

Respite | Rehabilitation | Reassurance

Our
Lady's
**Hospice
& Care
Services**

2019

ANNUAL REPORT



Mission Statement

Our Lady's Hospice & Care Services, founded by the Sisters of Charity in 1879, continues its mission by providing, with loving care, high quality, person-centred health and social care services in the Hospice and community.

Our Core Values

These core values are upheld and shared by many people of diverse cultures, faiths, professions and circumstances. Daily, they serve to inspire, motivate and guide us in our work together.

Human Dignity:

To respect the unique worth of every individual.

Compassion:

To empathise with those who are in discomfort or suffering and to strive to understand their experience.

Justice:

To consistently act with integrity, honesty, commitment and accountability.

Quality:

To strive for excellence in all aspects of our work.

Advocacy:

To represent the needs of those who are unable to speak for themselves.

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140 YEARS A GROWING

Past, present & future

In 2019, OLH&CS proudly celebrated 140 years since our organisation was established to provide care for those in our community.

It is with great pride that we reflect on the brave, pioneering work of Mother Mary Aikenhead, and how she inspired the Religious Sisters of Charity to take on this work and develop the strong ethos of care that remains to this day.

Our Mission, to provide loving high quality, person-centred care in the Hospice and community is built on these foundations.

Similarly, our core values of human dignity, compassion, justice, quality and advocacy are important to all 600 staff and over 330 volunteers and enable us to provide the best of care to a catchment area of almost a million people.

Founded in 1815, the Religious Sisters of Charity (RSOC), reached far beyond their convent walls to visit and serve their community – work that continues today. While Mary Aikenhead founded the RSOC, Anna Gaynor was the driving force behind the Hospice. A hallmark of these women, and those who came after, was reacting to the needs of the community.

And so, on 9th December 1879, they welcomed the poor and poorly to avail of a clean, dignified and safe environment at their house in Harold's Cross.

Opening with just nine beds, overcrowding was imminent. With careful planning, negotiating and skilful fundraising, Gaynor

soon developed a 110-bed facility with a kitchen, laundry and dairy. While it grew and became known for loving care, conditions were primitive with open fires, candles, hand-washed linen and instruments, and carbolised mattresses. Electricity, a lift and central heating did not arrive for decades.

As the patient profile changed, the Hospice evolved and we began to see the emergence of today's three core services in Harold's Cross: Palliative Care, Rheumatic and Musculoskeletal Disease, and Care of the Older Person (incorporating Anna Gaynor House residential facility and the Community Reablement Unit or CRU). Education and research have always been to the forefront as they form the foundation for providing quality services. Specialist facilities to accommodate learning and training were first opened in 1987.

Blackrock Hospice opened in 2003 to expand the provision of palliative care across south Dublin and north Wicklow. Services include: in-patient, Day Hospice and Specialist Community Palliative Care.

Our services continually adapt in line with patients' needs. To meet increased demand and the complex health and social care needs of Ireland's ageing population, we must provide more specialist facilities and services.

To achieve this and to grow our organisation, we continue to work through our



Every day our staff and volunteers uphold our core values of human dignity, compassion, justice, quality and advocacy. Every day we work with patients and their loved ones in our facilities and in their homes to help them achieve their best quality of life.





These core values are upheld and shared by many people of diverse cultures, faiths, professions and circumstances. Daily they serve to inspire motivate and guide us in our work together.

2017-2022 Strategic Plan to enhance our care. It outlines our plans to build capacity, reconfigure and integrate our services and workforce based on best practice, evidence-based models of care and anticipated future needs.

We passionately believe that everyone living in our community should be able to access high quality person-centred care when they need it. We also believe that our services should be delivered in the most appropriate and effective way to meet the needs of patients and their families.

We celebrated the completion of our redeveloped specialist Palliative Care Unit in Harold's Cross in 2018. It was an ambitious project and we are delighted to provide this wonderful facility for our community. While our excellent care has not changed, we are now able to provide it in a setting that is more comfortable, dignified and family-friendly. It makes a real difference to the experience of patients and their loved ones every single day and we love to hear their positive feedback.

Moving on to phase two, we want to provide the same quality and standards for all our patients across our sites and we look forward to the refurbishment of Blackrock Hospice and further developments across our services.

We also look forward to welcoming on board our new sibling in Wicklow in 2020. This newly-built facility will have 15 beds, a Day Hospice facility and will provide specialist care in people's homes across the county through its Community Palliative Care Team.

Every day our staff and volunteers uphold our core values of human dignity, compassion, justice, quality and advocacy. Every day we work with patients and their loved ones in our facilities and in their homes to help them achieve their best quality of life.

With 200 beds over two locations and care provided by more than 600 staff and 330 wonderful volunteers, we serve a catchment area of a million people across south Dublin and Wicklow. To do this we are reliant on continued public support and fundraising, something that has been true since the Hospice first opened.

The organisation's core values are upheld and shared by many people of diverse cultures, faiths, professions and circumstances. Daily they serve to inspire motivate and guide us in our work together.

We are truly of the community, for the community and by the community.



WHO WE ARE AND WHAT WE DO

Who we are

Our Lady's Hospice & Care Services (OLH&CS) provides specialist care for people with a wide range of needs from rehabilitation to end-of-life care in people's homes across Dublin and north Wicklow and in its two facilities in Harold's Cross and Blackrock.

These services are provided in co-operation with the Health Services Executive (HSE) and the Department of Health. The company also fundraises to continue to develop the campus and to enhance patient services.

What we do

Rheumatic & Musculoskeletal Disease Unit, RMDU (Harold's Cross)

RMDU is unique within the Irish system, with in-patient and out-patient services to assess, treat, support and educate patients with rheumatic and musculoskeletal diseases. Our expert team works closely with patients to manage pain and symptoms and help them to achieve their best quality of life. The Unit comprises 40 in-patient beds, an out-patient service and is a teaching centre for all disciplines with close links to several acute hospitals and University College Dublin and Trinity College Dublin.

Extended Care Unit, Anna Gaynor House (Harold's Cross)

Anna Gaynor House is a purpose-built eighty-nine bedded residential unit providing a safe and comfortable living environment to those with high dependencies who require 24-hour nursing care. All residents benefit from working with a multi-disciplinary

team, regular exercise classes and multisensory work such as music, art therapy etc. We encourage residents to participate in whatever way they can to optimise their comfort, function and independence. Our volunteers provide a great deal of valuable support with activities and entertainment programmes.

Community Reablement Unit, CRU (Harold's Cross)

Our team work with patients to get the most out of their physical abilities, help with advance care planning and hopefully avoid hospital admissions. Each patient receives a tailor-made programme and we work with them on areas of concern e.g. pain management, optimising medication, improving balance, reducing falls, improving function and building their confidence to leave home and join in social events. The increase in demand for this service is in line with increased frailty in our community due to Ireland's ageing population.

Specialist Palliative Care

We provide specialist palliative care to a catchment area of almost a million people across South Dublin and North Wicklow. Our focus is to improve the quality of life for those with a life-limiting illness. We help patients to live with comfort, dignity and peace of mind, taking an holistic approach to meet the needs of patients and their families. Palliative care involves treating symptoms and providing psychological, social and spiritual support. Most of our work involves caring for people in their own homes through our Community Palliative Care Teams. We have 36 in-patient beds in Harold's Cross and 12 in Blackrock Hospice.

Bereavement Services

We support families and carers when their loved one is in our care. While many cope with grief with the help of family and friends, some benefit from more specific bereavement support. Individual bereavement counselling is available for children, young people and adults. We also offer information evenings, non-denominational remembrance services and an annual mass. Services are provided by social workers and highly-trained bereavement volunteers, many of whom have been with us for ten years or more. All services are free of charge to friends and family of patients who have died in our care.

Education and Research

Education, research and training form the bedrock for quality services to patients and their families. Courses, seminars and workshops are provided throughout the year with modern facilities available to hire. Significant research activity takes place on site.

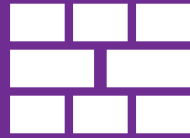
Fundraising and Communications

OLH&CS achievements are built upon the generous donations of thousands of individuals, groups and companies every year. Their compassion and generosity, along with funding from the HSE, enables us to continually develop and provide high quality care. Every year we need to raise €5.5 million to support our services. Our communications programme raises our profile, supports fundraising and celebrates the stories of our residents, patients and their families.



2

Campuses in Harold's Cross (1879) and Blackrock (2003)



1

New 15 bed Hospice opening in Wicklow in 2020



4,011

Patients cared for in 2019



40%

Of patients seen by our specialist community palliative care team have a diagnosis other than cancer



11,155

Total visits to patients' homes by specialist palliative care nurses



531

Average visits to patients' homes by specialist palliative care nurses



303

Patients cared for in our Day Hospice services



16%

Increase in admissions since 2015



600+

Medical and general staff members



330

Incredible volunteers



107

Under 25s treated in RMDU out-patient clinics



€5.5m+

Needed to support our services and make up shortfall in state funding



1,436

Patients seen in RMDU in-patient & out-patient services



8%

Increase in admissions to Anna Gaynor House since 2018



1m+

People in our catchment area of South Dublin and North Wicklow



CHAIRPERSON'S REPORT

Brian Murray

Chair of the Board of Directors

I would like to thank the staff; my fellow directors; Audrey Houlihan, CEO; the Management Team; volunteers and donors for another successful year at Our Lady's Hospice & Care Services.

The professionalism, dedication and loyalty to the organisation demonstrated by staff, along with the very generous support provided by the volunteers, provides the structure of a robust organisation, growing from strength to strength.

There is no doubt that all of this is enabled through the support of our generous donors. In 2019 €6,509,719 was raised through fundraising, the most successful year in the organisation's history. On behalf of all service users of Our Lady's Hospice & Care Services (OLH&CS), I would like to extend grateful thanks to everyone who provided support throughout 2019.

The structure of the Board of Directors and the Board Sub-Committees can be seen in the Governance section of this report. Throughout the year the Board monitored the progress and implementation of the organisation's Strategic Plan, which has resulted in adjustments to models of care across all of our services in order to maximise efficiencies and service delivery in line with best national and international policies. Efficiencies have been achieved through the introduction of management structure changes along with undertaking the governance of Wicklow Hospice.

The Board along with the Management Team held a Strategy Day early in the year to review the progress of our strategic objectives. The focus was on service reviews, associated funding model and capital plans for service developments. The board also set the targets to achieve throughout the year.

As required under governance regulations, the Board undertook a three-yearly independent review of its performance, which was conducted at the end of 2019. Overall this reflected robust governance structures, communication and an effective relationship with the Management Team. All recommendations will be implemented immediately. The Code of Governance for the organisation was also reviewed and this will be updated in the near future.

There were challenges to the organisation with the implementation of significant cost savings throughout 2019. Again, with the co-operation and huge efforts of staff, savings of over €1M were achieved across both pay and non-pay headings. This, however, is not sustainable into the future without affecting the quality of care.

Over the past three years, the Board has approved funding of staff to the amount

of €5.3M. This was to ensure that service levels and quality were maintained through staffing embargoes and private income funding challenges. Fundraising monies were also reserved for upgrade works to Blackrock Hospice and costs associated with Wicklow Hospice, when it comes under the governance of OLH&CS. We are also planning for future development of outpatient services to address emerging patient demands.

The Audited Financial Accounts for 2019 are included in the report, and, on behalf of the Board, I acknowledge the hard work throughout the organisation to achieve a break-even position at year end.

Discussions with the HSE and Wicklow Hospice Foundation (WHF) took place during the year to progress the development, completion and hand-over of the new building to OLH&CS. Due diligence and transfer of Wicklow Hospice is planned for early 2020.

I am grateful to my co Directors for their support and input during the year. I would particularly like to acknowledge the valuable contribution of Dr Brendan Clune, who resigned from the Board at the AGM (June 2019). Dr Clune also Chaired the Clinical Governance Committee for a number of years.

In November 2019 two new Directors were appointed to the Board, Dr Philip Wiehe, a well-known and respected general practitioner from the Sundrive Road Clinic and Mr Lorcan Birthistle, the Chief Executive Officer of St James's Hospital. The Board welcomed these new colleagues, who have a vast amount of combined expertise and knowledge to help guide our organisation.



STRUCTURE, MANAGEMENT AND ADMINISTRATION

Registration, Constitution and Structure

Our Lady's Hospice & Care Services is a registered Charity in Ireland (Registered Charity Number or RCN 20001827 / Charity Number or CHY 1144) and is constituted as a Designated Activity Company or DAC (Company Registration Number 352404).

OLH&CS was established in 1879 by the Religious Sisters of Charity. Today, we are Ireland's largest hospice and provide a range of specialisms in and from two sites; Harold's Cross established in 1879 and Blackrock Hospice, established in 2003. In 2020, we look forward to welcoming a third site – Wicklow Hospice

Board of Directors

OLH&CS is governed by an independent Board of Directors who serve in a voluntary capacity and meet at least five times a year. In compliance with our Memorandum of Association, no salary, fees or other remuneration is paid to Board Directors. The Directors are responsible for the management of the business of the company and for exercising their powers in pursuit of the charitable objectives of the company.

The Directors are committed to maintaining the highest standard of corporate governance and this is reflected in the emphasis on transparency, accountability and effectiveness in all aspects of our work. The Directors are responsible for:

- Entrepreneurial Leadership - Providing effective leadership of the Hospice within a framework of prudent and effective controls.
- Strategic Direction - Setting the strategic direction of the Hospice, in light of the ethos and values that underpin the organisation, as established by the Religious Sisters of Charity.
- Oversee and Monitor Performance - Approve, monitor and review organisational performance.

The Directors delegate the day-to-day operations of the company to the Chief Executive Officer (CEO). The CEO is not a member of the Board and there are no employee representatives on the Board.

Directors and Company Secretary

Brian Murray has been Chair of the Board of Directors since 2018. Helen Nolan has been Company Secretary since 2017.

The Board is comprised of not less than two and no more than 13 Directors. Members of the Board are subject to retirement by rotation having held office for six years consecutively. To ensure continuity of organisational knowledge and specialist expertise, Board members can be reappointed for a further six year if required.*

Those who served as Board Directors, at any period, during the 2019 financial year are listed as below:

Brian Murray

Chairman of the Board since 28/05/2018.

A former Chief Executive Officer of the Dublin Dental University Hospital, member of the Postgraduate Medical and Dental Board and member and Vice President of the Dental Council of Ireland, Brian is presently a board member of St James's Hospital and Treasurer of the Association for Dental Education in Europe.

Stephen Walsh

Stephen Walsh, who was a career banker for 40 years, retired from Bank of Ireland Private Banking in 2006. He is a consultant to a small number of high profile clients and serves as a non-executive director on a number of private and family Boards, where he also acts as Trustee. Stephen is currently Chair of the City of Dublin Skin and Cancer Hospital Charity Board and a member of the Board of Directors of The Charles Institute of Dermatology, at UCD. He also continues to play

an active role on a number of finance and investment committees in the not-for-profit sector.

Mary Rose Gearty

Mary Rose Gearty is a senior counsel, specialising in cases involving sexual offending, homicide and fraud. She is the Chairperson of the Professional Practices Committee of the Council of the Bar of Ireland. Mary Rose sits on the Examination Appeals Board at the Honorable Society of the King's Inns in Dublin, and is an elected Benchers of the Society.

Terry McWade

Terry McWade is CEO and Co-Founder of Valitacell, an early stage biotechnology company. Previous executive roles include Deputy CEO in the RCSI, Principle in the Boston Consulting Group (London), and CEO of Servier Laboratories (Denmark). Terry sits on the Board of the Institute of Banking, and on the Registration and Continuing Practice Committee and Audit Committee of the Medical Council. He was formerly Chair of the European Vaccine Initiative and Deputy Chair of the Dublin Dental Hospital.

Kay Connolly

Kay Connolly, RGN, MSc, Chief Operating Officer, St. Vincent's University Hospital. As COO, she is

responsible for strategic management and operational performance across the organisation. Ms. Connolly is accountable for the organisational performance of the hospital and ensuring the objectives of her role and vision for success are aligned to international and national best practice and guidelines. She provides leadership, management, clinical expertise and support across the organisation and works collaboratively, constructively and respectfully with the CEO and the executive management team in implementing the hospitals strategic and operational objectives.

Sean Dorgan

Sean Dorgan was previously Chairman of Ulster Bank Group, Tesco Ireland, Dublin Institute of Technology and Irish Management Institute (IMI); he was also Secretary General of two Government Departments, and CEO of Chartered Accountants Ireland and of IDA Ireland. He is Chairperson of Wicklow Hospice Foundation and a board member of the Irish Cancer Society.

Helen Nolan

Company Secretary since 2017.

Helen Nolan is Secretary to the board of Bank of Ireland Group since 2009. She has senior executive

Board meetings 2019

The Board scheduled six meetings in 2019 including the AGM on 17th June. This table shows attendance at Board meetings during the year:

Name	Appointed	Retiring	Eligible for Reappointment	Board Attendance
Brian Murray	2011*	2021	No	6/6
Stephen Walsh	2013*	2021	No	6/6
Mary Rose Gearty	2014	2020	No	5/6
Terry McWade	2017	2022	Yes	3/6
Kay Connolly	2017	2022	Yes	5/6
Sean Dorgan	2017	2022	Yes	6/6
Helen Nolan	2017	2022	Yes	5/6
Eugene Murray	2017	2022	Yes	4/6
Carole Pollard	2018	2023	Yes	4/6
Pat Costello	2018	2023	Yes	4/6
Dr Brendan Clune	2013	Retired June 2019	Yes	3/3
Dr Philip Wiehe	November 2019	2024	Yes	1/1
Lorcan Birthistle	November 2019	2024	Yes	1/1

experience as Head of Internal Audit and Head of Finance in banking and insurance roles. Helen is responsible for all aspects of board and corporate governance, has senior executive experience in successful banking and life assurance businesses and has led the development and implementation of the investment strategy for the Bank's main DB Pension Fund. Helen has extensive audit and accounting experience, and has Chaired the Audit Committee of the Department of Agriculture for six years.

Eugene Murray

Eugene Murray is former CEO of the Irish Hospice Foundation; he is a member of the board of St Luke's Hospital; member of various national health councils, committees and forums; in RTE, he was a member of the Executive Board, Director of Business Planning and Head of Television Current Affairs.

Carole Pollard

Carole Pollard is a registered architect and Past President of the Royal Institute of Architects in Ireland 2016-2017. She was a member of the RIAI Governance Review Steering Committee and as President was responsible for implementing new governance structures. Carole's practice includes teaching, writing and research work in the area of architecture and design, and she is an advocate for excellence in the built environment.

Pat Costello

Following a successful military career with the Irish Defence Forces, Pat went on to gain a range of experience in leadership roles in Ireland and internationally. Pat was CEO of Irish Tax Institute and recently retired from his role as CEO at Chartered Accountants Ireland after 13 years. He is currently on the board of the Policing Authority and has been part of the GAA Audit Committee.

Dr Brendan Clune

Dr Brendan Clune has been working as a general practitioner in Ranelagh, Dublin 6 for over 25 years. He retired from the Board of Directors in 2019.

Dr Philip Wiehe

Dr Philip Wiehe is a practising General Practitioner for the past 35 years at Sundrive Medical Centre. Appointed GP Unit Doctor with the HSE from 1998 to 2003. Programme Director of HSE mid-Leinster GP training programme from 2003 to 2011. Currently GP Trainer with North Dublin GP Training Programme since 2013. Past member of Spirasi Board 2010 -2017.

Current member of Safetynet Board. Member of Irish and Royal Colleges of general Practice.

Lorcan Birthistle

Mr Birthistle is Chief Executive of St. James's Hospital, Ireland's largest acute teaching hospital. He was previously Chief Executive of Our Lady's Children's Hospital Crumlin and St. Luke's Hospital in Rathgar. Lorcan is a graduate of the National College of Industrial Relations and Trinity College Dublin. He is Vice President of the Health Management Institute of Ireland and is a member of the Scientific Committee of the European Association of Hospital Managers. He is also a member of the governing Boards of the Trinity Translational Medicine Institute and the Wellcome Trust / Health Research Board Clinical Research Facility at St. James's Hospital.

Directors Recruitment and Training

Members of the Board of Directors are recruited for their skills and expertise aligning to the evolving needs of the organisation. A skills matrix is in place to assist the Nominations Committee in assessing and evaluating potential new members according to the skills required. New members are reviewed by the Nominations Committee in terms of the skillsets required by the Board as well as the need for diversity amongst Board members.

All new Directors are offered a comprehensive induction and orientation process with the Board Chair and the CEO to understand the breadth of OLH&CS' work as well as local inductions with the Senior Management Team. This includes notification of their responsibilities as Company Directors. There is an annual Board strategy 'away day' and Directors regularly attend important public events at the hospice to demonstrate their support for the organisation and staff. In 2019, in-house training was also delivered in relation to the Governance Code developed by the Charities Regulatory Authority.

Board Sub-Committees

To support its governance activities the Board has established a number of sub-committees, who provide specialist advice and report directly to the Board. Each of the eight committees has its own terms of reference and its members serve in a voluntary capacity. Each committee is Chaired by a Board Director and includes external experts who offer their time and expertise in a voluntary capacity (indicated with an * as below) and senior hospice staff.

New Sub-Committee members undergo a comprehensive induction process with the CEO and local inductions with the Senior Management Team as appropriate. All new members of Sub-Committees are recruited for their skills and expertise aligning to the organisation's needs.

The sub-committees of the Board are as follows:

Committee Name	No. of meetings in 2019	Chaired by board member (attendance shown in brackets)
Mission	4	Kay Connolly, Chair (4) Mary Sheridan, Service User Rep Carolyn Roe, Residents' Committee Rep OLH&CS staff
Education and Research	3	Terry McWade, Chair (3) Claire Corish* (3) Professor David Jacobsen* (0/2, resigned June 2019) OLH&CS staff
Audit & Finance	4	Helen Nolan, (Chair) (4) Stephen Walsh (3) Pat Costello (4) Derek Staveley* (2/2) Hilary Coates* (2/2) OLH&CS staff
Clinical Governance	3	Dr. Brendan Clune, Chair (3) replaced by Eugene Murray* (3) Aidan Mahony* (3) Cathy Doyle* (3) Pauline Newnham* (0) Mary Connolly (AON) (1/1) OLH&CS staff
Fundraising	5	Stephen Walsh, Chair (5) Mary Rose Gearty (0) David Strahan (4) OLH&CS staff
Capital	4	Carole Pollard, Chair (4) Sean Benton* (4) OLH&CS staff
Nominations	2	Brian Murray, Chair (2) All Board of Directors are members
Remuneration	2	Sean Dorgan (Chair) (2) Ian Maguire* (2) OLH&CS staff

Decision-making

The Board of Directors approve strategy, structure, annual plans and budgets to ensure the organisation is effective, transparent, accountable and achieving its organisational goals.

