management. Compliance is audited against:

- Governance
- Obtaining and receiving
- Storage and access
- Prescribing
- Dispensing and supply
- Destruction
- Transport
- Stationary
- Reporting and learning



Full compliance was demonstrated in all areas.

General Medicines Management

The Hospice UK Accredited Audit Tool was used to ensure that the hospice complies with The Medicines Act, the Misuse of Drugs Regulations and The Health Act.

The tool reviews standards and compliance of Non-Controlled Drugs:

1. Standard Operating Procedures (SOPs)
2. Purchasing and Supply of Stock Medicines
3. Storage and Destruction of Medicines
4. Prescribing of Medicines
5. Administration of Medicines
6. Patient's Own Medicines
7. Non-Medical Prescribers
8. Medicines Reconciliation

Results showed: **95% compliance** in area one as Standard Operating Procedures had not been signed as read by all staff. **100% compliance** was demonstrated in all other seven areas.

Improvements highlighted were to circulate the Standard Operating Procedure to staff to sign which will continue to be monitored and reviewed by the Medicines Management Group.

OUTREACH SERVICES (ORS) 2025-2026 SURVEY/AUDIT SUMMARY

ORS contacts (In person)	2024/25	2025/26	Difference
Annual	3,596	4,761	1,165 (33% increase)
Referrals	212	269	57 (26% increase)

* Data shows an increase of both St Helens and Knowsley referrals by 26% and annual contacts by 33%.

Quantitative Feedback

MYCAW (Measure Yourself Concerns and Wellbeing) – validated audit tool.

Three of the highest scoring issues/concerns that were identified by patients accessing ORS:

- Breathlessness
- Mobility/fear of falls.
- **Loneliness/social isolation**
- Low mood/anxiety (next highest scoring concern)

Two of the top concerns consistent with 2023/24's and 2024/25's data; breathlessness and mobility/fear of falls.

**New issue reported for 2025/2026 loneliness/social isolation.*

MYCAW MEAN results (as an average)	2025/26 PRE ORS (score)	2025/26 POST ORS (score)
Concern/Issue 1	5	4
Concern/Issue 2	5	3
General wellbeing	4	2

* Score out of total of six (1 = as good as it could be, 6 = as bad as it could be)

Willowbrook Hospice In-House Patient Experience

Questions	Responses
How likely are you to recommend Willowbrook Hospice's care to family and friends if they needed a similar service?	96% very likely 4% likely
How was the way you were welcomed when you came into the Hospice?	100% very good
Did you feel listened too?	100% always
The support we give, to help you learn and self-manage symptoms that you may have (such as breathlessness, pain, fatigue, stress etc.)?	81% very good 15% good 4% fair
Newly added question for 2025/26 The support we provide for you as a whole person e.g., emotional, social, spiritual and physical support?	89% very good 7% good 4% fair
Newly added question for 2025/26 Did you feel treated with dignity and respect?	96% always 4% most of the time
How would you rate your overall experience of Willowbrook?	96% very good 4% good
Has attending ORS helped you cope better with your illness or daily life?	90% yes 10% maybe

Summary

The combination of approaches has helped to capture patient experience; it has helped us to identify themes and areas for improvement. Using MYCAW particularly continues to help us form individualised patient care plans to support patients concerns/issues whilst they are in service.

Patients have told us that they appreciate the company and peer support of others whilst attending the groups, the combination of education sessions and support provided, the relaxing environment and therapeutic activities on offer has very often provided a lifeline for our people. Volunteer transport has been a great help to widen access, especially for those who may not have otherwise had transport.

A continued gap in ORS provision, that has been identified again using MYCAW is **supporting patients' mobility and rehabilitation**. Data collected shows this consistently, as an identified main concern/issue for ORS patients.

Whilst we are looking at filling some gaps in this area, such as upskilling/training our therapy helper to deliver seated chair-based exercises and ORS reaching out more with the frailty and community teams, it still shows that we cannot be fully responsive, as the current AHP therapy provision doesn't extend to ORS.

Another new concern identified from the audit was that **more patients are expressing social isolation as a higher concern** for them. Being responsive in this area, in September 2025 we set up a social café specifically for our people twice a month to help address this concern.

You said/asked	We did
Patients MYCAW – support with mobility	Link in more with frailty/community teams, develop ORS therapy helper role to facilitate chair-based exercises/sitting balance exercises (currently in training) and groups and one to ones planned as an objective for 2026/27
Patients MYCAW – loneliness	We have commenced a dedicated Willowbrook chatty/social cafe twice monthly in Cedarwood as a collab with the volunteer hub.
Patients Rewilding – longer group times and earlier commencement (as currently seasonal March – December)	Extended the group by 30 mins and commenced the group in February instead of March.

