



The Shakespeare Hospice Strategy

2023-2028

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The Shakespeare Hospice Strategy

1. Introduction

We recognise that our local hospitals, primary care colleagues, and community organisations are facing multiple pressures resulting in patients remaining in hospital for longer than is required. Often these patients are nearing the end of their lives and go on to die in hospital when their preference would be a non-hospital setting. Locally 66% of patients would like to die at home, but only 22% do so. We also know that 39% of people in Coventry and Warwickshire who die do so after being admitted to hospital as an emergency. Their length of stay in hospital is often short. The most common experience is a terminal episode of two days.

Our strategy sets out how we aim to work with our partners to support people to live well during the last stages of their life and to die well, in a place of their choice. All while supporting those left behind to live a fulfilling life after bereavement.

Our strategy sets out how we intend to achieve this, by finding solutions, being innovative and addressing current economic and workforce challenges. We recognise this will be difficult in the current climate and will regularly review the strategy during the five years.

National/local context and evidence base

The population of Warwickshire stood at 596,773 people according to data from the 2021 census. This represents an increase of 8.5% compared to ten years earlier. The gender balance was 51% female and 49% male (about the same as England as a whole). The average age of Warwickshire residents was 42 years. In terms of the age distribution of the population, those aged 65+ make up a higher proportion than those aged under 15 years:

Population by broad age group for Warwickshire (2021)



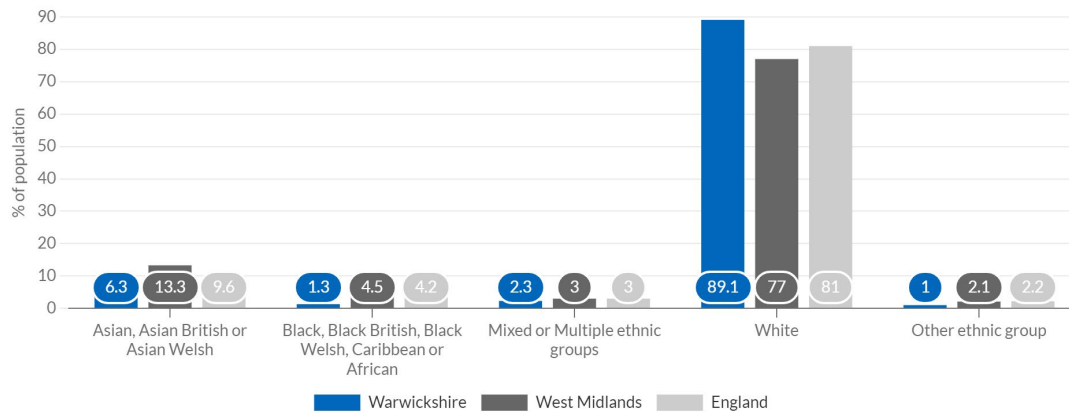
(Source: Population Report for Warwickshire, 2021: [Warwickshire County Council](#))

In absolute numbers, the over 65 population stood at 122,615. This number is projected to increase in the coming decades. (By 2043, it is projected that the proportion of over 65s will rise from 21 to 24.5%.) Although the Hospice's services are not exclusively used by older people, they

nonetheless represent the majority of service users. Therefore, it is reasonable to anticipate that we will see rising demand for Hospice service provision in the years ahead.

The population ethnicity of Warwickshire is somewhat less diverse than the population of England as a whole.

Broad ethnic groups (2021)



(Source: Population Report for Warwickshire, 2021: [Warwickshire County Council](#))

For Warwickshire as a whole, it has been forecast that the population will increase by 1.4% from 2018 to 2025. However, this includes a decrease in the ‘Working age’ population (defined as 16 to 64 years), whereas the over 70 population will increase by 14.4% and the 85+ population by 22.3%. Warwickshire County Council’s *State of Warwickshire 2022* report forecasts that the over 75 population will increase by more than 60% for Warwickshire as a whole, by 2043. The data for 2021 shows that almost 52% of deaths in hospices were people aged over 75 and, therefore, over the coming decades it is reasonable to extrapolate that the demand for hospice services will increase by more than the wider population.

The Health service use in the last two years of life Coventry and Warwickshire STP report provided a description of end of life care in Coventry and Warwickshire. Drawing on an analysis of individual level linked datasets, the report outlines the current and likely future situation.