The Board of Directors appoints the CEO who delegates responsibility to the Senior Management Team to develop operational policy. OLH&CS has an overarching strategic plan (2017-2022) as well as

departmental implementation plans to ensure progress of corporate objectives.

Regular progress reports are provided by the Senior Management Team to Board Sub-Committees and at Board meetings.

Senior Management Team

The senior management team is made up of the CEO - Audrey Houlihan; Head of Finance - Simon Costello; Director of Nursing, Quality & Clinical Services - Mary Flanagan; Medical Director - Dr Stephen Higgins; Capital Developments Manager and Interim Head of Non Clinical Services - Tommy Beatty; Head of HR - Mary Kirwan and Director of Fundraising and Communications - Eleanor Flew. The Director of Education & Research - Patricia Hallahan retired in 2019.

Governance and Compliance

OLH&CS is committed to working towards compliance with all relevant legislation, regulation and statutory obligations and will continue to develop to enable this. OLH&CS subscribes to the following:

- Directors Compliance Statement (Companies Act)
- Code of Governance for state bodies
- The Health Services Executive Compliance Statement

We return an annual compliance statement to our funder - the Health Service Executive (HSE) and are fully committed to addressing any compliance matters raised in our response.

OLH&CS is also committed to the Governance Code of the Charities Regulatory Authority. Throughout 2019, the organisation worked towards compliance with this code, which was achieved by year end and approved by the Board.

Furthermore, OLH&CS is committed to the Charities Regulator's 'Guidelines for Charitable Organisations on Fundraising from the Public.' We ensure that we are accountable and transparent so that all donors have full confidence in the manner in which we run our organisation and fundraising practices. Our Donor Charter, featured in this report, and on our website, details this commitment.

Conflicts of Interest

OLH&CS has a Directors and staff 'Code of Standards and Behaviours' policy that outlines how we manage conflicts of interest / loyalty and we maintain a Conflict of Interest Register pertaining to both Directors and Senior Management Team.

At OLH&CS Board meetings, conflicts of interest / loyalties are declared, if applicable, at the start of each meeting. Should a matter relating to the interests of a Director arise, they will absent themselves when the Board is deliberating or deciding on a matter in which the Director or a person or body connected with the Director has an interest. Board documents that relate to any dealings with the above interests are not be made available to the Board member concerned prior to a decision being taken. Decisions once taken should be notified to the Director.

Risk Management and Internal Control

There is a three line approach to internal control at OLH&CS. The first line is represented the policies, processes and procedures for the management of operations. The second line is the risk management process that seeks to identify gaps or potential areas of exposure. The third line is the internal audit function, which independently monitors these first two lines. OLH&CS has established a comprehensive risk management process, which seeks to ensure responsible staff within the organisation identify, manage and mitigate risks in line with the OLH&CS risk framework. This risk management process is an integral part of OLH&CS governance and management system. Risks are regularly discussed and assessed at all levels in the organisation and are reported to the Board of Directors as appropriate.

Internal Audit

OLH&CS has a dedicated Internal Audit Unit function that is outsourced independently to Mazars Ireland. This function was launched in 2017 and an annual Audit Schedule is in place under the auspices of the Audit & Finance Committee. The Internal auditors are charged with ensuring that corporate processes and associated controls are functioning as intended. They also determine if a process could be improved and provides value for money or could become more efficient.

In 2019, OLH&CS underwent a number of internal audits, as follows:

- IT Security Framework
- Corporate Governance Review (High Level)
- Key Internal Financial Controls

Progress on completion of recommendations resulting from the Internal Audits are monitored and overseen by the Audit & Finance Committee.

Principal Risks and Uncertainties

The Directors, in conjunction with the senior management team, follow a process to manage the risks to which the company is exposed. They particularly concern themselves with operational and financial risks. They are satisfied that appropriate systems are in place to mitigate against these risks, and limit exposure. Risks are identified and ranked in terms of potential impact, as well as the company's risk control measures. Major risks are those which may have an impact on operational performance, financial sustainability, achievement of aims and objectives and meeting expectations of our patients, funders and supporters.

The principal risks and uncertainties that the company faces are:

- Clinical risks to patients under our care, either as inpatients or in their usual home environment: These risks are mitigated by the use of appropriately qualified and trained clinical staff, working within safe systems of care, having appropriate equipment which reduces risk, such as automated equipment to prevent human error, having appropriate policies and procedures in place and our incident reporting system which includes reporting near misses so that future incidents can be prevented. We have adequate cover in place for public and clinician liability under State Claims agency and Clinical Indemnity schemes.
- Failure to comply with Statutory/ Regulatory Requirements: The company is subject to stringent regulations in areas such as staff competency, staffing levels, health & safety matters and has appropriate processes in place to monitor adherence and compliance with legislation and regulations impacting on its operations.
- Financial dependency on the HSE: The company is dependent on the ongoing support of the HSE for



funding to deliver care services. Ongoing funding at an appropriate level is fundamental to the company's ability to continue as a going concern. It is company policy to mitigate this risk by developing ongoing relationships with the HSE and agreeing annually our Service Level Agreement.

- Lack of funding for future development of the campus: The company has ambitious plans to better utilise the space available on the campus and enhance patient care. There is a risk that insufficient funding will be available to complete the construction as set out in the Master Development Plan.
- Fundraising and Reputational Risk: The above development funding risk is linked to a general fundraising risk of potential lower donations or bequests which would impact on our ability to both carry out these developments and also to maintain the same levels of quality and service.
- General Data Protection Regulation: OLH&CS continue to implement GDPR regulations in an effort to achieve compliance. Risk assessments and risk minimisation actions are put in place to minimise areas of non-compliance and the Board are advised regularly on implementation progress and gap analysis.
- Insufficient funds to meet pension payments: The company is dependent on the Department of Health to continue to provide the funds required to pay current pension liabilities, under the VHSS, as they arise into the future. There have been no retirements to date from the Single Public Service Pension Scheme (SPSPS).
- COVID-19: The Directors have considered the negative impacts of the global COVID-19 virus pandemic on the company. There is a strong possibility that the company's main sources of income will be affected. This is covered in detail under Going Concern below.

Going Concern Note

The company's business activities, together with the factors likely to affect its future development, performance and position are set out in the Directors' report.

The financial statements have been prepared on the going concern basis. The company is dependent on the Health Service Executive (HSE) to fund its activities and

the ongoing support of the HSE at an appropriate level is fundamental to the company's ability to continue as a going concern. The HSE has not given any indication that it will withdraw its financial support from the company for the foreseeable future and has continued to provide funding for 2020. The HSE has indicated that funding will be available during 2020 at a level similar to that of 2019.

Subsequent to the financial year end, Ireland was impacted by the global COVID-19 virus pandemic. The Directors considered that the COVID-19 impact on the company, and given that the company's main sources of income were from the healthcare and fundraising activities, there is a strong possibility that the company's operation could be affected if its healthcare and fundraising activities are disrupted for a longer period due to the pandemic.

At the time of the reporting, the Directors could not estimate the exact impact on the company's operational and financial implications apart from declined fundraising income during the pandemic. These are unprecedented times and with the assumption that the pandemic will last for the duration of Q2 and into early Q3, there are a number of fundraising events and activities that will be directly impacted such as large national events like the *Women's Mini Marathon* and *Hospice Sunflower Days* as well local events such as *Little Flower of Life*. Furthermore, as social distancing and working from home is observed, community fundraisers and corporate events are also not taking place. Should normal activities resume mid Q3, there will likely be a nervousness in the public psyche around gatherings and fundraisers and therefore Q3/Q4 may also experience a significant decline in fundraised income. Of note, the two largest events of the year take place in the latter half of the year; *Ireland's Biggest Coffee Morning for Hospice Together with Bewley's* and our annual flagship in memory event *Light Up A Life*. Should both events take place, the fundraising marketplace will be extremely competitive as many events have been postponed to the end of the year. Income loss from campaigns and events and depending upon activity is estimated to be between 50% and 80%.

Funding pressures and breaking even on HSE funded activities remain a concern, coupled with an increased demand for the company's services. Management have reviewed the level of activity and costs of the

company and have drawn up plans to deal with the issues associated with the ongoing funding pressures. The company's current operating budget and forecast (assuming no reduction in HSE Funding) show that the company should be able to operate within its available funding for the foreseeable future (at least twelve months from the date of approval of these financial statements).

While the strong reserves position at year-end means that there is no immediate threat to the going concern status of OLH&CS, provision of services remains reliant on funding from the HSE continuing at the same or enhanced levels in the future.

After making due enquiries, the Directors have a reasonable expectation that the operating and capital budgets and plans will be achieved and that the company will have adequate resources and sufficient liquidity to continue to operate for the foreseeable future. On that basis, the Directors have continued to adopt the going concern basis of accounting in preparing these financial statements.

The ongoing support of the HSE at an appropriate level and the generosity of the public are fundamental to the achievement of these plans.

Administration details

Registered office

Our Lady's Hospice & Care Services, Harold's Cross Rd, Harold's Cross, Dublin 6W, D6W RY72

Company Registration Number 352404

Charity Number CHY 1144

Charity Registration Number RCN 20001827

Auditors

Deloitte Chartered Accountants and Statutory Audit Firm, Deloitte & Touche House,
Earlsfort Terrace, Dublin 2

Bankers

Bank of Ireland, 1 Rathfarnham Road, Terenure, Dublin 6

Solicitors

Woodcock Solicitors, 16 Clanwilliam Terrace, Grand Canal Quay,
Dublin 2

Beauchamps, Riverside Two, Sir John Rogerson's Quay, Dublin 2





IN THE WORDS OF FAMILIES WE WORK WITH



"The professionalism of all the staff in Blackrock Hospice during a stressful time made our stay with Dad a comfortable and stress-free time so we could all enjoy our final days with him. We thank you."

MF



"CRU, Harold's Cross, has been the most valuable intervention in my husband's quest to remain active and healthy. The staff are unquestionably the most diligent and caring I have ever come across. Thank you to all."

MM



"My mam who died...of dementia was so well looked after I minded her for four years at home. It gave me time to spend with her as a daughter, not as a carer. Fabulous people, all so kind and understanding, people who minded me as well. Thank you all."

PB



"I'm here in the rheumatology unit and I could not be treated any better if I had won the lotto. Fantastic facility and all the staff are so kind and helpful."

JA



"We would like to say thank you to all the staff and volunteers from OLH&CS for all the care, support and comfort you gave to all of us during the time Mam was there. You truly are amazing people for what you do and we will be forever grateful."

WF



"The staff are earth angels. They are totally amazing people, who not only take care of their patients, but the families too. We could never be able to thank them enough for the loving care they gave our beautiful mam who passed last January."

TG



"Amazing people who work here. They looked after our mam and us so well. We are forever grateful to them. My mam called them angels on earth and it's so true."

EW



"They were there to put our mind at ease.... They kept us two steps ahead of what was happening and we knew where we were going. I find it hard to put into words just how incredible the experience in the hospice is, to people who haven't actually been there."

CF



CEO'S REPORT

Audrey Houlihan
Chief Executive Officer

2019 was a successful and rewarding year for Our Lady's Hospice & Care Services. There were a number of positive developments made across our services, in terms of delivery and expansion, along with receiving awards from external groups in recognition of our efforts.

I acknowledge the immense dedication and hard work of all of the staff throughout this time and sincerely thank everyone for their commitment and co-operation with the many changes. Staff and volunteers are the heart of OLH&CS. They are at the forefront of all our achievements and the reason our work is celebrated.

Our volunteers' dedication, enthusiasm and hard work remind us all of the importance of community support. I would like to thank them most sincerely for their commitment to our work and our values on behalf of all staff, residents, patients and their families.

As with every healthcare setting, the year was not without its challenges with the on-going requirement to achieve cost savings and implementation of a robust cost-containment plan, while maintaining high quality across our services.

We commenced the year with a combined Board of Directors and Management Team Strategy Day in January. It focused on evaluating the progress towards our strategic goals and any emerging challenges. A summary of the implementation of these initiatives is on page 23 of the Annual Report.

The Strategic Plan was developed in line with the HSE Strategic Plan and Sláintecare action plan and implementation strategy. It was also underpinned by the National Palliative Care Development framework and Clinical Care Programme models of care for our services.

Finance

The HSE required a break-even position at the end of 2019. To achieve this, OLH&CS implemented cost-containment measures across pay and non-pay headings, resulting in savings of €1.1m. This helped to combat the continuing fall in private health insurance income, which was down more than €0.8m and also supported a HSE budget adjustment of €0.3m to our Nursing Home Support Scheme (Fair Deal) model of care.

Expenditure on healthcare activities for the year was €42.3m, a decrease of €0.5 million on 2018.. An increase of €1m relating to the implementation of various national pay restoration agreements was fully-funded by HSE. Pension lump sum payments also decreased by €0.4m on the prior year. Healthcare activities represent specialist Palliative Care, Community Reablement Unit (CRU), Care of Older Persons, Rheumatic &



Musculoskeletal Disease Unit (RMDU) and Education & Research. Similar to 2018, payroll costs accounted for 81% of total expenditure. Non-Pay expenditure was €7.9m (19% of total), which is a decrease of €0.3m on 2018 expenditure. The audited accounts are available for review on page 83.

Activity

Despite the cost savings, staff continued to deliver a high level of quality services in all areas. The numbers of patients being admitted continues to increase. The provision of respite care for patients with dementia has been in great demand and service expansion is being explored to meet the needs of our community. There is an increasing demand for in-patient care in Blackrock Hospice, and it is anticipated that this will be partly offset by the opening of Wicklow Hospice in 2020.

With over 1,500 patients seen by our Community Palliative Care Teams (CPCT) we are constantly looking at new ways of working to meet this demand and anticipated future growth. Through the support of patients and families in their home, the length of stay on the wards has reduced, thus facilitating a greater number of patients in both Harold's Cross and Blackrock Hospices in-patient units.

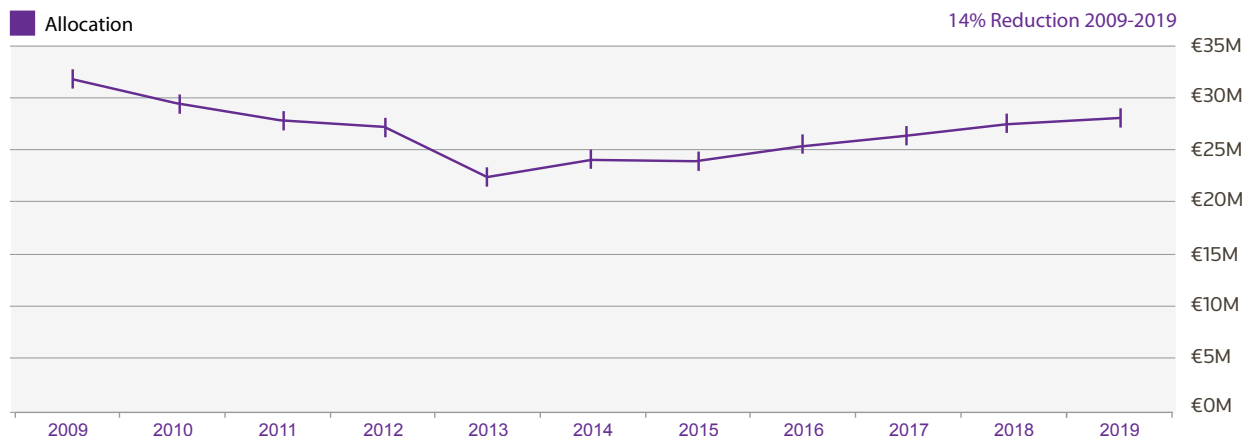
In May the Rheumatic Musculoskeletal Disease service (RMD) reconfigured its Day Case model to run a pilot patient-focused out-patient model, known as Rheumatology Interdisciplinary Outpatients (RIO). It has proven very successful with service users and is set to continue and grow into the future.

The Community Reablement Unit (CRU) relocated to the ground level from one of the wards from the original Hospice building in June. Both patients and staff are very happy in the new area, which gives direct access to the external courtyards and gardens, and provides more socialising space for patients. The model of care has also changed to focus on hospital admission avoidance and patients requiring a greater level of intense rehabilitation to facilitate earlier discharge.

An innovative new Post-Diagnostic Dementia Support Service was developed for individuals with a diagnosis of moderate dementia. This eight-week programme ran three times in 2019 to great success, and further programmes are scheduled for 2020.

A dementia-themed Health Information and Quality Authority (HIQA) inspection of Anna Gaynor House, the residential care centre for Older Persons, took place in February. Overall this was a good report, with minor issues raised, which were resolved immediately.

Core HSE Funding



The Rheumatic and Musculoskeletal Disease service (RMD) is also delighted that Dr Lorraine O'Neill joint the team as Consultant Rheumatologist, a joint post between Our Lady's Hospice & Care Services and St. Vincent's University Hospital.

Blackrock Hospice was successfully awarded HSE National Lottery funding to upgrade its two family overnight bedrooms. A refurbishment plan is being finalised to bring the patient accommodation standard to that of the new in-patient unit in Harold's Cross, and a design team has been appointed. The renovations also include specialist conservation work required for some stained glass windows.

In September, OLH&CS commenced discussions with the HSE to progress the planning of Wicklow Hospice's palliative care services. Discussions focused on staffing levels, funding requirements, fit-out of the facility and the integration of the existing Community Palliative Care Team. Discussions continue and it is expected to have due diligence

completed by early 2020. This will include the full transfer of the buildings and land from the Wicklow Hospice Foundation, further expanding the delivery of palliative care in-patient and community services under the governance of OLH&CS.

Schwartz Rounds are regular sessions where staff and volunteers meet to talk about the emotional aspects of their work – it provides a place to listen, share and support.

Feedback during 2019 shows that these sessions are held in great esteem and truly valued by attendees.

"Deeply moving, authentic. I leave today bringing some encouragement with me that I will keep in store and lean into on those days or parts of a day when I feel I have nothing to offer to this patient. If nothing else, I have the ability to be present with her/him and that may be enough."



Strategic Developments

The implementation of Sláintecare will impact on all of our services and it is important that OLH&CS works collaboratively with our funders and the Department of Health to address these changes. In July we met with the Department of Health to discuss its implementation across our services. An agreed priority was the immediate need to examine the current funding model for palliative care, as there is a huge reliance on fundraised income to support core services. In line with the Palliative Care Development Framework, the funding model and core costs for Palliative Care were reviewed in 2019.

An independent review of voluntary hospitals was commissioned by the Minister for Health in 2018, its report was completed in 2019 and we welcome its recommendations on future working arrangements and positioning of voluntary hospitals.

The Voluntary Hospice Group comprises 26 independent groups who have worked in partnership to advance the development of Palliative Care Services over many years. The focus in 2019 was the development of a national official fundraising group: Together for Hospice - the National Hospice Movement.

Over the last 29 years the group has raised approximately €55 million and during 2019 it raised over €2.8 million nationwide. Funds have contributed towards significant developments in the sector, with new hospice buildings recently completed in Kerry, Mayo and Waterford and Wicklow Hospice due to open shortly 2020. These developments are testament to the on-going support of local communities. Personally, it is an honour for me to have taken on the role as chairperson of its governance group and I thank Milford Care Centre's Pat Quinlan for his leadership and support.



Awards

During 2019 we were delighted to win four major awards. Three of the awards relate to the new Palliative Care Unit in Harold's Cross. Firstly the 'Building of the Year' award under the Medical & Health sector at the Building and Architect of the Year awards. Secondly, the 'Fit-out of the Year' in the Irish Building and Design Awards, and also the 'Healthcare Fundraising Initiative of the Year' at the Irish Healthcare Centre Awards. This is thanks to our supporters, who funded 100% of the building costs of the new unit or €13.6 million. OLH&CS was also awarded a Gold Active@Work Award by the Irish Heart Foundation for its efforts in promoting physical activity in the workplace.

Milestones

December 9th 2019 was the 140th anniversary of the opening of the Hospice in Harold's Cross. Thanks to the Religious Sisters of Charity, we have a very rich heritage to celebrate, and the event was commemorated by an exhibition of the history of the organisation incorporating social history and a number

of celebrations throughout the year. The exhibition proved so popular that it will remain in place, with updates as we continue to progress and develop over the years to come.

Thank you to all donors and supporters, many of whom have been inspired by their experience of the care we provide. Your generosity enables us to provide professional loving care to all who need it.

I would also like to thank my colleagues on the management team and the Board of Directors for their support and commitment to our vision.



We cared for over
4,000 patients in 2019

In-patient admissions to Our Lady's Hospice & Care Services 2019

Year	'15	'16	'17	'18	'19
Rheumatic and Musculoskeletal Disease Unit (RMDU)	730	772	851	806	799
Specialist Palliative Care Unit, Harold's Cross	610	618	603	596	621
Blackrock Hospice	165	165	198	204	238
Anna Gaynor House	48	59	100	163	176
Community Reablement Unit (CRU)	318	332	353	356	330

Total number of patients seen by Specialist Community Palliative Care Team

Year	'15	'16	'17	'18	'19
CPCT	1361	1449	1401	1499	1525

STRATEGIC PLAN 2017-2022

Since it was established over 140 years ago in 1879, OLH&CS has provided high quality and specialist care for those with a wide range of needs from rehabilitation to end-of-life care.

The biggest change we face now is the population that we serve. As people are living longer and have more complex care needs, end of life professionals must provide even more specialist facilities and services of the highest quality to meet these critical requirements. In response these challenges, and to drive the changes required to meet growing demand, we have developed a strategic plan to guide our work.