HOSPICE OPEN DAY

In November we held our first ever Hospice Open Day as part of National Hospice and Palliative Care Month.

This provided a unique opportunity for the public, stakeholders and clinicians to take guided tours of some parts of the hospice, our peaceful gardens and outreach facilities. It also provided the chance to meet our dedicated team members and learn more about our holistic approach to care.

 Date: **13th November 2025**

 Time: **10am to 12noon, 1pm to 3.30pm**

 Location: **Willowbrook Hospice, Cedarwood Centre entrance**



What Was On Offer:

- Informal chats with staff
- Free massages and craft taster sessions
- Information stands on our clinical services, bereavement support, and fundraising
- Volunteer opportunities
- Refreshments and a friendly, welcoming atmosphere
- Guided tours of our outreach services and beautiful gardens

The invite was sent to all potential stakeholders, people who may have used our services before, and those who may have wanted to find out more about hospice care. The Open Day provided an excellent platform to break down myths, explore compassionate care, and connect with the people who make Willowbrook a place of dignity and hope.

Attendance was free, and no prior booking was required. We hope to do more through 2026/27 and beyond, seeing firsthand how successful this event was to us and the wider community.

PATIENT AND FAMILY QUESTIONNAIRE

123

Responses

558:57

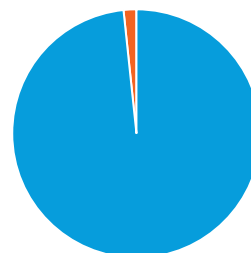
Average time to complete

Active

Status

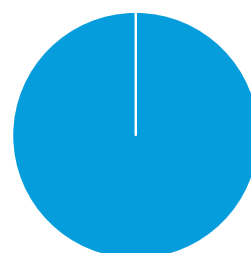
1. How likely are you to recommend Willowbrook Hospice's care to family and friends if they need a similar service?

Very likely	121
Likely	2
Unlikely	0



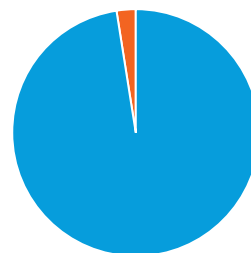
2. Do we treat you with dignity and respect?

Always	123
Most of the time	0
Sometimes	0
Never	0



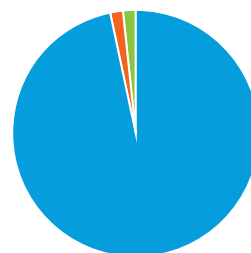
3. Do we involve you as much as you would like in decisions about your care?

Always	120
Most of the time	3
Sometimes	0
Never	0



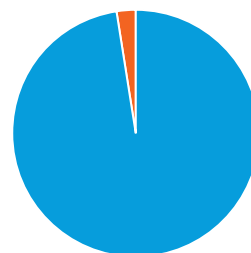
4. Do we provide enough support for you, your family member, carer or friend?

Always	119
Most of the time	2
Sometimes	2
Never	0



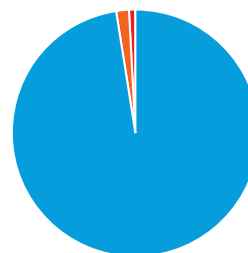
5. How was the way you were welcomed when you came into the hospice?

Very good	120
Good	3
Fair	0
Poor	0



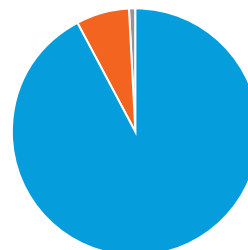
6. How was the cleanliness of the hospice?

Very good	120
Good	2
Fair	0
Poor	1



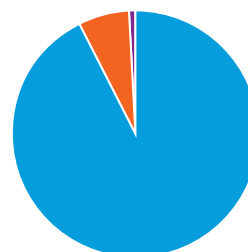
7. How was the quality of the food and drink provided at the hospice?

Very good	113
Good	9
Fair	1
Poor	0



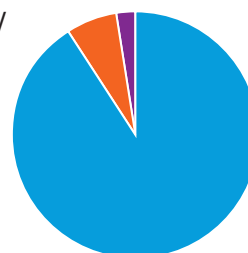
8. How was the support given to relieve pain?

Very good	114
Good	8
Fair	0
Poor	0
Support not required	1



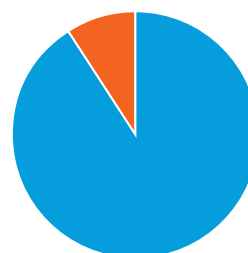
9. How was the support given to relieve other symptoms you may have/have had (eg. nausea, constipation, breathlessness etc)?

