Abstracts

Method We devised a simple tool which enabled staff to state what they wanted to “Stop, Start and Keep” within the services they provided.

Discussion This tool was used in an “away day” style environment, the whole team where engaged in the process and the use of the tool elicited themes from the team in relation to the questions asked, and enabled the team to develop a plan for future developments and discuss key areas of concern.

There was an over arching theme related to maintaining quality which underpinned all such developments and a desire to ensure the quality of care patients received was not adversely affected. The use of the tool acted as a bench mark to where we are now and where we wanted to be, and enables the team to review progress, its impact and celebrate success.

Conclusion The use of this tool enabled the team to feel engaged and contribute to the development of new ideas and ways of working in challenging times. The process is fluid and enables teams the opportunity to revisit and review and address issues and developments.

Introduction In common with other independent hospices, Weldmar Hospicecare Trust faces considerable uncertainty over the size and nature of future income. This paper describes the financial modelling which allows us to make sound financial plans despite that uncertainty.

Aims To create an understanding of our complex finances so we can focus on the most impactful income generation, control expenditure and use our Balance Sheet strength to create a future where we are no longer dependent on any one source of income.

Approach used
• analysis of expenditure and income streams by type and cost centre (80 + budget lines).
• Application of differential growth/cost pressure assumptions to each line on an Excel model which allows assumptions to be changed producing different results.

Outcomes this command of our finances has allowed us to:
• make budget adjustments in the context of securing long term strength,
• to manage sudden unforeseen changes (such as 90% failure of legacy income in one year) without making damaging short term cuts,
• to distribute resources to staff via pay in a way which is sustainable and transparent and affordable,
• to invest in income raising possibilities even while running planned £1 million deficits.

Our model shows that in four years’ time we will have generated sufficient surplus to minimise the impact of loss or reduction of NHS income should competitive tendering produce such a result. It provides a clear guide to managers on how service development can, or cannot, be afforded.

Application to hospice practice Hospices have complex and unpredictable income streams – NHS, trading, legacies, donations, investment and relatively fixed costs – largely staffing. Without a long term view, short term reactions to financial hiatus can lead to unnecessary curtailment of services, loss of opportunity and lowered morale. This model minimises those problems.

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Outcomes Two years on and the resulting strategic plan is delivering measurable outcomes which are positively impacting on the care and support being given to families. The organisation has also influenced the development of a Framework for the Delivery of Palliative Care for Children and Young People (2013). Staff, volunteers and service-users are motivated, guided and empowered by the plan. The plan has raised awareness of the organisation within health and local authority networks, resulting in increased referrals and funding.

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