A Five Year Plan to Enhance Our Care 2017-2022 is the strategic framework within which we are operate. It is ambitious and progressive and strives to provide the best quality of life for our patients and residents. It set out to integrate our approach to the delivery of care across our three specialisms.

Our strategic plan was developed in line with best national and international practice and has four objectives:

1. Be a leader in providing quality and safe services, make a difference to patients and families and build upon our reputation for excellence
2. Commit to developing and continually improving our clinical and corporate infrastructure and process
3. Ensure strong clinical and corporate governance to deliver high quality, safe care and demonstrate effective stewardship of public funds
4. Embrace a system-wide perspective, working closely with partners, patients/residents and healthcare staff to help meet growing demand

These objectives combine immediate priorities with on-going and future requirements responding to the changing models of health care delivery. They are influenced by the wider healthcare context and factors likely to affect future demand and funding including: population and demographic changes, policy developments, the increasing prevalence of disease and patient preferences.

We made strong progress on the delivery of our objectives during 2019 and the tables below highlight some of our key achievements.

Strategic Objective One:

Be a leader in providing quality and safe services, make a difference to patients and families and build upon our reputation for excellence

Service Area	2017-2022 Priorities	2019 Key Actions	2019 Key Outcomes
Specialist Palliative Care	<ul style="list-style-type: none">Review of services ensuring alignment with National Clinical Care Programme, HSE Development Framework and Commissioning Model and Sláintecare	<ul style="list-style-type: none">OLH&CS to take on the governance of Wicklow Hospice in-patient and community services	<ul style="list-style-type: none">Comprehensive planning to progress the clinical, corporate governance and staffing requirements to enable the transfer of Wicklow Hospice to OLH&CS
Human Resources	<ul style="list-style-type: none">Workforce planning	<ul style="list-style-type: none">Review of workforce planning provisions	<ul style="list-style-type: none">Succession planning introduced to maximise potential and help identify training gapsNew focus on digital networking resulted in significant cost savings
Fundraising and Communications	<ul style="list-style-type: none">Awareness and profile140th anniversary	<ul style="list-style-type: none">Build upon our reputation and profile and position OLH&CS as a centre of excellenceCelebrate 140th anniversary	<ul style="list-style-type: none">Significant media coverage achieved throughout 2019 highlighted OLH&CS' clinical expertise140th anniversary was marked with the launch of a timeline exhibition that has become a permanent feature



Strategic Objective Two:

Commit to developing and continually improving our clinical and corporate infrastructure and process

Service Area	2017-2022 Priorities	2019 Key Actions	2019 Key Outcomes
Specialist Palliative Care	<ul style="list-style-type: none"> Service review 	<ul style="list-style-type: none"> CPCT (Community Palliative Care Team) referrals triaged and directed to most appropriate services e.g. OPD (Out-Patient Day Service) Service evaluation of breathlessness support service Engaged with Clinical programme in review of palliative care day services 	<ul style="list-style-type: none"> Central triage of referrals established and increased numbers of assessments carried out in OPD Evaluation of service commenced in partnership with Trinity College Dublin National review of day services chaired by Assistant Director of Nursing (ADON) and active participation by multi-disciplinary team.
Human Resources	<ul style="list-style-type: none"> Review learning, training and development opportunities within the organisation 	<ul style="list-style-type: none"> Enhance our learning, training and development opportunities for all grades / disciplines Enhance staff engagement 	<ul style="list-style-type: none"> Investment in in-house training included enhancements of the on-line system and a new dedicated training space in Harold's Cross To promote staff development, training needs analyses were completed in: Nursing, Clinical Services and Non-Clinical Services and developments were made in the Staff Mentoring programme Training courses were developed for non-clinical staff (QQI level 5) and a Leadership Course (QQI Level 6) Both courses were designed in conjunction with Tallaght Training Centre and were open to staff from other healthcare organisations Planning for a staff survey due to roll out in 2020 Mission Committee ensured that our mission and our core values were translated into every aspect of the organisation through groups such as Staff Council, Employee Wellbeing Group, Diversity Group and Residents' Forum Full calendar of initiatives to promote and integrate health and well-being, diversity, and the work of the Staff Council and Residents' Forum. Awarded the Gold Standard Active@Work Award from the Irish Heart Foundation Promotion and support of diversity through promotion on creating change through education, collaboration and vigilance, e.g. attendance at Pride Parade
Fundraising and Communications	<ul style="list-style-type: none"> Sustainability in fundraised income Integration with Wicklow Hospice 	<ul style="list-style-type: none"> Ensure a sustainable model of fundraising Develop a structure for the integration of fundraising and communications with Wicklow Hospice 	<ul style="list-style-type: none"> The fundraising case for support constantly evolves in line with organisational requirements, capital and fundraising priorities ensuring sustainability in fundraised income. In 2019, the focus was the refurbishment of the specialist palliative care unit in Blackrock due to commence in 2020 Comprehensive donor analytics and mapping project was completed including a donor survey to review our recruitment, stewardship and retention of donors with a view to improving our donor communications Detailed planning took place in preparation for the official opening of Wicklow Hospice in Q1 2020 and the integration of fundraising and communications across our three sites

Strategic Objective Three:

Ensure strong clinical and corporate governance to deliver high quality, safe care and demonstrate effective stewardship of public funds

Service Area	2017-2022 Priorities	2019 Key Actions	2019 Key Outcomes
Specialist Palliative Care	<ul style="list-style-type: none"> Review of services ensuring alignment with National Clinical Care Programmes, HSE Development Framework and Commissioning Model and Sláintecare 	<ul style="list-style-type: none"> Adopt Palliative Care Outcome Collaboration assessment tool (PCOC) to measure clinical outcomes 	<ul style="list-style-type: none"> PCOC launched successfully across both sites in 2019. We are working closely with partners in Australia to analyse data and benchmark patient outcomes so we can continually improve our practice
Older Persons Service – Anna Gaynor House Residential Unit	<ul style="list-style-type: none"> Review of services ensuring alignment with cost of care and the needs of the community 	<ul style="list-style-type: none"> Review model of care to ensure appropriate patient profile, patient flow improvements and cost efficiencies 	<ul style="list-style-type: none"> Following a model review a new model of care was introduced ensuring that we admit the most appropriate residents for our specialist care. This clarity has improved patient flow and has resulted in more residents availing of our residential service
Fundraising and Communications	<ul style="list-style-type: none"> Compliance with new Charities Regulator's Code 	<ul style="list-style-type: none"> Work to achieve full compliance with the Charities Regulator's new <i>Charities Governance Code</i> 	<ul style="list-style-type: none"> Compliance with the code was achieved by year-end
Finance	<ul style="list-style-type: none"> Model review Funding 	<ul style="list-style-type: none"> Support proposed service restructures, following model of care reviews across clinical specialities, incorporating cost of care and manpower planning Review the impact of private income as a source of funding 	<ul style="list-style-type: none"> Significant progress achieved in cost-containment Private income review complete with gaps identified. Plans in place to address specific gaps with a further review currently underway in order to address the remaining gaps



Strategic Objective Four:

Embrace a system-wide perspective, working closely with partners, patients/ residents and healthcare staff to help meet growing demand

Service Area	2017-2022 Priorities	2019 Key Actions	2019 Key Outcomes
Older Persons Service – Community Reablement Unit (CRU)	<ul style="list-style-type: none"> Review of services ensuring alignment with cost of care and needs of community 	<ul style="list-style-type: none"> Present proposal for new model of care inclusive of step down / step up rehabilitation unit to HSE Work with existing and new partners to create new pathways for people to access our care e.g. St. James's University Hospital (SJUH), Tallaght University Hospital and integrated care teams such as Home First, Teiripe Sa Bhaile (Early supportive discharge service) and Robert Mayne Day Hospital Develop proposal to provide access to a Parkinson's Disease service in response to unmet need in the community 	<ul style="list-style-type: none"> CRU successfully relocated to a newly refurbished and more appropriate ground floor location operating with 18 beds Working with partners, we focused on developing pathways facilitating the avoidance of admissions to acute hospitals as well as enabling discharge from acute care. This was achieved with additional consultant time with direct links to Teiripe sa Bhaile (TsaB). Direct referrals were received from neurology in SJUH, Robert Mayne Day Hospital, Home First ED team CRU forms an important part of the patient pathway for the new Parkinson's disease service in SJUH On-going developments made to increase training in movement disorders
Specialist Palliative Care	<ul style="list-style-type: none"> Review of services ensuring alignment with National Clinical Care Programme, HSE Development Framework and Commissioning Model and Sláintecare 	<ul style="list-style-type: none"> Adapt community services to reflect growing demands moving towards more out-patient clinics 	<ul style="list-style-type: none"> Substantial changes were made to the referral triaging process resulting in increased out-patient activity on both sites. Patients now have greater access to Clinical Nurse Specialist (CNS) clinics on site for initial assessment and review
Rheumatic and Musculoskeletal Disease Unit (RMDU)	<ul style="list-style-type: none"> Review of services ensuring alignment with National Clinical Care Programme and Sláintecare 	<ul style="list-style-type: none"> Develop patient pathways for Fibromyalgia / Gout / Reproductive Health Clinics from In-Patient, Day Service to Out-Patient, in line with National Clinical Care Programme to meet unmet demands in an appropriate care setting Review five day model and improve access for patients with complex needs 	<ul style="list-style-type: none"> New interdisciplinary out-patient (RIO) Service commenced in 2019 The Advanced Nurse Practitioner (ANP) led Gout and Maternal Medicine Services are now recorded and operational on the Patient Administration System (PAS) A review of the acute and community access pathways was also completed working closely with St. Vincent's Hospital
Fundraising and Communications	<ul style="list-style-type: none"> Development of the national fundraising movement 	<ul style="list-style-type: none"> Work with other hospice movement members to develop 'Support Your Local Hospice' to become a national hospice movement supporting local hospices 	<ul style="list-style-type: none"> OLH&CS supported the transformation of 'Support Your Local Hospice' to become 'Together for Hospice.' It aligns participating hospices under the official national umbrella brand to fundraise for specialist palliative inpatient and community services.
Non-Clinical Services	<ul style="list-style-type: none"> Service Integration Environmental 	<ul style="list-style-type: none"> Integrate new site in Wicklow into organisation Reduces carbon footprint where possible 	<ul style="list-style-type: none"> Support was provided to the Wicklow Hospice Foundation during 2019 as its build and fit-out progressed. The Hospice will transfer to OLH&CS in 2020 All refurbishment projects upgraded to LED lighting Staff Council oversaw awareness programmes promoting energy efficiencies and waste management initiatives
ICT	<ul style="list-style-type: none"> Telephony, IT integration and connectivity 	<ul style="list-style-type: none"> Review and implement communication tools for staff across both sites Offer secure remote working solutions 	<ul style="list-style-type: none"> A major IT security review and update took place with new policies reflecting new work practices Installation of new remote desktop services for staff Palliative Care Outcome Collaboration assessment tool (PCOC, for palliative care) successfully installed across the organisation New staff portal and 'ticker tape' system launched Dedicated in-house training space launched Other improvements include: Wi-Fi strength, upgrades to ICT in meetings rooms and PC renewal programme completed





NURSING, QUALITY AND CLINICAL SERVICES REPORT

Mary Flanagan

Director of Nursing, Quality and Clinical Services

In the year the year that OLH&CS celebrated 140 years of providing high quality, person-centred health and social care services, it gives me great pleasure to present the annual report on behalf of the nursing and clinical services team who continue this mission as they go about their day to day work.

Nursing

Across the year we have had much to celebrate. The Community Reablement Unit (CRU) was relocated and now provides an enhanced environment for the patients and their families.

A number of our services were strengthened and developed to ensure we can provide more comprehensive and integrated care aligning with the vision of the national programme, Sláintecare, to transform our health and social care services. For example The Rheumatic and Musculoskeletal Disease Unit (RMDU) has introduced a new service, Rheumatology Integrated Out-patients (RIO) as well as establishing an Advanced Nurse Practitioner-led gout service and our palliative care team's new breathlessness service.

We continued to create opportunities by exploring new partnerships across the healthcare system for the benefit of the population we serve. This includes linking with academic partners and advocacy organisations such as the Alzheimer's Society and the All Ireland Institute for Hospice and Palliative Care (AIHPC).

To ensure that we had the right staff with the right skills to meet our residents' and patients' needs, we reconfigured some roles and departments across nursing and support services. This included the creation of new roles such as: an activities coordinator working with residents in Anna Gaynor House and a candidate Advanced Nurse Practitioner in Older Persons Services (CANP) who will develop services to support and guide older people in the management of their care while living in the community. We also undertook a review of the structures in patient services to see where processes could be improved.

It is down to our staff that we reflect positively on the year. Their sheer hard work and determination to give every patient the best quality care is exceptional. Of course, we had some challenges, which included a nurse strike in early 2019 and a significant reduction in our HSE allocated budget. Our team responded collectively to these challenges and identified a number of efficiencies, including a review of skills mix, without compromising patient care.

By continuing to invest in staff training and clinical leadership we build on our high-quality

services and ensure we have a skilled workforce to respond to ever-changing needs and demands. The clinical and education team delivered training on the National Frailty Education Programme and developed Continuing Professional Development modules (CPD) in our Older Persons and Rheumatology units in partnership with University College Dublin (UCD).

We were supported by the HSE's Office of the Nursing and Midwifery (ONMSD) to implement clinical supervision for our community palliative care nurse specialists and we partnered with Human Resources Services to put in place a mentoring programme. This recognises the need for all staff to feel motivated, valued and supported with high quality training.

Many of the team presented at conferences both nationally and internationally during the year, either in oral or poster presentations. One of the Assistant Directors of Nursing completed the leadership programme at the European Palliative Care Academy (EUPCA).

Quality & Safety Committee (Q&S)

The Quality & Safety Committee (Q&S) is made up of a number of a cross representation of staff within OLH&CS. The committee has oversight of performance measurement under a range of headings: Local Risk Registers; Healthcare Associated Infection Surveillance Report; Tissue Viability Surveillance Report; Incident Analysis; Mandatory Training Report and Nursing Quality Care Metrics. The committee met on seven occasions and had two virtual meetings in 2019.

Six sub-committees report into Q&S and staff engaged in quality improvement initiatives are invited to attend and present their work. Its objectives are to implement a Quality & Risk management function and to steer accountability in line with our emerging clinical governance agenda.

Quality improvement initiatives included: work led by the food services group (later renamed IDDSI to support the introduction of the International Dysphagia Diet Standardisation initiative), the implementation of palliative care outcomes (PCOC) clinical assessment tools and "bare below the wrist" as an infection control strategy were presented. Opportunities for lessons learned were discussed and cascaded throughout the organisation to prevent future recurrence.

Throughout 2019 OLH&CS had a number of external visits including: Health Information and Quality Authority (HIQA) who conducted a dementia thematic inspection; dangerous goods audits and the environmental health officer visited both sites. In September, the Health and Safety Authority (HSA) completed an inspection focusing on manual handling and behaviours that challenge. New educational programmes were identified and staff were trained to deliver 'open disclosure' training across the services. Four staff were trained to carry out 'after-action reviews'.

Preparation began for the commencement of a programme of monitoring in rehabilitation and community in-patient healthcare services by HIQA (against the National Standards for Safer Better Healthcare). The Practice Development & Quality Coordinator joined the Voluntary Healthcare Agencies Risk Management Forum (VHARMF) Risk Managers Advisory Group on a site visit to NHS Salford in 2019.

Clinical Services

Complementary & Creative Art Therapy (CCAT)

Touch and Creative Art Therapies continue to be an important element of the holistic, person-centred care provided to the patients and residents of OLH&CS. There was a 20% increase in activity from the previous year, which corresponds with increased activity in the in-patient palliative care unit, Anna Gaynor House and the provision of more out-patient services to Community Palliative Care patients.

The Music and Art Therapists each facilitate valuable placements for MSc Music (University of Limerick) and Art therapy (Cork Institute of Technology/ University College Cork) students. During 2019, we revisited the specialist care volunteer programme for complementary therapists as our volunteer team had contracted over time to just one therapist. As a result we plan to expand this service next year.

Two team members completed Train the Trainer courses in 2019 and are preparing to train OLH&CS care staff in simple touch therapy techniques. This will improve resident and patient access to simple, relaxing and calming activities when they are most needed. The complementary therapists contributed to carers' events in both Blackrock and Harold's Cross.

The team contributed to the life of OLH&CS by participation in a variety of committees, interest

and working groups as well as delivering a variety of education activities for under graduate and postgraduate healthcare students.

Occupational Therapy

Throughout 2019, the Occupational Therapy team focused on key service developments and quality improvement initiatives in line with OLG&CS strategic objectives.

The Cognitive Stimulation Therapy (CST) out-patient group for individuals with a diagnosis of moderate dementia was established at the beginning of 2019 to better meet the growing needs of people with dementia living in our community. This new service initiative and subsequent audit of the 2019 CST groups is under the remit of our newly appointment Interim Clinical Specialist Occupational Therapist (Dec 2019) with positive feedback and trends towards improvement in quality of life and memory performance on outcome measures.

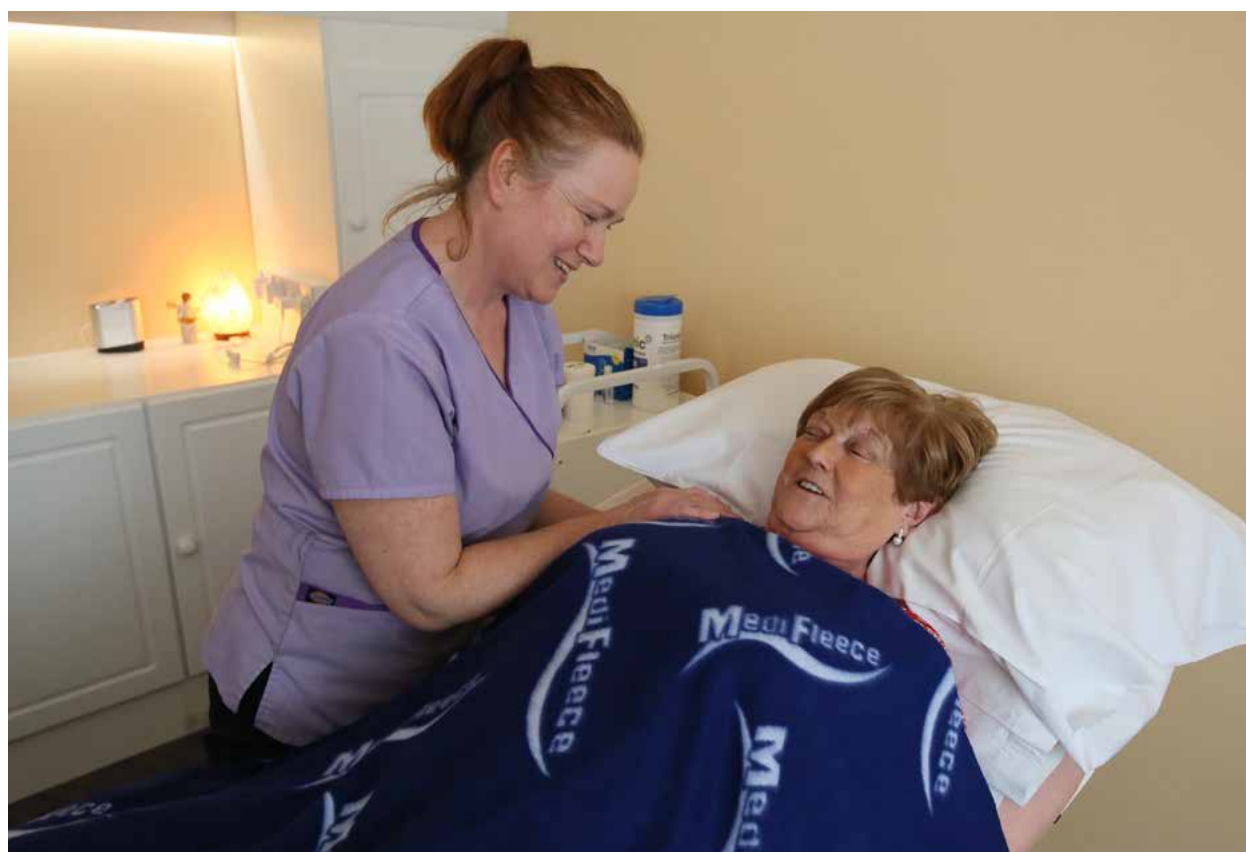
Cost containment measures brought challenges with a reduction in staffing in Anna Gaynor House. However, the roll out of the Occupational Therapy referral pathway in July ensured timely access to our service for residents based on safety and need. Significant

changes to our therapeutic group work in AGH were made and a focus was given to groups including Lifestyle Matters, Cognitive Stimulation Therapy, Reminiscence and Occupation Focused groups, which require an Occupational Therapist to facilitate them.

In addition, our Older Persons team contributed to the Dementia Champions Group, collaborated in the ward Safety Huddle; worked with the Multisensory Project to prepare teams and maximise the use of the multisensory room for patients; contributed to a national e-learning programme for the Dementia Services Information and Development Centre (DSIDC) and supported an Irish Longitudinal Study on Ageing (TILDA) and National Clinical Programme for Older People (NCPOP) training initiative on frailty.

In RMDU, our team contributed to the roll out of the new Rheumatology Interdisciplinary Out-Patient (RIO) service and is preparing to participate in a study on the Effectiveness of Fatigue and Activity Management in Work (FAME-W) Intervention. The team also continued to provide its Lifestyle Management group (LMAG) to educate patients on managing their condition.

Supporting integrated partnerships with primary care remained a priority, with engagement in Project



Echo and the Community Integration project with Dublin South West and Dublin South East by our Palliative Care Teams. We contributed to the pilot of the Multidisciplinary Breathlessness Support Service (MBSS) offering brief intervention breathlessness strategies alongside our ANP and Physiotherapy colleagues. We also represented OLH&CS (HX) on the National Palliative Day Model review group and supported carers education evenings at Blackrock Hospice.

Clinical audit was a service-wide goal and audits supported include Cognitive Impairment Pathway compliance; CST group audit; Professional Supervision audit; Documentation compliance; Clinical Competency Frameworks and Splinting SOPs to standardise practice and optimise patient safety.