Very good	112
Good	8
Fair	0
Poor	0
Support not required	3



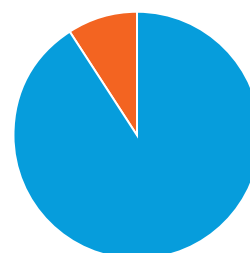
10. How was the emotional support that we offered you and the people who care about you?

Very good	112
Good	11
Fair	0
Poor	0



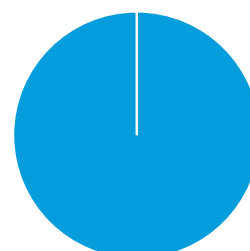
11. How was the support we provided you as a person regarding your beliefs, faiths, hopes, feelings of peace sense of purpose?

● Very good	112
● Good	11
● Fair	0
● Poor	0



12. How would you rate your overall experience of Willowbrook Hospice?

● Very good	123
● Good	0
● Fair	0
● Poor	0



13. Is there any other feedback you have on how our care has helped?

Latest Responses

122

Responses

"Happy with the care and support they are giving us all as..."

"I wish more people could understand the superb care the..."

Kevin Tobin =patient. John Welsh =visiting

14. Is there anything we can do to improve your experience of our services?

Latest Responses

122

Responses

"No you go above and beyond thank you."

"No. It is exceptional!"

"No all excellent"

15. If you would like anyone to contact you from the hospice regarding any concerns you have, please leave your name and contact details below.

Latest Responses

59

Responses

"NA"



FUNDRAISING AND EVENTS

During 2025-2026, the Fundraising Team at Willowbrook Hospice continued to deliver a varied and successful programme of events, generating essential income while maintaining strong engagement with the local community.

The **Strictly Glitter Ball** remained a popular fundraising event within the annual calendar. This fantastic night brings together local participants, volunteers, and sponsors in a professionally staged dance competition. Participants commit to individual fundraising targets, supported by ticket sales and audience engagement activities. The event continues to achieve significant financial success and attract widespread community involvement, reinforcing its role as a cornerstone of the hospice's fundraising strategy.

The **Moonlight Walk** also continued to be a key event, combining fundraising with remembrance. Participants undertake a sponsored walk in memory of loved ones, creating a meaningful opportunity for reflection while raising vital funds. The event attracts a broad demographic and plays an important role in strengthening community connection to hospice services.

Alongside these large scale events, the Fundraising Team delivered a range of community-led events, challenge activities, and partnership campaigns with local businesses and organisations. This diverse portfolio ensures resilience in income generation and supports ongoing public awareness of hospice services.

Our community fundraising efforts continue to play a vital role in supporting Willowbrook Hospice, reflecting the compassion and generosity of local people and organisations. Through a variety of events, donations, and volunteer-led initiatives, we have strengthened community engagement while raising essential funds to sustain and enhance hospice services.

Collectively, the 2025-2026 events programme has made a significant contribution to the financial sustainability of the hospice, while strengthening relationships with supporters, volunteers, and the wider community. The continued success of these initiatives reflects the dedication and generosity of all those involved in supporting the work of the hospice.



TRADING COMPANY AND RETAIL SERVICES

Alongside our Fundraising Department, Willowbrook Hospice operates a Trading Company that manages our network of charity shops, The Living Well Café, and our conferencing facilities.

The Trading Company plays a vital role in ensuring the financial sustainability of hospice services, generating approximately 13% of the income required 2025-2026 to support the delivery of safe, effective, and compassionate specialist palliative and end-of-life care.

We operate 12 charity shops across St Helens and Knowsley, providing accessible retail environments for the local community while promoting reuse and sustainability through the sale of donated goods, including furniture, clothing, and electrical items. Our 7,500 sq. ft. Donations Warehouse on Sutton Road, St Helens, open six days a week, further enhances accessibility and community engagement.

Through these services, we actively contribute to:

- Community engagement and inclusion, offering welcoming spaces for interaction and support
- Environmental sustainability, reducing waste through reuse and recycling
- Financial resilience, ensuring continued investment in patient care services

Our retail and trading activities are supported by a committed team of staff and volunteers. Volunteers play a crucial role in service delivery, contributing to a positive and inclusive environment while helping to maximise the income returned to the hospice. This approach reflects our commitment to being a well-led organisation, making effective use of resources to deliver high-quality care.

The Living Well

The Living Well is our community hub, providing a welcoming, inclusive, and flexible environment designed to support health, wellbeing, and social connection.