Several main points emerge that help provide a broad sense of the findings. These are that:

- 66% of people say they would like to die at home. In Coventry and Warwickshire just 22% do so.
- People from deprived areas are more likely to die in hospital than people from affluent areas. The reverse is true for deaths in care homes.
- 39% of people in Coventry and Warwickshire who die do so after being admitted to hospital as an emergency. Their length of stay in hospital is often short. The most common experience is a terminal episode of two days.
- If patterns of care follow those observed nationally, then as many as a third of palliative patients (around 2,000 people) in Coventry and Warwickshire may have died with their pain not properly controlled.

- Over 90% attend A&E at least once in the two years prior to their death. 86% have at least one emergency admission. Around two-thirds call 111.
- 19% of those dying are in contact with mental health services. This is lower than for the Midlands region (25%).
- Patterns of service use differ radically by cause of death. People dying from cancer access all types of service (bar critical care) more than those dying of other causes; this is especially true for planned care.
- People's use of urgent care starts low and increases slowly for much of the last two years of life. There is a rapid increase a few months prior to death. The same is true for use of hospital beds.
- Use of planned care rises steadily over the last two years of life. There is then a sharp peak in the months or weeks prior to death, at which point use declines. People dying from cancer account for much of this use.

Based on the above it seems apparent that there is current unmet demand as well as projected growth in demand for hospice services in the future.

South Warwickshire Local Community Context

Within the South Warwickshire Community it is expected that another 1,000 homes will need to be built to address the increase in population size, there is an increased amount of people living longer and with complex conditions.

In South Warwickshire there is a higher than national average ageing population, and the number of those aged 85 years and over will have increased by 111.6% by 2041. It is expected that there will be an increase in children diagnosed with life-limiting illnesses. This will mean that there is likely to be more adults living with complex life-limiting conditions, needing greater support.

2. The Shakespeare Hospice

The Hospice has been caring for patients, and their families across South Warwickshire and surrounding areas for over 24 years.

The Shakespeare Hospice offers specialised care and support to patients, their loved ones and carers across South Warwickshire and the surrounding areas. Our reach extends beyond the traditional Hospice walls, providing expert support within our local community and patients' own homes.

We offer a diverse range of community-based services including Hospice at Home & Day Hospice (Adult Community Care Service), Adult Counselling, Children and Family Support Services (CAFSS) and Transitional Care Services. Our expert care is available not just to our patients but also their loved ones and those who matter the most to them. We aim to improve the lives of people who have a life-limiting illness by allowing them to decide how they wish to access end of life care and providing holistic support to those people, their carers, and their loved ones. We aim to enable those who wish to die at home to do so in comfort and with dignity. By wrapping our care around the patient, as well as their support unit, we can provide the expertise, compassion, and the time that everyone deserves, exploring what's most important to the patient, whilst helping them live a fulfilling life and plan for the future. The services of the Hospice are available to any patient, carer and family member based in South Warwickshire and the surrounding areas, who is registered with a South Warwickshire GP and affected by a life-limiting illness.

We support over **1,000** patients, families, and their loved ones each year. Hospice, palliative and end of life care share similar goals of symptom management and pain relief, patient comfort, and a focus on quality of life.



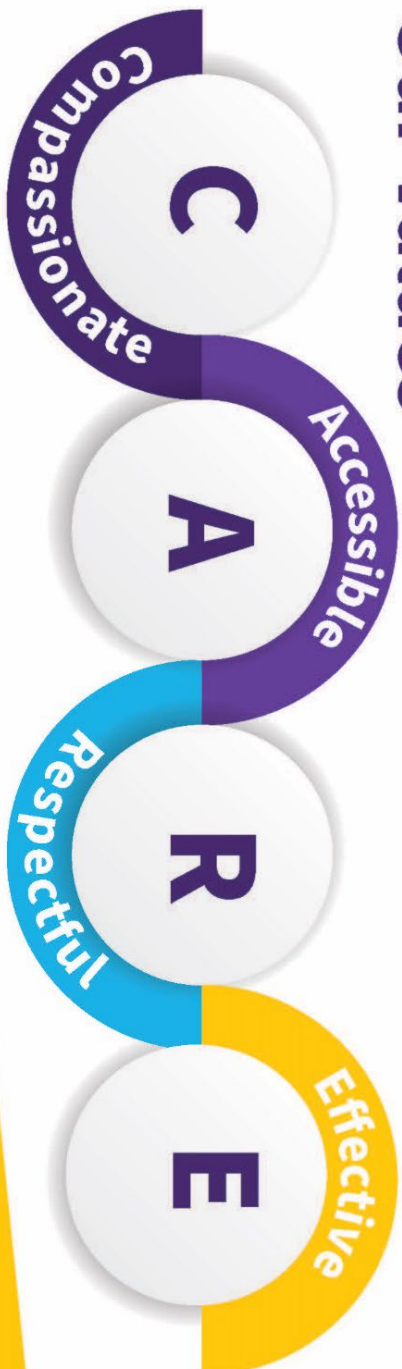
3. Corporate Strategy, Our Vision, Values and Mission

A new revised set of values, a vision statement and our mission has been developed to support the 3+(2) year strategy. These values are at the heart of everything that we do

Our Vision

Our vision is for everyone in our community affected by a life-limiting illness or bereavement to be able to access compassionate care and the support they need.