OT and Physiotherapy tutors co-ordinated two inter-professional learning tutorials for third and fourth year placements. The OT tutor was involved in delivering Practice Education Study days in TCD as well as practice education developments to meet standards for CORU (Health & Social Care Professionals Council) regulation.

Twelve undergraduate OT students completed practice education placements. Ten Singaporean OT students visited OLH&CS as part of their one year degree programme.

Involvement with the National OT Practice Education Network continued this year.

Social Work

Social work practice is based on respect for the inherent worth and dignity of all people and takes a holistic view in our work with people. This aligns with the core values and mission of OLH&CS and guides the range of interventions we provide for patients, residents and their families during the course of illness and in bereavement.

During 2019, the social work team continued to develop creative and innovative approaches to meet the diverse needs of our clients. Group-work for both carers and bereaved parents, which commenced as a pilot project in 2018, was consolidated and is now an established and valued practice in OLH&CS.

Integrated work and teamwork was also to the forefront with training events for social workers and

Bereavement Support Service volunteers. Arising from this, high morale and enhanced practice was notable, which translates into high quality service provision for our clients. Service-user feedback continued to show appreciation and satisfaction with the psychosocial support received.

Another immensely successfully children's bereavement weekend was facilitated in March for 28 children whose parent or grandparent had died. The contribution from the Bereavement Support Service volunteers is significant in enabling us to provide this valued weekend annually.

This year, in recognition that Christmas can be a particularly difficult time for newly-bereaved people, we organised a Blue Christmas event. This provided a supportive environment where challenges were acknowledged and normalised. It also assisted with identifying and developing coping strategies. As part of the event, bereaved children attended their own event and returned to their parent for the lighting of the Blue Christmas tree. The feedback from the attendees was very positive.

Tusla continued to support our bereavement work this year though its annual grant.

The social work team contributed to staff support and education through initiatives at ward and organisational level throughout the year. Ensuring maintenance of high standards of compliance with relevant legislation continues to be a significant aspect of the work of the social work dept.

At national level, social workers represented OLH&CS and, as members of the Hospice & Palliative Care Social Workers group, contributed to the development of evidence-informed guidance for delivering bereavement care services to families of patients with a life limiting illness.

Speech and Language Therapy

The Speech and Language Therapy department continued to support patients and residents with swallowing and communication disorders throughout 2019.

The complexity of residents' needs across Anna Gaynor House resulted in high numbers of referrals throughout the year. Referrals in the Specialist Palliative Care Unit increased by more than 20% on the previous twelve



months due to the expanding profile of Speech and Language Therapy in this area.

Aligning with the strategic plan, the Speech and Language Therapy department was heavily involved in introducing the International Dysphagia Diet Standardisation Initiative (IDDSI) in OLH&CS. The team will continue to focus on IDDSI in 2020 to facilitate phase two of this project. The department was involved in a project with the MSc Dietetic students exploring patient/resident satisfaction with meals. The involvement of Speech and Language Therapy enabled patients/residents with communication impairments to provide their views. This valuable information will support our continued efforts to improve the choice, taste and presentation of dishes on the menu, especially for those with swallowing difficulties.

The department continued to fulfil its commitment to education and training in 2019, providing ongoing rolling input into study days for *Nutrition & Hydration and Enhancing & Enabling Well-Being for the Person with Dementia* alongside multidisciplinary colleagues. The department was also involved in an information evening for families of people with dementia, as part of the Dementia Champions Group. Aligning with the strategic plan to engage in education and research, the Senior Speech and Language Therapist (SLT) successfully completed a Masters in Palliative Care in Trinity College Dublin and presented her research findings at Grand Rounds in 2019. The Senior SLT also commenced lecturing on the role of Speech and Language Therapy in Palliative Care to MSc students in Trinity College Dublin.

Physiotherapy

Change was the order of the day across all units in 2019.

CRU's move to new accommodation and an increasingly complex patient population resulted in changes in work practices, with more individual treatments and sharing gym space with the Palliative Care Unit (PCU).

The provision of physiotherapy services in AGH was reviewed in light of the focus on cost of care and a referral system was instituted. A number of new services were introduced to make more efficient use of available resources.

By amending schedules at the RMDU gym and for aquatic physiotherapy we have facilitated sessions and more targeted interventions in line with the promotion of self-management for those with chronic diseases.

The palliative care physiotherapy service leveraged stronger inter-campus links to facilitate cover between Harold's Cross and Blackrock Hospice at times of increased staffing pressures. There was a focus on improving communication between sites and with referring physiotherapists in St James's Hospital.

One physiotherapist commenced a Masters of Health Informatics programme in the University of Limerick and began development of an electronic incident report form in conjunction with the ICT Department. Another staff member enrolled in an MSc in Ageing Health and Disease in Cardiff University and another is undertaking an MSc in Advancing Practice (Physiotherapy) in Ulster University. The departmental manager completed the HSE's Leading Care 1 programme.

Physiotherapy staff presented at the Chartered Physiotherapists in Neurology and Gerontology Falls and Frailty study day, the Chartered Physiotherapists in Rheumatology study evening, to staff in the Royal Hospital Donnybrook and to the CRU/RMDU Journal club. Two physiotherapists presented an education session on rheumatology to UCD physiotherapy students and another gave a presentation on physiotherapy in palliative care to students in RCSI. The department facilitated 26 physiotherapy student placements during the year including for Irish and overseas Universities.

We implemented professional supervision in the department in 2019. Physiotherapy staff participated on organisational committees, Health & Social Care Professional advisory groups and the Irish Society of Chartered Physiotherapists (ISCP) clinical interest group and employment group committees.

The team presented a poster at the ISCP national conference on a research project on engagement practices of palliative. A physiotherapist underwent training on the National Frailty Education Programme and is part of the team rolling this out across the organisation. There were a number of other research projects undertaken in PCU (Harold's Cross and Blackrock Hospice) and CRU and by the physiotherapy practice tutor. There were a number of audits conducted by physiotherapy staff in CRU including on sarcopenia and Parkinson's disease.

Psychology

The psychology service continued to offer assessment and treatment as part of multidisciplinary palliative care to patients in their homes, Day Hospice and in-patient units throughout 2019.

As well as playing a crucial role in individual patient meetings, mindfulness sessions were also made available to staff and volunteers throughout the year – in bi-weekly lunchtime sessions, as well as through the gold standard eight week Mindfulness-Based Stress Reduction programme. This came under the umbrella of OLH&CS' staff wellbeing programme and is a continuing commitment of the psychology service to organisational wellbeing.

Students from doctoral training programmes in clinical and counselling psychology were a welcome addition to the psychology team during their placement and contributed to provision across our services.

Dietetic Service

Demand for dietetic services continued to grow in 2019 in both the Specialist Palliative Care Unit and Anna Gaynor House. In the Palliative Care Unit there was a 35% increase in referrals from 2018 and in Anna Gaynor there was a 30% increase. We continue to see yearly increases in the number of patients presenting with artificial nutrition in both of these units.

The department continues to fulfil its commitment to education and training, providing input to the *Falls Prevention Study Day* and *Dementia Study Day*. It also facilitates the nutrition components of the *Nutrition and Hydration Study Days* to improve the nutritional care of our patients and residents.

The department facilitated UCD MSc Clinical Nutrition & Dietetics students in completing their catering and clinical practise placements and supervised another MSc student in completing their final year thesis. The department also plays a key part in educating Dietetic students in the important role of the dietitian in palliative care, with the Senior Dietitian facilitating lectures with both the University College Dublin MSc and Technological University Dublin BSc Dietetic courses.

The Dietetics service was central to the introduction and facilitation of weekly afternoon tea sessions in the Palliative Care Unit. This was a collaborative effort with several departments including Occupational Therapy, Nursing and Catering. This initiative has been extremely well-received and was described by a patient in a newspaper interview as "the best day of my life".

The department continues to work closely with colleagues in catering to improve the food we provide. A

report produced by the MSc Dietetic students examined patients' experiences of the mealtimes and plans are underway to make improvements especially for those recommended modified-texture diets.

Dietetics is involved in a number of organisational groups including the Dementia Champions Group, CEOL (Compassionate End of Life) and the running of National HSCP Day (Health and Social Care Professions). External links continue to be developed and enhanced with the department represented on the Irish Nutrition and Dietetic Institute's (INDI) new graduate subgroup; Older Person and Dementia Interest group and Palliative Care group; on CHO 7 Dietitians in Management group and the National Malnutrition group.

Chaplaincy

The chaplaincy team continues to meet the spiritual needs of an ever-changing population of patients. The team is involved in a number of groups across the organisation including diversity and mission. During the year, we had a talk and visit from Katherine M. Piderman, Ph.D. Chaplain & Coordinator of Spiritual Research at Mayo clinic. The team held two masses of remembrance in the chapel in Harold's Cross 2019, which were very positively received by attendees who joined staff for refreshments after the services.

Pharmacy

Throughout 2019, our team of pharmacists and pharmacy technicians continued to provide dispensing and ward-based clinical pharmacy services to both the Harold's Cross and Blackrock Hospice sites supporting in-patients, day-case patients and community-based patient services.

Dispensing activity levels were similar to previous years although safe and cost effective procurement and supply of medicines has become increasingly complex as the work of sourcing of medicines and mitigating the impact of medicine shortages increases.

As part of continuous improvements, an increased proportion of medicines are dispensed with individualised patient details, instructions and warning labels. A ward-based pharmacy technician service, which had been previously piloted, was established to support assessment of patients' own medicines on admission to the Community Reablement Unit.

Clinical pharmacists also provided a high quality service to all in-patients, checking prescriptions, participating in multidisciplinary team meetings, providing advice, discussing and reviewing medicines with patients on admission and liaising with community pharmacists at discharge.

Palliative Meds Info., the national medicines information service for palliative care, is based at OLH&CS. In 2019, it responded to 545 specialist medicines queries from health professionals. A number of updated medicines guidance documents were published on the service's webpages.

New technological solutions have been implemented to check all medicines against a European database as they are received into stock to ensure they are genuine. This is in compliance with the EU-wide Falsified Medicines Directive to prevent counterfeit medicines entering the supply chain.

The pharmacy department has a strong academic

record and successfully published three pieces of research at national and international level in 2019. A fourth piece of work has been accepted for presentation in 2020.

Future work being considered involves bringing the highly successful Medicines Management in Palliative Care Educational Courses, developed by pharmacists at OLH&CS, to a fully on-line format.

The pharmacy department also successfully supported tutor training of a full time intern who was admitted as a newly qualified pharmacist to the Pharmaceutical Society of Ireland in late 2019.





PALLIATIVE CARE REPORT

Dr Stephen Higgins

Medical Director, Consultant in Palliative Medicine in
OLH&CS and Tallaght University Hospital

2019 saw the highest ever number of admissions to our in-patient units in both Blackrock and Harold's Cross. Our specialist community palliative care teams saw over 1,500 patients, also a record number.

The numbers tell how busy we are and why it is important that we are constantly adapting and innovating; it is the individual stories that explain the importance of what we do for patients and families that remind us of the compassion and attention to detail that make all the difference.

Our community specialist palliative care services continue to meet increasing demand for their services. Our largest referrers are the palliative care teams of local hospitals, with whom we work so closely. Key to this, and to providing continuity of care, is that our medical consultants all work across different sites, having both hospice and hospital commitments.

Local GPs are another very important referral source, particularly when it comes to residents of nursing homes. Increased involvement in this setting has been an area of significant change for us in recent years and will remain so in the years ahead. People are often surprised to learn that a large proportion (nearly 40%) of patients seen by our community palliative care teams will have a diagnosis other than cancer.

We have long known that good palliative care involves meticulous assessment and treatment of all symptoms, a focus on communication and help in planning for an uncertain future. What we increasingly recognise is that this is as relevant and important to someone with advanced heart or lung disease as it is to someone with cancer.

Almost

40%

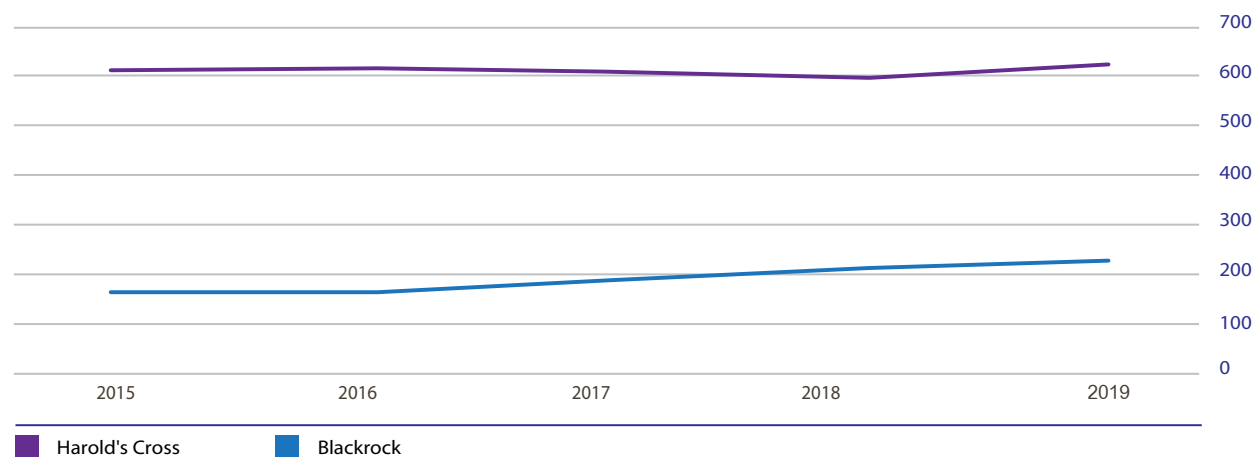
of patients seen by our specialist community palliative care teams have a diagnosis other than cancer.

Over

1,500

patients seen by our specialist community palliative care teams in 2019

Palliative Care Unit in-patient admissions across both sites



There is always a pressure to see new patients promptly – as well as attending to those already in our care, whose situation can change suddenly. We assess all referrals for urgency and will often speak directly with the referrer. We give priority to the most urgent referrals – those who need to be seen within 48 hours – and meet this target 99% of the time. For those that need to be reviewed within one or two weeks, we reach that target more than 95% of the time.

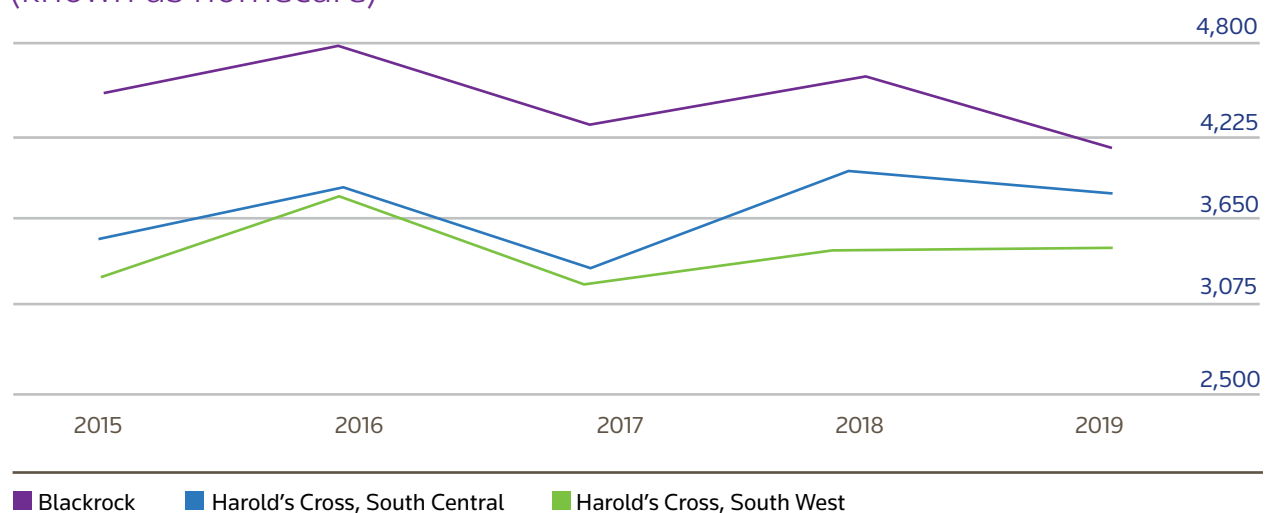
Our Day Hospice and particularly our out-patient services continue to evolve as we try to blend our different community services. This is because the needs of individual patients change over time and we need to have ways of working that can match this. Our

experienced nursing and multi-disciplinary teams are rising to meet this new challenge. We can see that we are still at the start of a road with great potential.

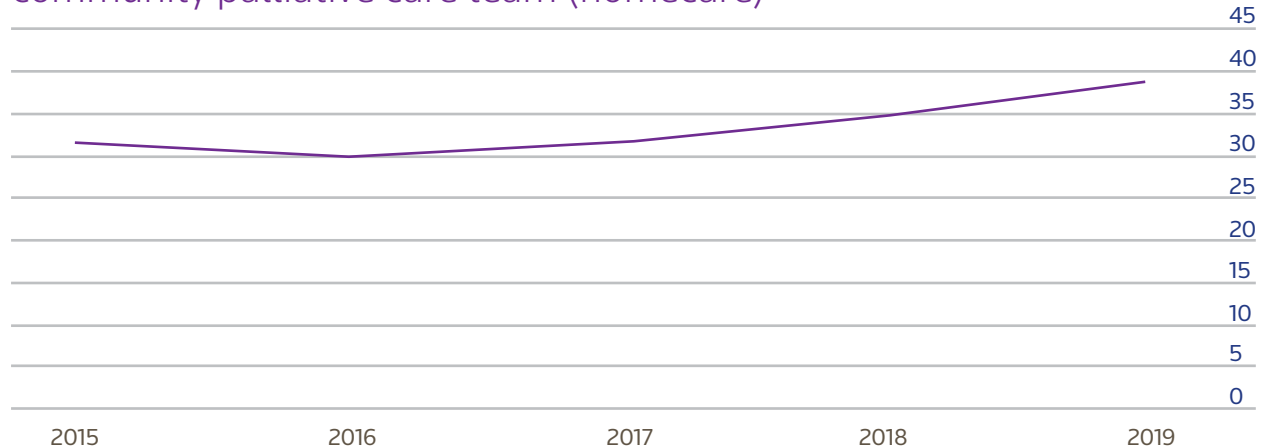
Blackrock Hospice had a large increase in admission numbers in 2019 and we look forward to having Wicklow Hospice open and available to meet some of this demand and to provide care closer to where patients live.

Averages tell something of what we do. On average, patients are in the Unit for about two weeks. For every two patients who come in, one will come from home, one directly from hospital. Some will return home again, two thirds will not. The average age of

Number of visits by our specialist community palliative care team (known as homecare)



% of patients with non-cancer diagnosis in the care of the specialist community palliative care team (homecare)



our patients is 70 though we see many who are much younger and an increasing number who have made it past 100.

We very much work as a multidisciplinary team; it would be common for our teaching ward rounds to have perhaps six to eight different disciplines involved. It is this blend of skills and experience that means we can help with a breadth of complexity and challenges.

We are a teaching hospice, closely linked to both Trinity College Dublin and to University College Dublin, and students of virtually all health disciplines are with us at different times throughout the year. We are also a site for research and learning – something we have always found our patients very keen to help with and be part

of. We continue to welcome elective students from all over Europe, and further afield, keen to spend time with us.

Looking forward to 2020, we will see Wicklow Hospice open. Our ambition is that it would match or exceed what has been achieved in Blackrock Hospice over the years. That is no easy ask but we believe we have the team to make it happen and trust in the support that we will receive from those whose vision and commitment has got Wicklow Hospice to this point.

As ever, what makes the hospice special, what inspires the staff to do great things is our patients and their families. It is a pleasure to be enabled to provide the care we do.





RHEUMATIC AND MUSCULOSKELETAL DISEASE UNIT REPORT

Professor Douglas Veale

Professor of Medicine and Consultant Rheumatologist in OLH&CS and St Vincent's University Hospital

The Rheumatic and Musculoskeletal Disease Unit (RMDU) is unique within Irish healthcare, providing assessment, education and treatment for patients with arthritis and diseases associated with reduced mobility.

The RMDU continues to provide the highest quality, evidence-based, state-of-the-art service for in-patients, in addition to growing numbers of day case patients and out-patients.

Activity levels remained extremely high during the course of 2019 with 799 in-patient admissions; 1,011 individual interventions under the Advanced Nurse Practitioner (ANP) out-patient services and 1,222 individual interventions under the new interdisciplinary RIO service.

This reflects the trend of a steady increase in clinic activity within the unit over the past five years, at a time when the numbers of staff providing the service has not increased significantly, and thus it reflects an increase in productivity and efficiency of the multidisciplinary team members.

The number of referrals also continues to increase both from the immediate catchment area and from outside, leading to an increase in the waiting list. This data reflects a number of developments in the RMDU, not least the increased demand for services, increased case complexity, expansion of the services offered and the increase in services offered on a day-case and out-patient basis.

The medical staff remain extremely busy managing the high level of admissions/ discharges providing assessment and management of an increasingly complex case-mix. The national programme for development of candidate Advanced Nurse Practitioners continues to develop at a great pace, in close collaboration with the rheumatology unit at St. Vincent's University Hospital (SVUH). The Rheumatology Obstetric Service (ROSE) in the National Maternity Hospital continues to expand also.

	15	16	17	18	19
In-patient admissions	730	772	851	806	799
Day Case new patients	129	155	140	124	*
Total	854	842	906	859	927

*Note: this service was re-structured and replaced with RIO in 2019.

The Registered Advanced Nurse Practitioner (RANP) complement in RMDU increased from two to three during 2019, while one of our clinical nurse specialists commenced an MSc in advanced practice at University College Dublin (UCD). RANP-led initiatives include the establishment of the first national ANP gout clinic during 2019 running in parallel with the ever evolving ANP complex case management, young adult and reproductive healthcare services.