Facilities and services include:

- A shop and café, promoting social interaction and wellbeing
- Conference and meeting spaces for hire, supporting local organisations and partnerships
- Space for community groups, activities, and events that reduce isolation and promote inclusion

How You Can Support Us

There are many ways to support Willowbrook Hospice:

- Donate good quality items to our shops
- Arrange a free collection for unwanted furniture and electrical goods via our website
- Volunteer your time in one of our shops, the café, or our eBay department
- Help raise awareness by sharing the work we do within your community

Every contribution – whether through time, donations, or advocacy – directly supports the delivery of high-quality hospice care and helps ensure we can continue to meet the needs of our community now and in the future.

Thank you for your continued support.

THE VOLUNTEER HUB

Over the past 12 months, Willowbrook has been supported by 519 active volunteers contributing across more than 50 diverse roles, collectively saving an estimated £1.1 million in staffing costs. Volunteers of all ages bring a wealth of professional and personal experience to their roles, enhancing the quality of care and support we provide to our patients.

Our volunteering opportunities are wide-ranging, including roles in our retail shops, gardens, and maintenance, as well as direct patient support, community outreach, fundraising events, Bereavement Services, and many others.

Community Impact

Our **Compassionate Neighbour** programme has supported 10 socially isolated individuals in their own homes over the past year. Delivered by dedicated volunteers, the programme provides meaningful companionship and support to people living in the community with a palliative diagnosis. It continues to be highly valued by both those receiving support and the volunteers involved.

Our **Chatty Café** initiative shares a similar aim of reducing isolation and fostering connection, while being open to anyone in the community. We currently host eight Chatty Café sessions each month across the St Helens and Knowsley boroughs, supporting nearly 500 individuals over the past 12 months.

Throughout this period, we have worked in partnership with a range of organisations including Citizens Advice, Merseyside Police Fraud Prevention Unit, St Helens Library Service, Age Concern, The Energy Charity, and Merseyside Fire and Rescue Service. Sessions have also featured a variety of activities and entertainment, such as yoga and Tai Chi, as well as performances from groups including the U3A Guitar Band, Rainhill Community Choir, a Frank Sinatra tribute act, a country and western singer, and many other local performers – alongside, of course, plenty of conversation and connection.



Emma, Ian and Diane from the Volunteer Hub.



Compassionate Neighbour scheme continues to provide companionship for isolated individuals.



Attendees at one of our Chatty Cafés.

Staff and Volunteer Awards

We were pleased to present Long Service Awards to 74 Volunteers and Staff, honouring their commitment to Willowbrook.

Their service ran from five years to 30 years, collectively contributing to an incredible contribution of 695 years to the Hospice.

This year we proudly introduced four volunteers awards – Outstanding Contribution to Volunteering, Young Volunteer of the Year, Volunteer Team of the Year and The Volunteer Values Award. We received 19 fantastic nominations.



Our Award Winners!

Partnership Working

This year we have worked with seven companies who have supported our gardens for a corporate volunteering day: Waterside Training (Ford car apprentices), St James Place, Department for Work and Pensions, Tailored Financial Planning, Lloyds Bank, Agrekko Europe, Arrivia who have all provided between two and 15 members of their staff and made a significant difference for our patients and their families who use and enjoy the gardens.



We welcomed staff from Arriva to our hospice gardens to do some volunteering.

OUR THREE MAIN PRIORITIES FOR 2026-2027

With reference to Willowbrook Hospice vision, mission and values these are our priorities for 2026-2027.

Pillar 1 | Financial sustainability

- Reduce/manage deficit over the next three years.
- Develop an income generation strategy to ensure medium to long term viability of the business.

Pillar 2 | Patient care and experience

- Maintain high bed occupancy, meeting or exceeding national and regional guidance.
- Maintain CQC outstanding rating by ensuring the consistent delivery of high-quality, patient-centred care for all patients and families across the hospice.

Pillar 3 | Partnership working

- Protect and strengthen key relationships with ICB, St Helens NHS, regional collaboratives etc.
- Identify and develop better working relationships with key partners in Knowsley.



Willowbrook Hospice

Willowbrook Hospice

Overall
rating

Inadequate

Requires
improvement

Good

Outstanding



Are services

Safe?

Good

Effective?

Good

Caring?

Outstanding



Responsive?

Outstanding



Well led?

Good

The Care Quality Commission is the independent regulator of health and social care in England. You can read our inspection report at www.cqc.org.uk/location/1-116789258

We would like to hear about your experience of the care you have received, whether good or bad.

Call us on 03000 61 61 61, e-mail enquiries@cqc.org.uk, or go to www.cqc.org.uk/share-your-experience-finder





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www.willowbrook.org.uk

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