The international reputation for rheumatology higher education at OLH&CS continued to develop as the medical staff and ANPs delivered a preceptorship programme in rheumatology to visiting rheumatologists from South Africa in October 2019. Ten UCD students from all over the country also undertook this module and most of the teaching was delivered on site at OLH&CS by the rheumatology medical and ANPs from RMDU and St Vincent's University Hospital.

In April 2019, we commenced a Rheumatology Interdisciplinary Out-patients (RIO) service, following a re-configuration of the Day Case Service. RIO aims to expand on a Rheumatology out-patient model by delivering evidence-based services with targeted intervention and a focus on outcomes and

enhanced quality of life. Patients are reviewed by CNS, Occupational Therapy and Physiotherapy with medical input as needed. Tailored interventions are based on patients' needs informed by clinician assessment. An evaluation of the service has shown improvements in patient's self-reported health scores and overall functional status.

Our Occupational Therapy team contributed to the establishment and running of the new Rheumatology Interdisciplinary Out-patients (RIO) service. Also during 2019, the team began planning towards participation as a pilot site for a trial 'Testing the Effectiveness of Fatigue and Activity Management in Work (FAME-W) Intervention for individuals with Rheumatic Diseases' in conjunction with Trinity College Dublin, with Professor Veale as lead investigator for OLH&CS. This study tests the effectiveness and acceptability of the FAME-W programme in managing the physical, mental and social demands of work of individuals with rheumatology conditions. In addition, we supported representation on the Rheumatology National Programme.

The team continued to deliver the Lifestyle Management group (LMAG) educational-behavioural



group for in-patients with inflammatory and degenerative arthritis. A study on its effectiveness demonstrated improvements in participants' joint protection knowledge with 87% rating it as excellent and describing it as empowering. The study was presented in poster format at the Irish Society of Rheumatology/Irish Rheumatology Health Professionals Society (ISR/IRHPS) Conference in September 2019 and was awarded third prize in the poster presentation section. The research paper is in draft article format and is due for submission to the British Journal of Occupational Therapy in Q1 of 2020.

A number of changes made to the RMDU gym and aquatic physiotherapy schedules in 2019 allowed for more targeted interventions and open sessions were introduced in both services for those patients not requiring direct supervision by a physiotherapist. This has allowed increased promotion of self-management for those with chronic diseases. Physiotherapy staff were very involved in the development and implementation of the RIO service. The rehabilitation assistant continued to develop providing an invaluable link between the wards and therapy areas, which has enhanced communication and afforded additional help for patients with more complex needs.

There has been an increased focus on the role of progressive resistance training, particularly for managing sarcopenia and osteoporosis. Two physiotherapy staff gave a number of presentations on the topic to external audiences as well as to OLH&CS staff. Two other physiotherapists presented a problem-based learning education session on rheumatology to UCD physiotherapy students. We provided clinical placements to 10 students over the course of the year with very positive feedback.

The pharmacy department provides a medicines supply service for the rheumatology unit and rheumatology day patients requiring specialist intravenous and intra-articular medicines in addition to a clinical pharmacy service.

The clinical pharmacist reviews all patients admitted to the RMDU and participates in multidisciplinary meetings to advise on pharmaceutical care of our patients. In 2019, they worked with the team to plan for a system of medicine supply that supports using the patient's own medicines and assessing patients for suitability to self-administer their medicines. This

aims to improve efficiency in the use of medicines and to support education on medicines and self-care. In addition, the pharmacist led a review and update of all specialist intravenous rheumatology drug protocols this year.

As an integral part of the RMDU interdisciplinary team, the Senior Medical Social Worker (MSW) contributes significantly to ensuring that patient-centred care is provided. Using a systemic approach in recognition that illness impacts the family as well as the patient, the MSW works with the patient identifying the psychosocial impact of their condition, facilitating and empowering them to draw on their strengths, resources and coping skills. Risks are identified and addressed to ensure that the patient is able to engage with the programme, thus optimising opportunities for the best possible outcomes.

This year the MSW undertook a project which examined the themes of referrals to the social work service. This analysis highlighted the links between living with chronic illness and mental health issues, showing a pattern of high demand and need for psychosocial support in relation to this. As a result of this identified need, the MSW attended training on trauma informed practice, which has led to enhanced practice with clients referred to the service.



1,436
patients seen in
RMDU in-patient &
out-patient services



OLDER PEOPLE'S SERVICES REPORT

Dr Róisín Purcell

Consultant Geriatrician OLH&CS and St James's Hospital

2019 was an exciting year for Older People's Services in Harold's Cross with the highlight being the move of the Community Reablement Unit (CRU) from the first floor of the old Hospice building to the ground floor of the newer Caritas building in June.

This was carefully managed by all the team to ensure a smooth transition. The move has resulted in patients being cared for in a bright, airy space with access to the beautiful gardens and wonderful facilities nearby. It has been a great success and greeted with enthusiasm by patients, visitors and staff. In order to establish the unit in a better environment the bed base had to be reduced from 23 beds to 18. Despite this reduction and the disruption of the move, we admitted 330 patients in 2019 (356 in 2018).

We continued to admit frail older people for Comprehensive Geriatric Assessments (CGA)

with a view to providing multidisciplinary input to help improve their function and independence at home and in the community. We kept a focus on the areas of falls, poor mobility and memory problems. We also admitted increasing numbers of people with progressive neurological conditions such as Parkinson's disease.

We collaborated closely with colleagues in St James's Hospital (SJH), Tallaght University Hospital (TUH) and St Vincent's University Hospital to select the patients who would most benefit from the service and to help avoid acute hospital admissions. We also





Admissions to Anna Gaynor House

	2014	2015	2016	2017	2018	2019
Nursing Home Support Scheme (Fair Deal)	22	28	29	25	19	21
Dementia Respite				29	82	89
Fast Track/Palliative care support pathway	54	21	28	46	63	66
Grand Total	76	49	57	100	164	176

linked in with colleagues in the community who identified CRU as a more appropriate alternative to an acute hospital attendance for some patients.

The Multidisciplinary CRU clinic in St James's Hospital was run by CRU staff (Consultant Geriatrician, Clinical Nurse Specialist, Occupational Therapist and Physiotherapist) once a week. 318 patients were assessed (184 new, 134 returning) to determine their suitability for the service or to follow up on issues that arose during their in-patient stay in CRU.

From this clinic and our work on-site in CRU, we sent referrals to OLH&CS' Post-Diagnostic Support Service for people with Dementia. This outpatient service provides patients with Cognitive Stimulation Therapy (CST) run by our Occupational Therapists and a Carer Support Group run by Social Workers in older people's services. It is a greatly valued service with referrals coming from colleagues in local memory services in SJH and TUH. People with dementia attended eight CST sessions with assessments before and after the intervention. While they were receiving CST their carers could attend a support group. During the year, there were three phases with 29 people with dementia and their carers availing of the service.

In 2019, we provided clinical experiences for fellows of the Global Brain Health Institute. Affiliated with Trinity College Dublin, its mission is to engage and educate leaders from around the world in the area of brain health, with a particular focus on dementia. The fellows came from Portugal, USA, Ethiopia, Australia and elsewhere. The experience was well-received with further collaborative opportunities planned for the future.

We also engaged with the National Frailty Educational Programme and eight staff trained as facilitators for the programme. They will deliver it for OLH&CS staff throughout 2020 with a view to expanding outside the organisation in due course. This will be a valuable addition to the training that already takes place in Gerontology. The National Dementia Training Programme has been running for a few years and during 2019 50 staff participated in the training to enhance their understanding and management of the care of people with dementia.

Anna Gaynor House (AGH) continued to provide a high standard of care to its 89 residents and dementia respite patients throughout 2019. This was echoed by HIQA inspection in February. The inspection highlighted some areas for attention that have been addressed.

Residents were admitted to the unit via the Nursing Home Support Scheme (Fair Deal) pathway or via the Fast Track pathway (also known as the Palliative Care Support Pathway). Patients selected for the Fast Track pathway are those whose prognosis is short and who have non-complex palliative care needs. Their admission is prioritised and expedited because of their need and prognosis. Both pathways are for frail older people who require a high level of residential nursing and medical care. This care also requires the input of a dedicated multidisciplinary team of speech and language therapist, dietician, physiotherapist, occupational therapist, social worker, pharmacist, chaplain, complementary therapist and of course the invaluable input of our volunteers. In December 2019, we appointed an activity coordinator who works with the rest of the team to support residents.

21 people were admitted via the Nursing Home Support Scheme pathway (19 in 2018). There were 66 admissions via the Fast Track pathway compared with 63 in 2018 and 46 in 2017.

Throughout the year, we continued to provide respite for the carers of people with dementia. This typically involved admitting the person with dementia for a stay of two weeks in AGH. 89 people availed of this service (82 in 2018). It continues to be a service that is greatly valued and sought after with a significant waiting list.

The Compassionate End of Life (CEOL) programme continued in 2019 with 11 case reviews. Staff have found this a valuable opportunity to reflect and remember residents.

Overall 2019 saw a continued high standard of care and advocacy for older people and also improved education, innovation and quality improvement in the areas of frailty and gerontology. There are many plans to continue this throughout 2020 and beyond.





RESIDENTS' FORUM REPORT

Carolyn Roe

Volunteer Facilitator

The Residents' Forum provides an important voice for all residents of Anna Gaynor House to discuss issues of concern, offer ideas for improvement to their living experience and environment and bring these suggestions to the attention of Management and staff.

To improve this experience many face to face meetings took place throughout 2019 in addition to group meetings - as some residents felt more comfortable with individual conversations rather participating than in a group setting. Topics listed in the minutes were discussed, commented upon, opinions and ideas offered. In conjunction with the Occupational Therapy Department a new colourful poster was designed to encourage new residents to engage more readily with the forum - individually or in a group setting.

Among the range of topics covered during the year a matter of concern for the small number of residents' who are smokers was the decision to close the residents' smoking room in Anna Gaynor House. Residents and their families were advised that this decision was made following expert advice and in line with regulations, and all residents were written to regarding to the closure. Following further discussions, the room's closure was postponed for three months to give more time to engage with residents and families.

Fire safety on the unit was a very important issue raised by a resident. External specialists reviewed AGH in line with new regulations and confirmed the Unit is fully compliant with all aspects of fire safety regulations.

Residents welcomed the news that Harold's Cross main reception team and base will relocate to the front desk at Anna Gaynor House. Currently designs are being worked on, and it is hoped to effect this change in early 2020. Suggestions for floral decoration of this area were made by several residents.

The Forum was delighted to welcome several guest speakers during the year who spoke on a range of topics including gardening, volunteer activities, smoking room, fundraising events, music and film evenings. Residents were delighted to hear about plans for celebration of 140th anniversary of the foundation of Our Lady's Hospice & Care Services and heard some lovely anecdotes of Mother Mary John Gaynor, bringing to life someone previously only seen in a painting. This was of great interest to all at the meeting as our Residents' home bears her name 'Anna Gaynor.'

To all residents thank you so much for your participation and contribution to the Forum throughout 2019.



EDUCATION AND RESEARCH REPORT

Lisa Ivory, Business Manager

Michael Connolly, Joint Associate Professor of Clinical Nursing

The Education and Research Centre at Our Lady's Hospice & Care Services enables our staff and volunteers to achieve their full potential and contribute to Ireland's Older Persons, Palliative Care and Rheumatology services through learning.

2019 was a year in which much was achieved, key highlights this year include:

- Education programmes in Palliative Care, Rheumatology, Gerontology and Spirituality provided to 433 participants via 10 different education programmes.
- University College Dublin (UCD) and Trinity College Dublin (TCD) undergraduate education and clinical placements were provided in medicine, nursing, physiotherapy and occupational therapy.
- Twelve papers published in peer reviewed journals, 10 oral presentations and 24 poster presentations delivered at national and international fora by E&RC staff.
- 108 OLH&CS staff publications or presentations in Palliative Care, Rheumatology and Gerontology.
- On March 6th 2019, we hosted the 25th annual Moving Points in Palliative Care conference. The theme was '*Changing Dynamics in Specialist Palliative Care: Looking Back and Moving Forward*'. Our international keynote speaker this year was Prof. Bee Wee who talked about '*Challenging Decisions for End of Life Care*'. Other speakers included Mr. Asim A Sheikh who talked about the '*Assisted Decision Making Act in Palliative*

Care' and Prof Sonja McIlpatrick who looked at the '*Changing Landscape of Palliative Care Research*'. As usual, the event was well attended and greatly enjoyed with lively questions and answers following each of the morning and afternoon sessions.

- The Sr. Frances Rose O' Flynn Medal for Academic Achievement awarded by UCD to Ms. Amanda McNally and Mr Conn O'Brien for outstanding achievement in the Graduate Diploma in Palliative Care.
- The new Dr Mary Redmond Memorial Medal was awarded to Ms Margaret Kirwan for her results in the Psychosocial, Spiritual and Therapeutic Issues in the Palliative Care module.
- Ongoing improvement to the dedicated on-site clinical skills and simulation laboratory.

Three meetings of the Education and Research Committee were held under the chair of Dr Terry McWade from the Board of Directors. During the year, 10 research proposals were approved.

Strategic Implementation Plan

Key actions for E&RC for the period 2019 - 2022 were developed and will be further refined when new management structure is in place in 2020.

Library and Information Service

The library continued to support education, training and research initiatives and to develop its extensive collection of print and electronic resources.

Education and training was provided to staff, students on placement and those undertaking programmes in the centre. The librarian carried out literature searches for different departments and 174 articles were provided to clinical areas. The Library received notification of 50 presentations and 58 publications completed by OHL&CS staff this year.

The librarian presented a poster on behalf of the Clinical Audit Committee entitled *"Barriers and facilitators to conducting audit within a healthcare setting"* at the HSLG Annual Conference in 2019 and the 25th Annual Moving Points in Palliative Care conference on 6th March 2019. The librarian co-authored of an article in the September issue of the British Journal of Healthcare Assistants entitled *"Getting it right: the art of academic referencing."*

OLIVE – virtual learning

OLIVE, our virtual learning environment has just over 1,000 registered users. It was recently upgraded to

improve usability. 477 staff members completed mandatory and locally-required training. Videos of talks and conferences are uploaded for staff access. Courses are continually updated, including 2019's new International Dysphagia Diet Standardisation Initiative course.

Facility

A 12% increase in the number of events held in the centre included a 34% increase in external events, which increased income by 21%.

Undergraduate and Post Graduate Students

Both undergraduate and postgraduate students continue to be an important cohort of students utilising our facilities annually. They represent allied health professionals, nursing and medical facilities from University College Dublin and Trinity College Dublin.

We continue to support clinical placements, provide education programmes and facilitate research opportunities for those attendees.





Academic and Clinical visitors

This year we processed 12 applications for visits from Ireland, Brazil, USA, Greece and Iceland of which 11 were accommodated during 2019.

Education Programmes

Many different education programmes were delivered this year in a variety of formats including classroom and on-line, through our dedicated education portal Olive. In 2019, students were supported by clinical staff across Older Person, Rheumatology and Palliative Care Services. These included undergraduate and postgraduate students from UCD and TCD.

Schwartz Rounds, as described in the CEO's report, were hosted in the centre on eight occasions for staff and volunteers based in Harold's Cross.

Research

Research discussion groups provide a forum for research education and the development of research projects. The Cancer Malnutrition Research Group continued to recruit to its multi-site study entitled "Dietary Advice Following Solid Tumour Diagnosis". Data collection finished in February 2019, with write-up to follow.

External collaboration

Links were maintained or developed this year with UCD; TCD; University College Cork (UCC); St James's Hospital; St Luke's Hospital; St Vincent's University Hospital; Tallaght University Hospital, Technological University Dublin (TUD); the Irish Cancer Society, the Beacon Hospital, Dublin City University (DCU); Queens University Belfast (QUB) and The Irish Longitudinal Study on Ageing (TILDA).

Research Proposals Approved in 2019

Goss, J.	Evaluation of a Multidisciplinary Breathlessness Support Service (MBS Service) for individuals with Chronic Refractory Breathlessness
Ui Dhuibhir, P.	The impact of chemosensory abnormalities on food intake in advanced cancer
Carter, G.	An audit to determine knowledge transfer of Hospice enabled dementia care in Ireland
Connolly, M.	Palliative care nursing at specialist level: the contribution to patient and family care
Bates, U.	Minding the Gap: Auditing the audits in Our Lady's Hospice and Care Services, Ireland
Barrett, M.	Nutritional Screening of Cancer Patients in Hospice
Festus, J.	A feasibility study to explore the experience of physiotherapy by patients with cancer
Kelly, A.	Patient experience of the OTAGO exercise group
Afolabi, J.	The views of people living with life-limiting conditions towards physical activity: a qualitative exploration
Holmes, E	Adherence to oral calcium supplementation: A study of Patient Opinions regarding available Formulations.



Summary of OLH&CS staff publications & presentations 2019

	Presented		Published		Total
	Oral	Poster	Journal ¹	Other	
Palliative Care	13	27	10	2	52
Rheumatology		3	40		43
Gerontology / Other	3	4	5	1	13
TOTAL 2019	50		58		108
2018	42		81		123

¹ Including ePublished ahead of print and abstracts.

PATIENT STORY

CARMEL CUSH

During 2019, Blackrock Hospice patient, Carmel, shared her personal experience of our palliative care to help us appeal for funds from our supporters.

We are so grateful to her, and her family, for this generous gift, which helped us to raise more than €50,000 to provide our services.

This extract from Carmel's letter will give you insight into her life and how she felt about her time in our care.

.....You should probably know that I'm very seriously ill. The only reason I'm mentioning this is because I want you to know how my life has been transformed through the wonderful care I receive in the hospice.....

Yes, I've been through the mill but the good news is that, because of the extraordinary care, love and support I received in the hospice, I am so much more comfortable and able to cope with these challenges.

In fact, when I think of what I've been through, I'm so thankful for all the blessings and benefits the hospice has given me. They've really been there for me. I know they're there for so many people. That's why I'm putting my heart into this appeal because they need our help too.

It's funny looking back. I remember my daughter thought it would be good for me to go to Day Hospice. But I really didn't want to go. To be honest, I was

afraid. I thought the hospice was a solemn, quiet and scary place you go to die.

How wrong I was! It's not a place of fear. It's a place of safety. It's not solemn. It's vibrant. It's not quiet – it's filled with chat and laughter.

And most of all, it's not a place to die – it's a place to live – with joy and friendship. I don't know how to properly put it into words – the wonderful, almost-spiritual effect the place has.

The people here have also given me a precious gift – the gift of knowing what to accept and what not to accept. I've accepted my cancer and illnesses but I won't accept that my life just stops because of it.

I was in a bit of a crisis before I came to the hospice. I really did need care and support. But I suppose I didn't admit it – especially to myself. And certainly, my amazing family and friends who support me – they needed a break.

Plus, I've always been independent and self-sufficient. I didn't want them fussing over me and worrying about me.

And the patients too, we have such a bond – maybe it's because we know that we're all seriously ill. We've all thought about death. And also because of the therapies and the counselling we get we feel we can be open about our hurts and worries and concerns – medically and emotionally. That is so healing.

It's a very rare and precious thing feeling the love and care and understanding. The staff make you feel like you're the centre of their world.

I availed of Day Hospice and also Respite – and the Community team came to see me at home. You've no idea the difference it made to me physically, mentally and emotionally. Everyone you meet whether it's a nurse, doctor, physio, cleaner or volunteer – they're just so lovely and caring. It's a very rare and precious thing feeling the love and care and understanding. The staff make you feel like you're the centre of their world. Your needs are so important and also no trouble to them.

And the patients too, we have such a bond – maybe it's because we know that we're all seriously ill. We've all thought about death. And also, because of the therapies and the counselling we get, we feel we can be open about our hurts, and worries and concerns – medically and emotionally. That is so healing.

Like others in my family – and I suppose like many people out there, I have endured tragedy and disappointment at times throughout my life. Some of the people I loved were lost to the darkness of addiction. There were children in my life who died far too early. You never forget them – you never really let them go – you keep a special place in your heart for them.....



In all my health struggles, I've had to dig deep for new energy and strength each time I had a setback. In the hospital, I remember him telling me the cancer had returned. The world seemed to stand still. I knew I had to face into another battle. But my friends and family were there for me. And knowing that the hospice was there for me was a light at the end of the tunnel ...visiting me at home, encouraging me to come to Day Hospice, and when I needed it, some respite care.

They have helped me to accept where I am at but to seize life as well and invite back in the joy and love. For family it's so comforting for them to see you in such good form and to know we're getting the best of care. And it gives them a much-deserved and needed break.

Yes that's another priceless gift they give you – please help them to give that gift to so many more people and their families who need their care.

Carmel died on 13 September 2019 under the care of the Blackrock Hospice team.



€6,509,719 raised in 2019

the most successful year in the history of fundraising
for Our Lady's Hospice & Care Services

FUNDRAISING AND COMMUNICATIONS REPORT

Eleanor Flew

Director of Fundraising and Communications

On behalf of all those who use Our Lady's Hospice & Care Services, we would like to extend our most grateful thanks to everyone who supported us throughout 2019. It made an incredible difference to so many and for that we are truly grateful.

2019 was yet another incredibly busy year for the Fundraising and Communications Department and thanks to the support of our donors we raised €6,509,719, which is the most successful year in our organisation's history, reflecting a 12% uplift on 2018.

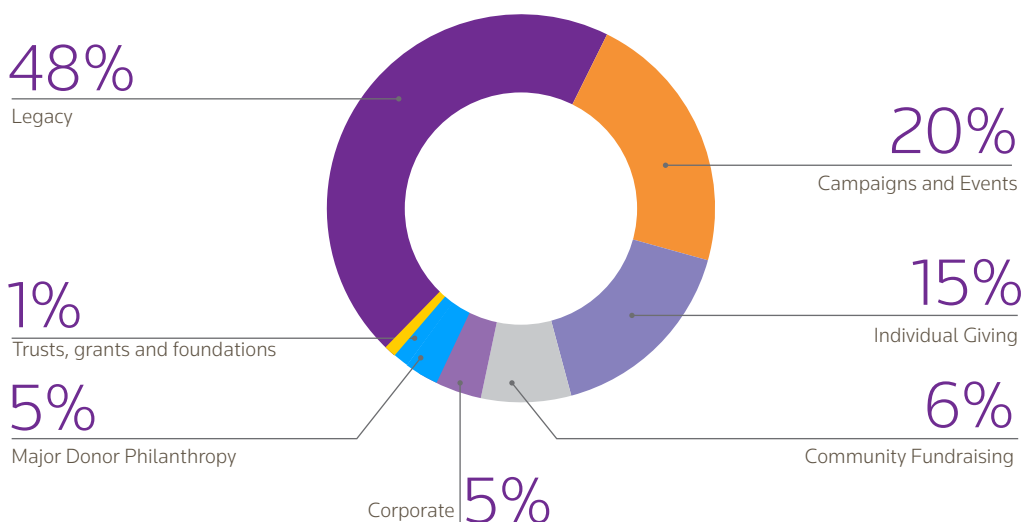
We directly raised €3,384,377 while €3,125,342 was generated from those who kindly remembered us in their wills (legacies). Please note that our financial statements list income from legacies as €3,627,746 in 2019 –

this is due to the timing of legacy cash receipts and the accrued legacy income amount in the financial statements which is not on a cash receipt basis, in line with Charities SORP (Statement of Recommended Practice).

Unrestricted income enables greatest impact

During 2019, 13% of our fundraising was restricted by donors to be used on specific programmes or activities. When our donors place no restriction on how we allocate funds,

How we raised funds in 2019



this flexibility allows us put their gifts to use quickly in the areas of greatest need and priority.

We thank our donors for trusting us to make the greatest impact and we endeavour to always spend your funds wisely, transparently and to communicate the impact that these generous gifts achieve.

Campaigns and Events

With the on-going support of the public, 2019 was another successful year across our many campaigns and events. We raised €1,301,432, up 2% on the previous year.

Our first key event of the year was the annual 'Hospice Spring Raffle,' which raised over €145,000. Shortly after this, 355 women walked, ran or jogged the 'Women's Mini Marathon' raising over €87,000. Special thanks to our Mini Marathon ambassador Dr. Ciara Kelly.

In June, over €118,000 was raised from our annual flag day 'Hospice Sunflower Days.' Special thanks to the national 'Hospice Sunflower Days' ambassador Mary Kennedy. Congratulations to our fantastic volunteer Geraldine Masterson who accepted a Sunflower Days Hospice Hero Award from Mary Kennedy to acknowledge her tireless commitment to this campaign.

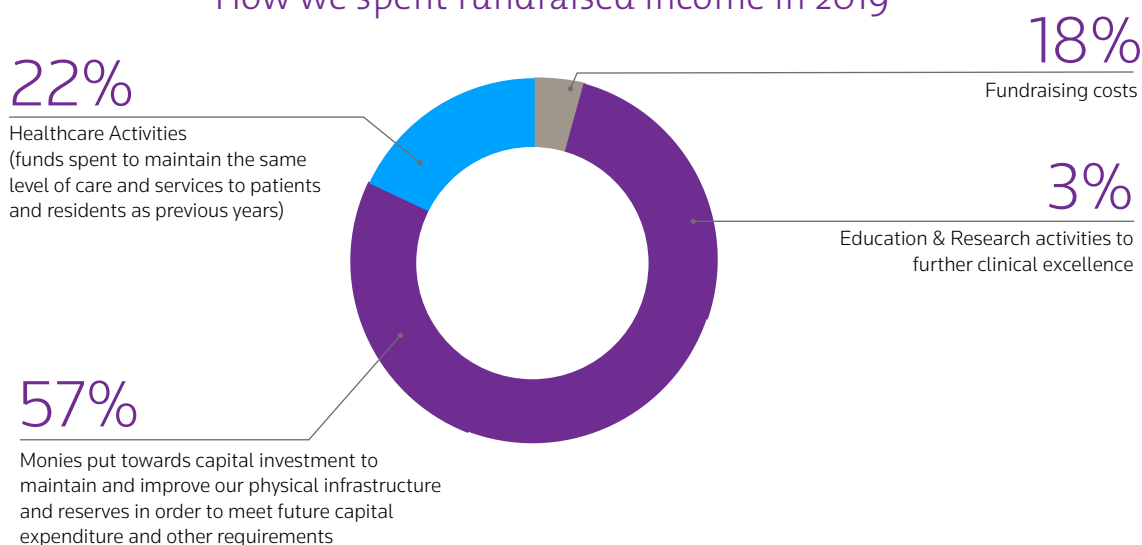
Our ever-popular annual in-memory event in Blackrock Hospice, 'Little Flower of Life,' raised over €47,000 through sponsorship of flowers celebrating the lives of loved ones.

In September, over 900 coffee mornings took place as part of *Ireland's Biggest Coffee Morning for Hospice Together with Bewley's* raising almost €400,000, slightly down on the previous year. A special highlight of the campaign was our first ever live televised coffee morning with Ireland AM. Broadcasting from our Harold's Cross site, it featured interviews with supporters Ken Doherty, Shane Byrne, Martin King and Ian Dempsey. We would especially like to thank and acknowledge our national campaign ambassador, Maia Dunphy, for being so generous with her time and supportive of hospice care. Our most sincere thanks also to our long-standing sponsor, Bewley's, whose dedication, generosity and commitment to hospice care has resulted in a 27-year partnership that has raised over €37,000,000 for hospice care nationally.

In October, we hosted a fantastic trek to Croatia and the Dalmatian islands with our 25 intrepid hikers raising over €90,000.

Towards the end of the year, our flagship event, 'Light Up A Life,' raised over €450,000 and over 26,000 loved ones were remembered through the sponsorship

How we spent fundraised income in 2019



of lights on our Christmas tree. We were also delighted to welcome over 11,000 people on site for this annual remembrance event with Andrea Corr as our very special guest of honour. Our heartfelt thanks also to Aviva Ireland, one of Ireland's most established life assurance companies, who were our title sponsor, generously supporting us for a third year. Every step in the journey to progress our urgent goals is only made possible with the great generosity of our partners and we are truly grateful to all the team at Aviva Ireland.

Community Fundraising

2019 was also a busy year for fundraising amongst our supporters in the community and over €370,000 was raised reflecting a 12% increase on the previous year. Almost 250 events took place in schools, clubs, parishes and in people's own homes.

Individual Giving

Our regular monthly giving programme raised over €166,000 and we are very grateful to all those donors who have committed to making a regular monthly

gift. This type of giving is extremely important to us, as it helps us to plan ahead and make long-term improvements to support our patients and their families.

Donations by individuals and 'In Memory' donations raised over €580,000, up from the previous year. A heartfelt thanks to all who honour a loved one by supporting our work.

Special thanks also to Carmel Cush who very kindly shared her personal story of Hospice care to help us raise funds. Over €50,000 was raised through this appeal. Carmel sadly passed away just before her special appeal began and we are truly grateful to Carmel and her family for their compassion and support.

Corporate Supporters and Founding Partners

We are fortunate to have many corporate supporters who we thank once again for their great generosity throughout 2019. There are a variety of ways in which



organisations can work with us from partnerships, sponsorships, donations, employee fundraising, customer engagement, staff events and staff volunteering. Whether you partnered with us for the first time in 2019, or are celebrating an anniversary of working with us, we are truly grateful for your generosity.

Special thanks to Aviva Ireland, Bewleys, Carroll and Kinsella Blackrock, The Institute of Directors in Ireland, Clancourt Management, Permanent TSB, Kia Dundrum, Sunway and the National Treasury Management Agency.

We continue to work closely with our Founding Partner, Massey Bros. Funeral Directors who have committed to the Hospice for a five-year period. We thank Robert Maguire and all the team at Massey Bros. Funeral Directors most sincerely for their dedication, leadership and tireless support of our fundraising ambitions.

Finally, to all the organisations who work with us, publically or privately, your support and partnership enables us to provide the best in person centred and excellent care. Thank you.

Volunteers

We would like to thank all our incredible fundraising volunteers who continue to play a vital role and without whose tireless energy, passion and commitment we could not raise the levels of funds that we do. We are truly grateful for your support, good humour and commitment.

Communications

Throughout 2019, our communications programme continued to raise our profile nationally, strategically supported our fundraising activities, liaised with media and celebrated stories of the patients, residents, families, staff and volunteers with whom we work.

The highlight of the year was the launch of a timeline exhibition to celebrate our 140th anniversary on 9th December. Special thanks to RTE Broadcaster Ryan Tubridy who officially opened the exhibition.

“My special dedication is for Aisling, she was only 31 when she died of cancer. The Hospice was there for her at such a vulnerable time in her short life. Even the little things the nurses did made such a big difference to her. She’d love the idea of a Little Flower of Life, knowing she was helping others who need their precious care” –
Karen



Blackrock Hospice

SUPPORT YOUR SMALL CHANGE WANTED
HOSPICE
OUR LADY'S HOSPICE & CARE

SMALL CHANGE WANTED
SUPPORT YOUR HOSPICE
OUR LADY'S HOSPICE & CARE

Little Flower of Life 2019

Little Flower of Life
Black & White Only Please

Number

You make it all possible!



We were delighted to be awarded the *Healthcare Fundraising Initiative of the Year* award at the 2019 Irish Healthcare Centre Awards celebrating our efforts for the new specialist palliative care unit in Harold's Cross. We are truly grateful to our donors who funded 100% of the building costs of the new unit or €13.6 million.



25 intrepid trekkers hiked across Croatia and the Dalmatian islands in October raising over €90,000. Special thanks to Gertrude and Diane O'Brien who have raised over €75,000 in 15 years. Thanks also to staff members, Tommy Beatty and Breda Doran, who raised over €50,000 through their treks for us!



Some of our wonderful Mini Marathon Team 2019!



An Taoiseach, Leo Varadkar TD with Jason Doyle, Managing Director, Bewley's, celebrating Ireland's *Biggest Coffee Morning for Hospice Together with Bewley's*



Special thanks to Carroll and Kinsella Blackrock for their continued support of a courtesy car for Blackrock Hospice. Pictured are Ken Carey and Joe Kinsella handing over the keys to Ger Tracey and Tina Connell of Blackrock Hospice



Sincere thanks for the Institute of Directors in Ireland who raised over €21,000 at their annual Christmas members' lunch. Pictured are Thora Mackey and Sharon Kirwan with Director of Fundraising and Communications Eleanor Flew.



Alma McArdle, has raised €100,000 since 1999 through her annual coffee morning. She is pictured here with Eleanor Flew, OLH&CS.



Sean O'Kiersey accepts a *Hosting the Hosts* award from Veronica Campbell of Bewley's. Pictured with Eleanor Flew, OLH&CS, Sean and his wife Sheila have raised almost €40,000 at their annual coffee morning.



Announcing that Aviva Ireland was continuing as title sponsor of *Light Up A Life* for 2019 are Brian O'Neill, Head of Communications, Brand & Sponsorship with Aviva Ireland and Audrey Houlihan, CEO, OLH&CS



Special thanks to John Kelly, Gerry McDonagh and all of the Wine and Cheese Committee who celebrated the 20th anniversary of their event in 2019 – it has raised an incredible €514,000!



Mr. William Tilly's spectacular Christmas lights display on Bath Avenue raised over €15,000 in 2019. These lights have delighted passers-by since 2005 and raised more than €135,000.



The Sea of Change Choir singing at the 25th annual 'Speaking for Hospice' event, which has raised over €220,000. Special thanks to Paul Ellis and the committee for their on-going and tireless support.



Receiving her Hospice Hero Award from Mary Kennedy is long-standing *Hospice Sunflower Days* volunteer Geraldine Masterson. Pictured also are Mary Brien and Ann Julian from OLH&CS.



Since 2015, the Flanagan family and friends have hosted the annual 'Remembering Flexy' event in memory of Paul Flanagan and have raised over €40,000 in support of Blackrock Hospice.



Jack McMahon, along with family and friends, cycled over 600km from Mizen to Malin to raise funds in memory of his wife Ella, raising over €45,000. Pictured with Jack McMahon are Norah Fagan, Ger Tracey and Dr. Joan Cunningham from Blackrock Hospice



Our third annual 'Dignity in Death, Living in Life' event took place in September with panellists Dr Stephen Higgins and Ursula Bates from OLH&CS, former Minister Mary O'Rourke, broadcaster Venetia Quick and Robert Maguire from Massey Bros. Funeral Directors. The event was moderated by the late Marian Finucane. Also pictured is Audrey Houlihan, CEO, OLH&CS



DONOR CHARTER

Our Lady's Hospice & Care Services was established in 1879. Today, as Ireland's largest hospice, we pride ourselves on providing specialist, excellent and person-centred loving care for those with a wide range of needs from rehabilitation to end of life care.

Our core values of Human Dignity, Compassion, Justice, Quality and Advocacy, both for our patients and their families are at the heart of everything that we do. As such, our promise is to treat all our donors with respect, honesty and openness and we are truly grateful for the generous support we receive from the local and business community. We will ensure that we are accountable and transparent in all areas so that all donors have full confidence in the way in which we run our organisation and fundraising practices.

To ensure that we meet our commitment to our donors Our Lady's Hospice & Care Services will:

- Comply with the 'Guidelines for Charitable Organisations on Fundraising from the Public' as developed by the Charities Regulator
- Comply with the 'Governance Code' as developed by the Charities Regulator
- Treat all donors with respect and confidentiality
- Respect a donor's right to privacy and will comply with the laws relating to the use of personal data
- Ensure that our communications with our donors are honest and transparent
- Handle donations responsibly, wisely and for the appeal for which they were intended
- Remove donor details from our database upon request

All donations will be:

- Handled responsibly and to the greatest benefit of the beneficiary
- Handled with the highest level of accuracy and transparency and financial records will be kept to ensure accountability and tracking

- Acknowledged promptly. (Please note that this is not always possible if we do not have sufficient or correct contact details)
- Applied to that purpose to which they were donated. If that area has since been fully funded or the funds are no longer required in that area, the donor will be contacted and an alternative funding need will be suggested
- Subjected to an annual audit by a firm of independent Auditors and our annual reports and audited financial statements are on our website at www.olh.ie and also on the Companies Registration Office website (www.cro.ie)
- We prepare our financial statements in accordance with FRS102 and Charities SORP (Statement of Recommended Practice)

Our Lady's Hospice & Care Services staff will:

- Treat all donors with respect, honesty and openness
- Be transparent, accurate and honest
- Achieve the highest standards of professionalism at all times
- Seek to minimise costs relating to fundraising activities
- Inform our donors about our services, our mission, developments and the impact their donations achieve
- Provide donors with access to the procedures for making and responding to complaints. To see more please visit www.olh.ie
- Give truthful and forthright answers to questions or queries donors might have about fundraising or the organisation

TOGETHER FOR HOSPICE - THE NATIONAL HOSPICE MOVEMENT REPORT

2019 was an exciting year for specialist hospice and palliative homecare providers across Ireland, as local groups came together to create a new national brand and ‘Together for Hospice – the National Hospice Movement’ came into being, formerly known as ‘Support Your Local Hospice.’

Together for Hospice is the official fundraising body that represents 26 independent groups working together at the heart of local communities all across Ireland and it exists to support these frontline services to fundraise collectively at a national level.

The work of the group is overseen by a Governance Group consisting of: Chair, Audrey Houlihan, CEO, Our Lady’s Hospice & Care Services, Dublin; Fintan Fagan, CEO, St. Francis Hospice, Dublin; Joe Hennebery, Chairperson,

Kerry Hospice Foundation, Kerry; and Veronica Larkin, Executive, North Westmeath Hospice, Westmeath. Together for Hospice is based at Our Lady’s Hospice & Care Services as host site and its activities are coordinated by a National Projects Manager also based at Our Lady’s Hospice & Care Services. Together for Hospice would like to acknowledge and thank Pat Quinlan, CEO of Milford Care Centre, for his support in the evolution of the movement.



Together for Hospice coordinates two national fundraising campaigns; 'Ireland's Biggest Coffee Morning for Hospice Together with Bewley's,' and 'Hospice Sunflower Days.'

Hospice Sunflower Days, the annual national hospice flag day, raised over €790,000 representing a 19% uplift from the previous year. We are delighted to say that this is the most successful Hospice Sunflower Days on record. We would like to thank our long-term ambassador and friend, Mary Kennedy for her on-going support of hospice care.

Ireland's Biggest Coffee Morning for Hospice Together with Bewley's also reached an exciting milestone in 2019, raising over €2 million for the first time in the 27 year history of the campaign, a 13% uplift from the previous year.

Over 3,500 coffee mornings took place all over Ireland to support hospice care. A special highlight of the

campaign was the involvement and support of actor Domhnall Gleeson who spent time visiting with staff and patients at St. Francis Hospice in Raheny. We also hosted our first ever live televised coffee morning with Ireland AM, broadcasting live from Our Lady's Hospice & Care Services featuring interviews with supporters Ken Doherty, Shane Byrne, Martin King and Ian Dempsey.

We would especially like to thank and acknowledge our national campaign ambassador, Maia Dunphy, for being so generous with her time and supportive of hospice care.

On behalf of all specialist hospice and palliative homecare providers across Ireland, we would like to thank our long-standing sponsor Bewley's for their generous and dedicated commitment to hospice care across Ireland.

Profit and Loss Report for the period January to December 2019.

Income			
	Text to Donate	€1,698.19	
	Bewley's Sponsorship	€45,000.00	
	Hospice Contributions	€189,964.78	
	National Website Contributions	€27,000.00	
	Refund	€268.00	
Total Income			€263,930.97
Expenditure			
	Creative/Digital	€28,861.90	
	Printing and Fulfilment	€88,026.49	
	Media and PR	€64,201.28	
	Campaign Management	€59,293.56	
	Professional Fees	€2580.54	
	Refund	€4,336.94	
	Campaign Sundries	€1,820.65	
Total Expenditure			€249,121.36
Profit/Loss			€14,809.61



VOLUNTEER SERVICES REPORT

Jimmy Scurry and Mary Brien
Volunteer Co-Ordinators

We have a rich tradition of volunteering in our culture, it's engrained in each of us, and throughout our life journey it becomes part of who we are and what we do. Here in OLH&CS we see first-hand evidence of that volunteering tradition throughout each day of the year from each of our amazing 330 volunteers. Their presence, and what they have to offer, both enriches and enhances the quality of care and service that we provide for our residents and patients.

During 2019, our volunteers played a key part in the celebrations of our 140th anniversary. A group that has been formally in place since 1992, they have played a significant role in the development and progress of Our Lady's Hospice & Care Services into the organisation it is today. We are always looking at ways to develop and improve on our volunteer program.

Revised TY Student programme

We changed the format of our TY (transition year) programme which brought students in for a week. This has been replaced with a 10

week programme, which enables the student to come on the same day, once a week for ten weeks. This format allows them to build up a stronger rapport with residents in Anna Gaynor House, volunteers and staff, and to become more confident in carrying out their tasks. It also helps them to gain a much broader knowledge and experience of volunteering in a healthcare setting. The new format has been well received by both the TY Students and our Volunteers. This year we welcomed 82 TY Students and four undergraduate students from universities in the USA.



TY Student intergenerational program

In 2019, we started a new TY Student intergenerational program in CRU which linked four TY students from Synge Street CBS Secondary School with patients in CRU.

Every week students came in to visit and exchange stories of what it's like growing up in their community. The patients shared similar stories about what it was like for them when they were the students' age. The students have learned so much during their time here. They have a richer appreciation of how the patients managed and coped during really difficult times. Students and patients also worked on various art projects together. Between them they have built up a fantastic rapport and it is one of the highlights of their week!

Coffee Shop/ Coffee Dock

Our Coffee Shop/Coffee Dock volunteers in Harold's Cross play an important role in supporting the delivery of our service in each area. We are so grateful for their fantastic commitment and contribution. During 2019, the hospitality team took

over the management of the weekly rota for coffee shop volunteers.

Volunteer Drivers

We welcomed a number of new volunteer drivers to our teams for both sites. They do a fantastic job each week collecting patients from their homes, bringing them in to Day Hospice and dropping them back home. Our drivers also transport residents and patients from both our extended and palliative care units to outpatient appointments across the city.

Cognitive Stimulation Therapy programme

The new weekly Cognitive Stimulation Therapy programme is supported by a volunteer who assists the occupational therapists by meeting and greeting service users as they arrive. They also sit and talk with them and offer some refreshments to make them feel comfortable before their therapy classes begin.



2,912

Tea/Coffee rounds
across palliative &
extended care units



240

Patient care
volunteers



15,000

phone calls made
to supporters



CRU Music/Entertainment

We collaborated with CRU to introduce musical entertainment for patients on the second Thursday of every month. This is proving to be a real success and a great way for the patients in CRU to have a lovely evenings' entertainment signing along to some of their favourite songs.

Afternoon Tea

Volunteers help out with the new weekly afternoon tea for palliative care patients in Harold's Cross. It's a wonderful opportunity for the patients to have a nice break from the everyday and enjoy each other's company.

Garden Party

Each year volunteers organise a garden party for Anna Gaynor House Residents and their families. This year we had a fantastic day with lots of good food, refreshments and musical entertainment. The weather was glorious throughout the day. Our residents, their families, volunteers and staff really enjoyed the occasion.

Volunteer Service Recognition Awards

A number of volunteers received recognition award certificates from Mary Flanagan, our Director of Nursing & Care Services, for their dedicated service. To think that some of our volunteers are with us for 20+ years is truly amazing. There was fantastic attendance and a great day was had, with food, refreshments, musical entertainment and dancing throughout the afternoon.

Volunteer Summer Party Blackrock Hospice

To celebrate our volunteers, we had a lovely evenings' entertainment with members from a local flower arranging club giving demonstrations as well as music and refreshments.

Fundraising

Thanks to the continued support and dedication of fundraising volunteers, we are able deliver a wide range of campaigns and events each year. Their enthusiasm and spirit is constant. No matter what tasks they are asked to do, they complete them with energy



56,250 Kms
driven by our
volunteer drivers.



38
volunteer drivers



1,000
hours of data entry



and diligence as they know that each contribution is a vital part of making our campaigns a success. Their help managing administration tasks and phone calls at reception is invaluable, particularly at very busy times.

Nothing is too much trouble for this special team: packing envelopes, separating raffle tickets, sending out t-shirts, packing up coffee orders or sending out Christmas merchandise. As always, we cannot express how much our volunteers mean to us and the massive value of their contribution without which we would be lost. In May 2019 we celebrated National Volunteer Week with a social event including bingo and ice-cream in the Rose Garden in Harold's Cross!

Hospice Spring Raffle

The Hospice Spring Raffle is the first fundraising event of the year. Volunteers assist with making and answering phone calls to donors. It is wonderful to hear them chatting to our steadfast supporters, remembering a loved one or hoping to win a fabulous prize.

Sunflower Days

Sunflower Days is the flag day for hospice care nationwide and is supported by approximately 300 volunteers annually. The weekend is very special to our volunteers as they meet many thousands of people in the various locations where they are collecting on our behalf - shops, supermarkets and churches.

Women's Mini Marathon

This is a very popular event with our supporters. Fundraising volunteers are key to organising the distribution and delivery of sponsorship cards and T-shirts. They also help to host a post-event celebration on site in Harold's Cross, where they welcome and thank the participants.

Ireland's Biggest Coffee Morning

Together for Hospice with Bewley's

This event keeps volunteers busy for up to six weeks before the big day, preparing coffee packs and arranging delivery to all our wonderful hosts. A mixture of individuals and companies take part every year and approximately



7,500
Packs prepped
for events



300
Sunflower Days
collectors



82
Transition year
students



900 coffee packs were distributed last year alone.

Light Up A Life

Light Up A Life is a favourite amongst our volunteers as it is the biggest campaign of the year. The volunteers support the team for eight weeks, which includes the lead up to the day of the event, on the day itself and in the aftermath. On the day 180 volunteers are on site helping the day to run smoothly.

*“Without volunteers,
we’d be a nation
without a soul”*
Rosalynn Carter



If you are interested in volunteering at OLH&CS, please contact one of the following volunteer co-ordinators or visit our website olh.ie/volunteering for more information.

For volunteering in patient care or bereavement services, contact Jimmy Scurry on Tel: 01 406 8822 or by email at jscurry@olh.ie

For volunteering in the fundraising department, contact Mary Brien on Tel: 01 4911072 or by email at mbrien@olh.ie



144
hours of musical & movie entertainment



180
volunteers supporting Light Up A Life



1,000
hours distributing collection buckets



ISABEL COTTER, CELEBRATING 28 YEARS AS A VOLUNTEER

A volunteer in OLH&CS for more than 28 years, Isabel Cotter has experienced many changes in the organisation and the work of volunteers over the years.

As school secretary of St. Mary's College in Rathmines she was in regular contact with the Hospice, who would phone looking for chaplains to visit the patients. During a call with Sister Francis Rose, a seed was sown, and when she retired Isabel offered her services to the team.

"Francis Rose was thoughtful and kind, you knew this because she met each patient at the front door of the main building, greeting them and their families. This set the standard of welcome and reassurance for which the Hospice is so well known."

Around this time, Francis Rose and the Board were keen on the idea of developing a volunteer support service and Carol Mullan was appointed co-ordinator.

"Initially there were five in the volunteer group, each of us was rostered on two days a week for three to four hours or longer if needed! This included assisting with evening meals from 7-9 pm," she recalls.

"We managed organisational and clerical tasks, such as training and visiting. We shared our concerns and advice on how to approach the unusual situations that would arise – this included understanding how rigor mortis affects the body; knowing what to do if a patient dies on our watch; or standing as witness at a wedding in Palliative Care."

As the service was being developed, she explains that many questions were asked in order to tease out the best approach.

"What should we do? How would we fit in with the staff? To work this out, we were placed on a ward for a day. This initiation process clarified our role as a support to staff. We had no nursing duties, we were helpers, a flexible resource. This agreement created trust between staff, patients and among ourselves and gradually we integrated into the work at hand."

It became clear that a range of particular skills was needed.

"We felt that patients needed us to be comforting and peaceful. We set about creating a kind, placid, listening, responsive persona. We realised it is important to be at the level of the patient, and recognise their worry and anxiety. After all, they do not want to be ill. Above all, we knew we needed to take a deep breath and leave our own troubles at the door."

Describing the difference volunteering makes in the lives of those who support staff and patients she says, "I believe that a new dimension grows in the life of a volunteer: the resilience that arises from listening with attention. We see ourselves as a cushion between patients, families and staff."

Taking on unusual jobs has been a speciality for Isabel, who also played an important role in developing the Hospice's Mixing Bowl recipe books. This project originally driven by CRU's Dr Sheela Perumal involved talking with people from across the services.

The best surprise I enjoy as a volunteer, year after year, is how happy I feel. I bring this happiness home with me every day.

Her experience has taught her that, “distractions work marvels in alleviating distress. When we bring tea, we get talking, we say, ‘nice to see you’, we are cheerful, we reassure.

“While a patient may say, ‘I am sad, I am angry, I am gloomy’ we know the art of being friendly but not overstepping.”

Isabel shares her personal mantra: “Help me to remember that nothing will happen to me today that I can’t handle.” She adds, “Friendship is the great treasure which every volunteer discovers: rapport with staff, patients, and with each other.”

Over the years Isabel has adapted to many roles across the organisation and one long-running role was in the shop in Palliative Care.

“For many years I helped to run the shop, which was operated by one employee and supplemented by volunteers. We sold magazines, papers, books, minerals, homemade cakes, sandwiches and sweets. My experience working in a newsagent proved invaluable as I could supply all goods wholesale! We were delighted how much patients liked to come by to pass the time of day and enjoy a gossip about everyday things like the news or the weather.”

In 1992, the Light Up A Life fundraising event was introduced by Carol Mullan and Isabel played an important role in organising it for many years.

“When the tree, provided by Dublin City Council, was located at the roundabout it made for a very special atmosphere. The crowds gathered closely and patients and their families stood by inside the windows to watch the lighting of the lights. People were mesmerised by the experience. It was very emotional, with a very strong feeling of community and spirituality.

“This special celebration soon became the central feature in the Hospice calendar. It was my job to set up the programme, contact the families, arrange the stage and singers, supervise the Christmas tree lights, and to prepare the candles in memory of those who had died.”

In mid-1993, a dozen volunteers worked together to take over a space, in what is now Day Hospice, to use as a coffee shop where patients and their visitors could enjoy some time away from the wards.

“Volunteers organised all the catering – fresh sandwiches were made on site and homemade cakes

and sweet treats were provided for sale. Families found it to be a real haven, somewhere they could take a break, and they really enjoyed the opportunity to chat to volunteers.”

Taking on unusual jobs has been a speciality for Isabel, who also played an important role in developing the Hospice’s Mixing Bowl recipe books. This project, originally driven by CRU’s Dr Sheela Perumal, involved talking with people from across the services.

Those who submitted recipes were encouraged to share their personal story in conversation. Working with another volunteer, Isabel took on the role of interviewer and thoroughly enjoyed the experience recording a wealth of stories.

“Ultimately, the job of a volunteer is to make sure patients feel loved, important, useful and involved. This project was a real joy as it gave us a chance to work with and chat to residents, patients and staff who contributed to these special books and, as we say in the introduction, “The memories of great food are the very memories of our lives.”

In summing up her experience as a volunteer, Isabel explains that, “The best surprise I enjoy as a volunteer, year after year, is how happy I feel; I bring this happiness home with me every day.”



HUMAN RESOURCES SERVICE REPORT

Mary Kirwan
Director of HR

The Human Resources Service contributes to the success of OLH&CS and employees by developing and facilitating an environment that values people, efficiency and delivers excellent care.

The HR Strategy, aligned to the Organisation Strategy 2017 – 2022, has continued to improve existing processes and encouraged new approaches to Partnership, Learning & Development, Performance, Staff Engagement, Workforce Planning, Leadership, Culture and Evidence & Knowledge.





We support employees throughout their employment life cycle. This starts at the hiring process, continues through employment and goes into retirement. As at December 31st 2019, OLH&CS had 622 staff, 525 whole time equivalents (WTE) and 199 people receiving pensions. Across the organisation there are 570 employees (482.01 WTE) funded by the HSE and 52 (42.49 WTE) roles were approved by the Board of Directors and funded through fundraised income. All posts in Our Lady's Hospice and Care Services are aligned to Department of Health salary scales and any other applicable rules, as appropriate as overseen by our Remuneration Committee. The organisation is committed to supporting staff in meeting performance requirements through a robust

performance management process. We acknowledge and appreciate that all employees contribute directly to the success of our organisation and we are committed to ensuring our staff have the best possible experience while working for us.



People come to us for their employment experience for a number of reasons. These are often due to the unique set of benefits we offer ranging from our culture, career opportunities, benefits package and work environment. In 2019, we were delighted to welcome 58 staff on-board and 59 staff left our employment. We continue to seek feedback from our staff via on-boarding and exit questionnaires to inform changes in our practise.

Despite a moderate turnover of 5.24%, attracting and retaining talent continued to challenge with

Culture	Career	Benefits	Environment
			
Defined mission & and core values	Progression opportunities and career development	Pension	Proactive approach to health & wellness
Strong heritage	Leadership training	Employee Assistance Programme (EAP)	Friendly environment
Patient-centred not-for-profit organisation	Career development	Support for education	Diversity committee
Defined organisation strategy	Continuous professional development (CPD)	Free on-site parking	Employee Wellbeing Committee
Staff recognition awards	Education & training	Subsidised meals	Staff Council
High staff retention	Succession planning	Cycle to work scheme	Residents' Forum (Harold's Cross)
Employee engagement	Mentor programme	Tax saver scheme for public transport	Landscaped gardens & grounds

58 competitions managed through the year. This is indicative of a tighter labour market in line with an increase in economic activity. A huge emphasis was placed on digital networking, resulting in significant advertising cost savings to the organisation. Succession planning was introduced to maximise the potential of our internal staff and to assist with identifying any training gaps.

In line with strategy, we continued to further enhance our approach to Learning, Training and Development to develop a culture that prioritises learning. Over the course of 2019, we redeveloped our training space, continued to build on our mentoring programme, conducted a Training Needs Analysis across our Nursing, Clinical Services and Non-Clinical Services and enhanced our existing on-line training system. In collaboration with Tallaght Training Centre, we launched a QQI Level 5 programme aimed at Non-Clinical Services staff to maximise their career potential and develop their confidence, skills and knowledge. Five staff from OLH&CS participated along with seven from other hospitals. We also launched a QQI Level 6 leadership course aimed at those wishing to further their career in a leadership role or to enhance or refresh their existing leadership skills. 14 staff from our own organisation participated in this training with three from other hospitals.

38 staff attended our People Management training programme with 56 staff attending our bi-monthly HR Information sessions on items of interest such as Conflict Management, Pensions, Communications, Competency based interviews and GDPR. 59 staff attended our staff orientation programme.

We continued to ensure that our mission and our core values of human dignity, compassion, justice, quality and advocacy were translated into every aspect of the organisation via the work of our Mission Committee and underpinned by our Staff Council, Employee Wellbeing Group, Diversity Group and Residents' forum.

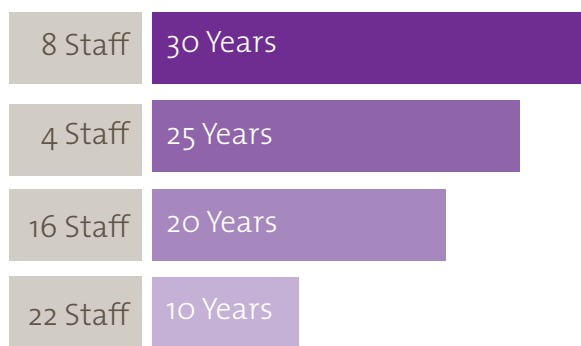
Many wonderful initiatives took place to promote and integrate health and well-being, diversity, promotion of our Staff Council and the work of our Residents' forum. We were delighted to once again be recognised with The Gold Standard Active@Work Award from the Irish Heart Foundation.

Alongside the regular promotion of health and wellness by our Employee Wellbeing Group, we have an Employee Assistance Programme, which is a confidential counselling service that provides support to our employees and their families. In 2019, 54 EAP files were opened and received support or information.

During 2019, we remained committed to valuing everyone in our organisation as an individual and promoting and supporting diversity in our workplace through many initiatives and promotions focused on creating change through education, collaboration and vigilance. 19 staff from across our organisation participated in the Pride Parade in June 2019.

Our Staff Council led an Ideas Programme initiative focusing on cost savings which led to the establishment of our Green Committee. This committee has overseen the introduction of many environmental friendly ideas across our organisation.

In 2019, a number of employees reached significant service milestones, these were recognised with pride at our Annual General Meeting.



Every year we celebrate Mission Hero Awards to acknowledge individuals and teams who, in addition to doing an excellent job, demonstrate an exceptional commitment to our mission and core values. In 2019, we had five very deserving winners of this award:

- Miriam Taaffe, Clinical Nurse Specialist, CPCT, Harold's Cross
- Zara Dagg, CNM1, Blackrock Hospice
- Elaine Cox, HCA, Harold's Cross
- Maria Chivulescu, Daniela Stefan and Ramon Gonzalo Borje, Catering Staff, Blackrock Hospice
- Volunteer Co-ordinators Jimmy Scurry and Margot Kenny and all the volunteers

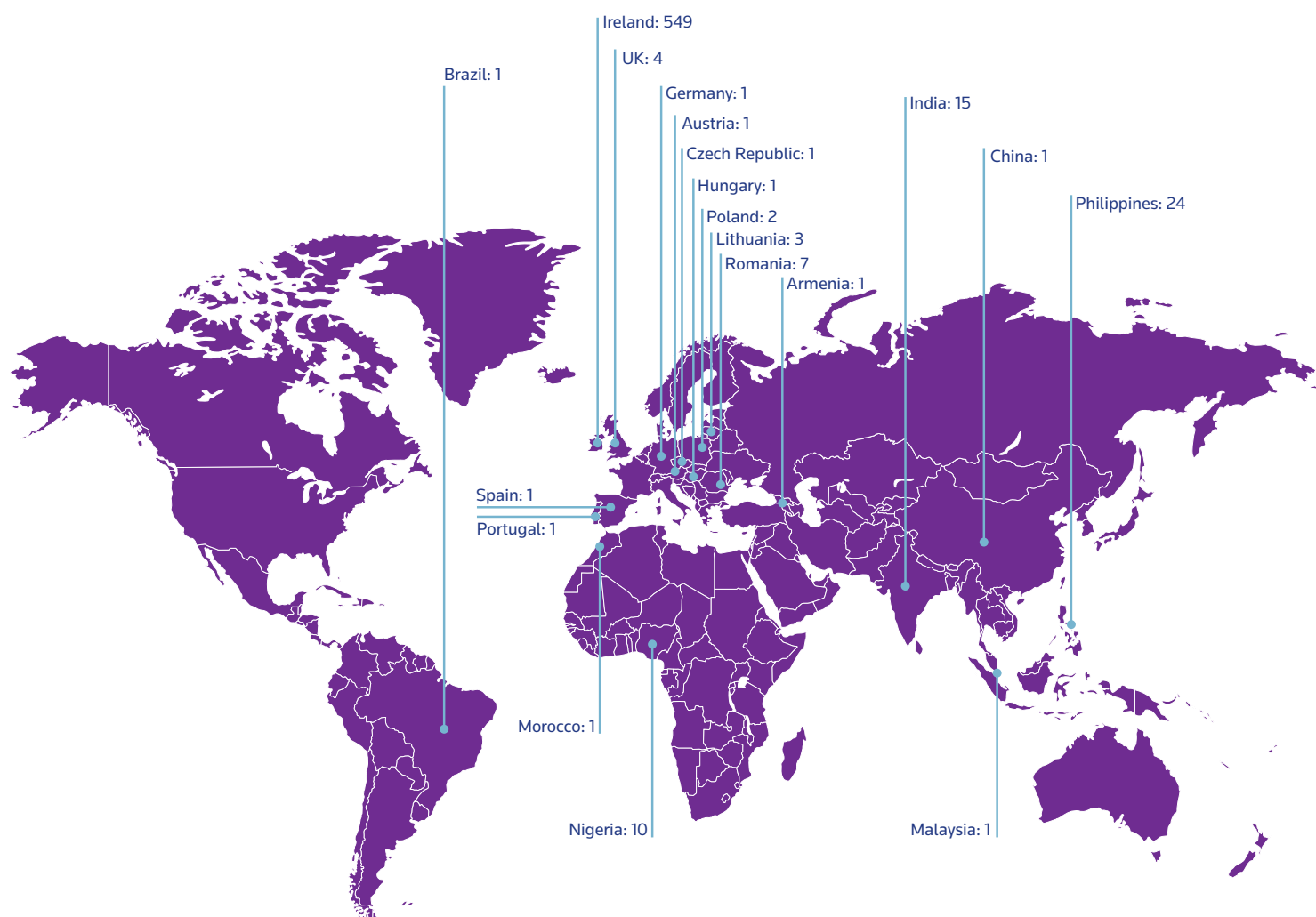
In Human Resources, we are committed to resolving workplace grievances in a timely manner. A total of 12 grievances were submitted in 2019 with 5 being referred on to a third party. We remained committed to building strong partnerships and to providing best practise advice and support to all. Our philosophy is that all employees contribute to the success of our organisation and we are committed to ensuring that staff have the best possible experience while working for OLH&CS.

OUR PEOPLE

Our Lady's Hospice & Care services acknowledges and is grateful for the diversity of cultures of our staff.

We employ 622 (525 whole time equivalent staff) from 17 different countries each of whom brings with them a wealth of professional skills and experience.

We are honoured to have more than 330 volunteers who generously give their time and energy to help us create a special experience for residents, patients and their families. They too bring a range of knowledge from occupations, different cultures and valuable life experience.





FINANCE REPORT

Simon Costello
Head of Finance

Results for the Financial Year

The Directors are satisfied with the results for the financial year. Our Lady's Hospice & Care Services recorded an overall surplus of €2,158,240 in the year to 31st December 2019, compared to a surplus of €1,005,646 in the previous year. This surplus is largely attributable to very high legacy income in the year of €3.6m.

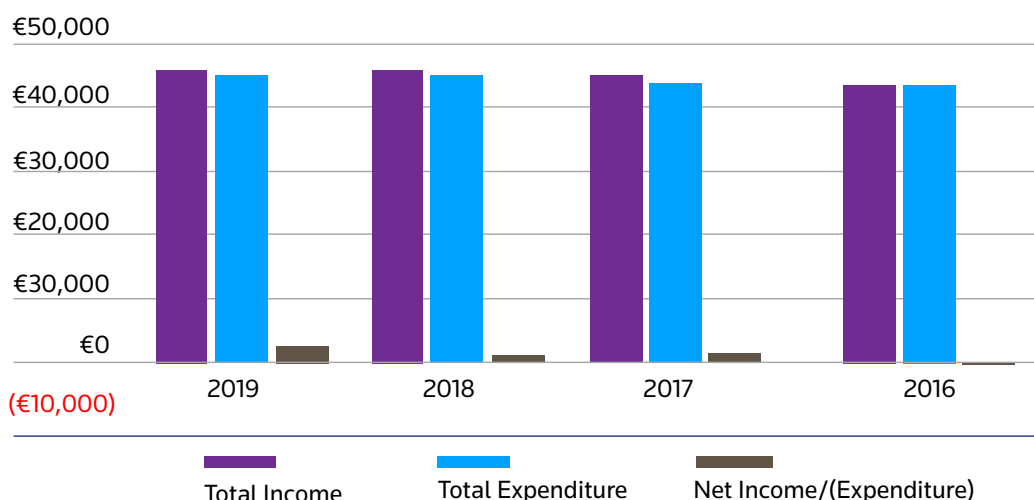
Separately, the company received a once-off HSE capital grant income of €196,507 in relation to an ICT telephony project and €300,000 of fit-out monies towards the Wicklow Hospice. The Statement of Financial Assets highlights the results between restricted and unrestricted activities. Restricted activities relate to all HSE funded healthcare activities along with restricted income and expenditure from the public in line with donor wishes.

Fundraising activities generated income of €7m of which €1.6m was paid in respect of pay and non-pay expenditure for healthcare activities in order to maintain the same level of care and services to patients as previous years. During the year €0.2m (2018: €0.3m net of grant) was paid in relation to final costs of the construction of the New Palliative Care Unit.

The company provided a loan to Wicklow Hospice Foundation of €750k in order to help achieve completion of the new 15 bed Wicklow Hospice. When the transfer of Wicklow Hospice takes place in 2020, it is likely that the €750k outstanding loan balance will be offset against the value of the land and buildings resulting in the recognition of a donated asset equivalent to the net figure.

The majority of the remainder of monies raised went to cash reserves. The cash inflow from operating activities for the financial year was €2.6m.

Financial History, in €'000



The company had €7.6m of cash at bank (excluding the 3rd party funds) at the financial year end of which €208k related to investment cash. These cash balances together with the investment portfolio of €0.2m are available for the future development of the healthcare facilities and to maintain the level of services at the current levels for the foreseeable future (at least twelve months). The company had an overdraft on its HSE funded healthcare activities at 31 December 2019 of €0.8m.

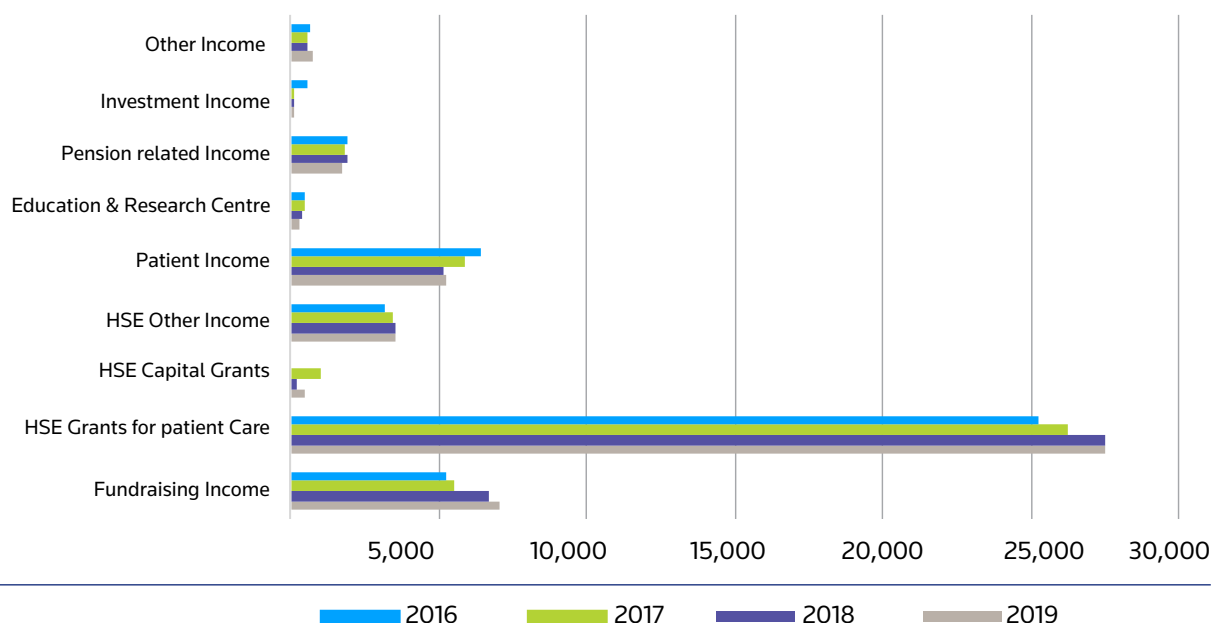
Income Analysis

- HSE Grants for patient care increased in line with pay restoration agreements for 2019.
- Patient Income is primarily made up of patient private health insurance income which has seen a strong downward trend since 2015 of €1.4m. However, 2019 maintained the same level of income as the prior year.
- Private health insurance income plays a vital role in assisting with the day to day running of the organisation and provides much needed funding towards our high quality services that benefit so many and of which we are so proud.
- Fundraising income had increased substantially in 2018 primarily due to some large legacies and this trend continued once again in 2019 with just over €3.6m of legacies (2018: €3.6m). Donations also increased in 2019 by almost €0.3m.

Expenditure

- Fundraising costs for 2019 remained at €1.2m and at 18% of the income raised from legacies and donations.
- Expenditure on Charitable Activities for the year was €42.3m, being a decrease from 2018 of €0.5m. There was an increase of €1m regarding the implementation of various national pay restoration agreements. However, this increase was offset by cost containment measures between pay and non-pay of €1.1m in order to combat the fall in private health insurance income and to support a HSE budget adjustment on our Fair Deal model. Lump sum payments also decreased by €0.4m on the prior year. Charitable Activities represent specialist Palliative Care, Community Reablement Unit (CRU), Care of Older Persons, Rheumatic & Musculoskeletal Disease Unit (RMDU) and Education & Research.
- Similar to last year, payroll costs accounted for 81% of total expenditure.
- Non-Pay expenditure was €7.9m (19% of total), which is a decrease of €0.3m on the 2018 spend.

Income split, in €'000



Staff Numbers and Costs

There was an average of 525 whole time equivalents employed during the year. Total payroll costs were €34m for the year. The gross pay of the CEO for the year was €119,690.

The number of employees, including medial staff, whose emoluments, excluding pension contributions, were in excess of €60,000:

	2019	2018
€60,000 - €69,999	77	72
€70,000 - €79,999	9	11
€80,000 - €89,999	5	4
€90,000 - €99,999	2	2
€110,000 - €119,999	1	1
€120,000 - €129,999	0	3
€150,000 - €159,999	1	0
€170,000 - €179,999	0	1
€200,000 - €209,999	0	2
€210,000 - €219,999	0	1
€230,000 - €239,999	1	0
€240,000 - €249,999	2	0
€250,000 - €259,999	1	0
€290,000 - €299,999	1	0

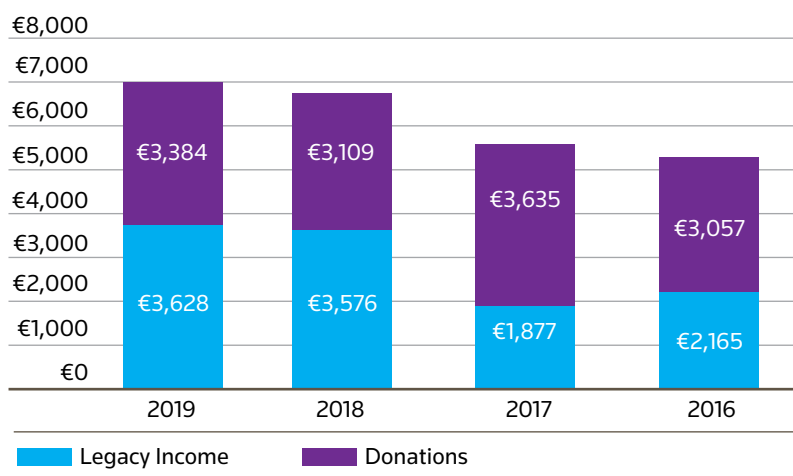
Reserves Policy

The key principle is that our reserves on non-HSE funded activities should be sufficient to manage a severe situation in which our cash inflows significantly fail to meet our cash outflows. In such a “worst case” scenario, the reserves can be drawn upon in order to meet operating cash shortfalls, specifically the payroll costs associated with non-HSE funded staff members. In addition to this, any additional cash available is primarily held in order to meet future capital expenditure requirements or other needs as may arise from time to time.

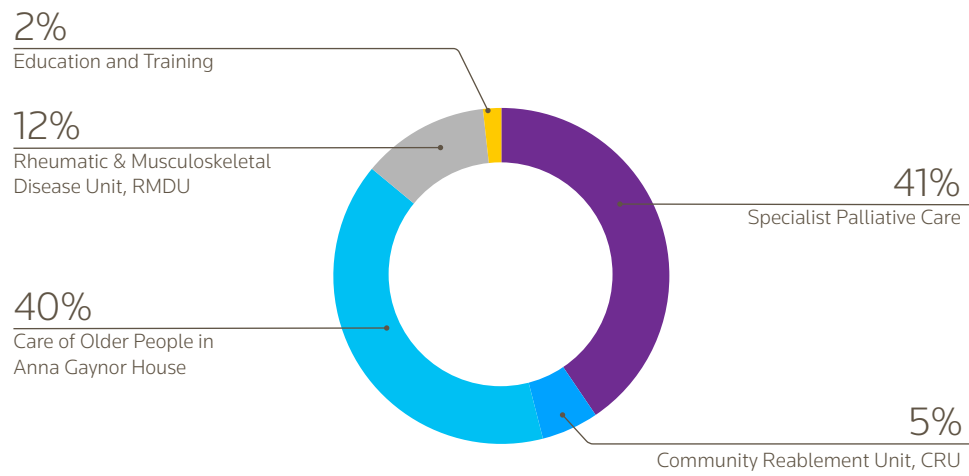
As noted earlier, restricted activities relate to all HSE funded healthcare activities along with restricted income and expenditure from the public in line with donor wishes. Please see below for a split of funds held by the company at year-end:

	Total 2019 €	Total 2018
Restricted capital funds – HSE related	19,085,109	9,364,664
Restricted capital funds - Donor related	3,240,851	2,464,953
Restricted funds – HSE related	(191,526)	(273,043)
Restricted funds – Donor related	90,925	97,225
Unrestricted funds – OLH&CS	29,546,583	27,959,901
Total funds at end of financial year	51,771,942	49,613,700

Fundraising Income Split, in €'000



2019 Expenditure on Charitable Activities, in €'000



Our Lady's Hospice & Care Services

Statement of Financial Activities for the financial year ended 31 December 2019

	NOTES	UNRESTRICTED € 2019	RESTRICTED € 2019	TOTAL € 2019	UNRESTRICTED € 2018	RESTRICTED € 2018	TOTAL € 2018
Income from							
Donations & Legacies	3	6,124,772	887,351	7,012,123	5,776,347	909,073	6,685,420
Charitable Activities	4	347,526	38,571,694	38,919,220	380,843	38,279,264	38,660,107
Investment Income	5	26,193	-	26,193	47,653	-	47,653
Other Trading Activities	6	628,606	-	628,606	563,836	-	563,836
TOTAL INCOME		7,127,097	39,459,045	46,586,142	6,768,679	39,188,337	45,957,016
Expenditure on							
Raising funds	7	1,867,378	245,546	2,112,924	1,780,867	319,072	2,099,939
Charitable Activities	8	3,689,784	38,611,228	42,301,012	4,003,815	38,837,136	42,840,951
TOTAL EXPENDITURE		5,557,162	38,856,774	44,413,936	5,784,682	39,156,208	44,940,890
Net income/(expenditure) before other recognised (loss)/gain		1,569,935	602,271	2,172,206	983,997	32,129	1,016,126
(Loss)/gain on financial as- sets at fair value	10	(13,966)	0	(13,966)	(10,480)	0	(10,480)
Net Expenditure before taxation	10	1,555,969	602,271	2,158,240	973,517	32,129	1,005,646
Taxation	12	0	0	0	0	0	0
Net Income		1,555,969	602,271	2,158,240	973,517	32,129	1,005,646
Transfer between funds	13	30,711	(30,711)	0	(1,816,186)	1,816,186	0
Total funds at beginning of financial year		27,959,903	21,653,799	49,613,702	28,802,572	19,805,484	48,608,056
Total funds at end of financial year		29,546,583	22,225,359	51,771,942	27,959,903	21,653,799	49,613,702

Balance Sheet 2019

	NOTES	2019 €	2018 €
Fixed Assets			
Tangible Assets	15	79,978,379	82,242,795
Financial Assets	16	231,471	282,424
		80,209,850	82,525,219
Current Assets			
Stocks	17	313,157	326,966
Debtors: Amounts falling due within one year	18	7,324,868	6,103,755
Investment	19	207,840	147,353
Cash at bank and on hand	20	7,538,119	6,856,785
		15,383,984	13,434,859
Creditors: (Amounts falling due within one year)	21	(5,183,104)	(7,707,588)
Net Current Assets		10,200,880	5,727,271
Net Assets		90,410,730	88,252,490
Capital and Charity Funds			
Called up share capital	22	2	2
Share premium	22	38,638,786	38,638,786
Restricted Capital Funds	28	22,325,960	21,829,618
Restricted Funds	28	(100,601)	(175,819)
Unrestricted Funds	28	29,546,583	27,959,903
Charity Funds		90,410,730	88,252,490

NON-CLINICAL SUPPORT SERVICES REPORT

Tommy Beatty

Capital Projects and Interim Head of Non Clinical Services

The non-clinical team provide a wide range of services, which are essential for effective and efficient day-to-day operations.

Building Services

In 2019, Building Services undertook the task of upgrading the old St. Catherine's Ward in the Harold's Cross Palliative Care Unit to facilitate the move for the new Community Reablement Unit (CRU) ward. The lighting was upgraded to more environmentally-friendly and cost-effective LED, the ward was fully repainted and bathrooms were upgraded to provide improved accessibility for those with mobility issues i.e. floor level showering facilities.

There were great improvements in both in general household waste and food waste recycling across the organisation throughout 2018. (recycling recovery chart below).

As part of our energy reduction plan, we continued to install LED lighting in various office

upgrades and changed over several heating pumps to variable speed models in the latter part of the year.

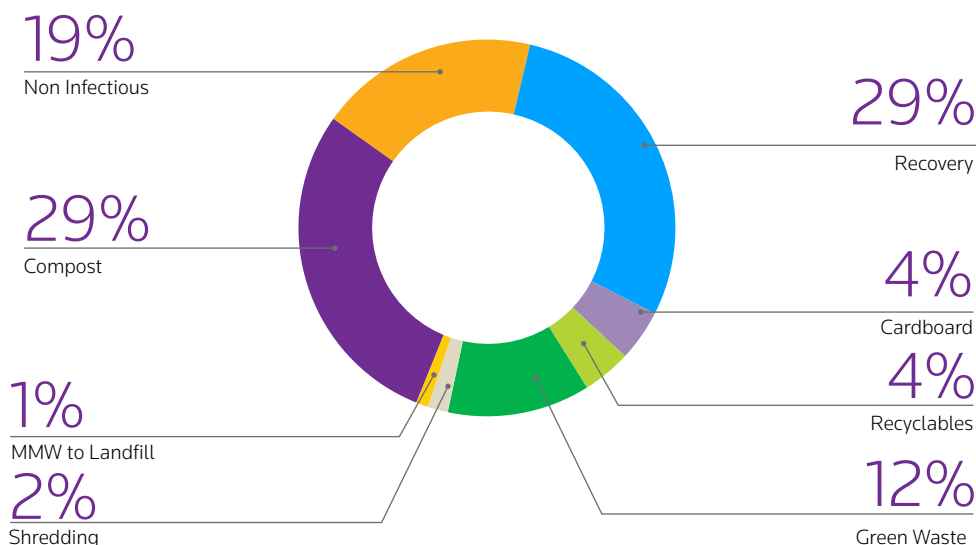
OLH&CS actively participates on the Energy Committee in partnership with the SEAI and HSE estates to support the public sector energy reduction 2030 goals.

Garden & Grounds

Every year brings new challenges and in 2019, the biggest task was to prepare for the gardens at Wicklow Hospice and work with the volunteers who will take on the role of creating the landscape around the new building and bedroom areas.

There was also an opportunity to consider changes and plan to redesign some elements of the gardens as part of the overall refurbishment of Blackrock Hospice.

Recycling/Recovery Rate 2019



The use of the Harold's Cross grounds by residents, patients, visitors, staff and the community has increased hugely for walking, relaxation and reflective time, an indication of how beneficial it is for our health and wellbeing. An increase in plant sale for the team is due to an increase in staff taking an interest in gardening.

The Garden Team was delighted to win the Chris Conlon Award 2019 for creating and maintaining the natural environment our patients can savour from their windows, outside their rooms and as they walk around the site.

Hotel Services

In March 2019, OLH&CS retained its Q Mark for Hygiene & Food Safety. This award celebrates the high standard of foods safety management systems, processes and procedures in compliance with current hygiene and food safety standards.

We held on to our Happy Heart Healthy Eating Award for another year, which recognises our healthy catering practices as well as promoting a range of healthy food and drink options for both staff, visitor and patients.

During 2019, our Catering department enjoyed fantastic success providing a number of in-house functions and events with an extensive range of catering services. These included providing refreshments for Schwartz Rounds and working closely with the multidisciplinary teams in the palliative care ward in Harold's Cross to provide a weekly afternoon tea for patients.

From June 2019, we were able to achieve a significant reduction in costs through cost-saving planning. One of the many ways we achieved these was by prioritising and streamlining cleaning functions across the site.

The team played a key role in supporting the implementing of a new worldwide programme known as IDDSI (International Dysphagia Diet Standardisation initiative), for the standardisation of texture modified food and beverages. The successful launch of new beverage modifications took place in November 2019 and new patient and resident menus will be rolled out in 2020.

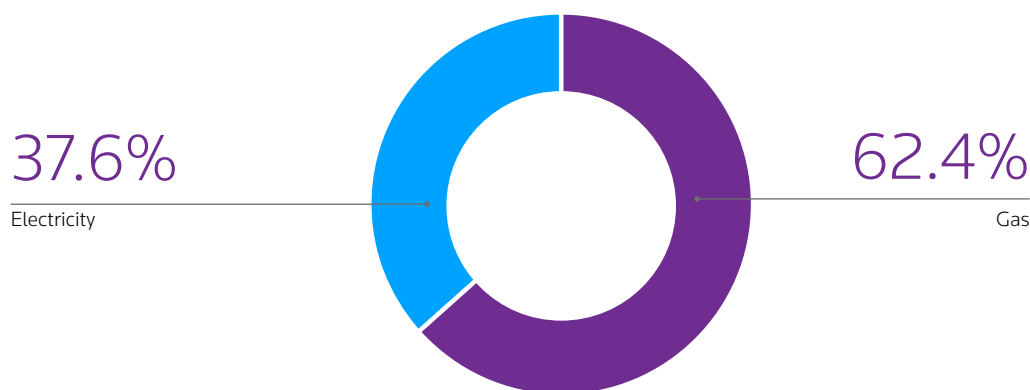
Reception

The later part of the year saw the pre-planning and commencement of designs for our new centralised main reception in Harold's Cross, which will become the main entrance on the Harold's Cross site, situated at the entrance to Anna Gaynor House, This will be providing a more open-plan reception, which will be more accessible to visitors and service users. It is hoped to have this completed in the first quarter of 2020.

Materials Management

This team ensures that the organisation is fully compliant with national and European procurement guidelines. It advises on all matters of procurement and is part of OGP (Office Government Procurement) and HBS (Health Business Services) HSE groups, with whom it engages to explore opportunities to participate in national contracts to optimise our purchasing power. The department is also responsible for negotiating the

Co2 Emissions 2019



majority of contracts to provide goods and services to OLH&CS.

On a day-to-day basis the department orders and delivers goods for all departments. Currently 567 different items are kept in stock. As well as being delivered to wards and departments, goods are issued through its Agreso system, which tracks goods from time of order through to invoice stage.

The department manages the procurement of non-stock items such as ward and office furniture, medical equipment and specific items for use in departments such as Occupational Therapy and Physiotherapy.

Information and Communication Technology (ICT)

2019 saw the ICT department focus on protecting data and providing new technology and services to support staff. There was an increased focus on providing and delivering services in-house, cutting back on external parties.

A major review and overhaul of ICT infrastructure, systems, practices, and policies took place with new policies and procedures implemented. This includes

significant work on servers, network security and maintenance procedure improvements. An external audit demonstrated the value of this work.

A new staff portal was created to replace the ageing Intranet site and provides a secure environment to share information effectively and improve team collaboration. A digital ticker tape system (running across the bottom of a user's screen) has proved an effective way to relay important messages to staff in groups or across the organisation.

The team reviewed our existing infrastructure and replaced almost 250 computers, making a great difference to staff's computing experience. Meeting rooms have been upgraded to improve video meeting capacity and to be as user-friendly and efficient as possible. A new training hub has been set-up in Harold's Cross with PCs and equipment to facilitate group training sessions.





TELL US WHAT YOU THINK

Patricia Pierce
Complaints Officer

During 2019 the process of making complaints was reviewed to improve how the organisation could be more proactive with patients and residents.

A “Tell us What You Think” form was developed to encourage patients and residents to inform us about their experiences of our services. This enables us to determine if there are areas that can be improved, reducing the possibility of a simple issue escalating to a complaint.

Feedback on the forms is returned to the wards for display on the Quality notice boards, along with actions taken, if relevant.

12 complaints were received and one was withdrawn as detailed on the opposite page. There were 41 complimentary letters/e-mails

received in 2019, detailing positive aspects of care, specific staff acknowledgements on provision of care and satisfaction with outcomes of care. These have been submitted by patients, residents and family members or carers. All of these are shared with the relevant Department/Ward/ staff members. In addition, a wide range of positive comments and reviews of our services are made on social media on an ongoing basis.

We welcome this feedback and continue to learn from it.



Complaints Statistics 2019

Category / Definition	2016	2017	2018	2019	Outcome
Access Accessibility /delays / facilities / parking / transfer issues /transport/ visiting times/other access issues	1	0	5	1	Complaint ongoing.
Dignity & Respect Alleged inappropriate behaviour / care delivery / discrimination / ethnicity / end-of-life care / other dignity and respect	2	2	3	1	Patient / family member dissatisfied with a staff member's attitude. Apology extended and staff re-training put in place. Family remained dissatisfied with outcome – advised of options.
Safe & Effective Care Adequate human resources / diagnosis/ continuity of care (internal/ external) / discharge / H&S issues / healthcare records / hygiene / infection prevention & control / patient property / medication / treatment and care / other safe and effective care.	1	1	4	7	1 complaint is ongoing. 4 dealt with to complainants' satisfaction. 1 unsuitable referral, but dissatisfied with outcome – advised of options to escalate further to HSE Complaints or Ombudsman 1 dissatisfied with outcome – advised of options to HSE Complaints or Ombudsman.
Communication & Information Communication skills / delay and failure to communicate / diverse needs / information / telephone calls / other communication and information.	3	3	2	0	
Participation Consent / parental access and consent / patients/family/relatives/other participation	0	0	0	0	
Privacy Confidentiality / hospital facilities (privacy) / other privacy	6	0	0	0	
Improving Health Empowerment / holistic care / catering /smoking policy / other improving health	1	3	0	2	Both related to closure of residents' smoking room in Anna Gaynor House.
Accountability Patient feedback / finance / other accountability	0	0	0	0	
Other	1	0	1	0	
Clinical Judgement	0	1	3	0	
Complaints Withdrawn	0	0	1	1	OLH&CS was acting in compliance with legislation when reporting concerns.



IN THE WORDS OF OUR PATIENTS



"When the hospice was initially mentioned to me in 2014, I associated it with end of life – but I since realised that the care provided by staff at the hospice only serves to enhance my quality of life".

"I look forward to going to the hospice it's given me purpose and dignity".

"I've realised it's not about end of life. It's about coming to comfort."

Roland Evans



"They keep me together. They come to see me. They ring me up. Palliative care is wonderful because it's hands on. It's a fabulous one-on-one service."

Mary advises anyone else who has been offered palliative care to avail of it.

"I think the service is amazing," she says.

"The nurses are hands on and they don't let you down."

Mary Critchlow



"The first time I walked through the corridors, I felt such relaxation, such peace," she says. "And it wasn't anything to do with death or anything like that – it was just solace. And I knew that no matter what, the nurses and the doctors and all the staff were going to help me."

"None of my friends have cancer, so I felt like I was in limbo. And then when I came to the hospice, I felt normal. I felt the normality of

it, like I'm not a person who's going to die straight away. Things are going to happen in a process. It's nice to chat to people thinking similar things.

Laura says the Hospice is more like a five-star hotel, complete with room service, and advises people to let the hospice work its magic on them."

Laura Conway



"It's so relaxed here, the atmosphere is different."

"If you ring the bell at night, they're here. Ring it during the day, they're there. They always say don't hesitate to ring, because you worry about ringing it too often. But they keep telling me that's what they're here for and to ring any time you need to."

"They've every facility you could need and there's no pressure at all. I remember I asked a nurse if I could do something with my room and she said – 'it's your room, you do what you like'."

Frances Biggs

**Harold's Cross**

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