Our Values



Our Mission

We will provide specialised care and support to the highest standard for those affected by a life limiting illness or bereavement.



We will maximise our reach with the support of our staff, volunteers and local community.

For each individual we will ensure compassionate care and support throughout their journey, recognising their individual choices.



We will engage with our community to shape, deliver and fund our care.

We will reach out and provide support for isolated groups such as carers, cancer survivors, young people affected by a life limiting illness.



We will provide education and support within our community to develop and enable good palliative and End of Life care practice.

We will work collaboratively with other health and social care professionals to ensure responsive, seamless care.



We will invest in innovative models of care that will thrive and adapt to the changing needs of our community.

4. Business Strategy and operations, building for the future

We have identified six strategic pillars, which we will use to build the foundations of the strategy and support our overarching strategic purpose to deliver quality and safe clinical services.



These pillars have been further developed into five organisational objectives. Over the course of the next 12 months we will be working with our staff and volunteers to embed these objectives into deliverables, ensuring that our communities receive meaningful outcomes.

These five high level objectives are intertwined with the strategic pillars, behind every objective is a clinically driven ambition:

| Strategic Pillar | Corporate Objectives |
|------------------------|---|
| Clinical & Quality | Improve experience, outcomes and safety of patients accessing our services |
| | Restoration of services |
| | Embed the principles of good palliative and end-of-life care within all services, ensuring that national and local strategy is aligned |
| Sustainability | Ensure that there is a robust financial governance embedded within the strategy planning of the organisation |
| | Embed the productivity and clinical efficiency programme |
| | Sustain income generated by all means and sources support new opportunities where business case dictates |
| Digital & Data Quality | Develop IT systems that share information across internal services |
| | Ensure that IT has the capability to enable delivery of services |
| | Review functionality and effectiveness of IT systems to ensure confidence in activity and reporting |
| Workforce | Create a workforce culture that empowers colleagues to contribute to compassionate care and deliver improved outcomes for our population |
| | Embrace diversity and equality inclusion across the Hospice |
| | Continue to develop and implement support for staff health and well-being and maximise staff retention |
| | |
| Access | To provide a Hospice that is all-encompassing regardless of person's age, gender identification, and sexual orientation without regard to their ethnic group or creed |
| | That the board of trustees are reflective of the local communities we serve |

5. Clinical and Quality

What is our ambition?

At The Shakespeare Hospice our dedicated team of skilled and compassionate staff and volunteers strive to achieve excellence in the care and support that they provide to each and every patient, their loved ones and the wider community. Our team are committed and tenacious; ensuring that exceptional quality care, of the highest standard, is consistently provided to all.

The pandemic provided an opportunity for the Clinical Department to rapidly embark upon a journey of redefining and remodelling the way that we traditionally provided our care. This opportunity saw the Clinical Department deliver care in ways that we had previously not thought possible and has subsequently placed us on our journey to explore and define our future clinical vision.

As the needs of our communities continue to change, we recognise how important it is for the Hospice to be proactive and responsive to any new opportunities and challenges that may be presented. Equally we believe that to serve our communities best, strengthening our collaboration within our local system and with local partners will be key to supporting the delivery of innovative models of care.

Our focus will be on:

- Continuing to restore our Day Services offer post pandemic, whilst championing the importance of building relationships early, via proactive palliative support referrals from our stakeholders.
- Continuing to adapt and grow our care offer with both the patient and their loved ones at the centre of all that we do.
- Improving access for adults and children to a range of palliative and end of life care support that we provide at the Hospice, and those services that we provide in our community.
- Enhancing the range of opportunities available to ensure that the offer is diverse and inclusive of the needs of our population.
- The continuing commitment to ongoing governance and quality assurance across the clinical department, with a focus upon patient experience and feedback.
- Extending our reach, meeting the evolving needs of our communities by providing more services locally, through collaborative models and co-production.

Building upon our 2020 to 2023 strategy and the strengths of our current clinical offer, our clinical strategy for 2023 to 2028 aspires to be bold, dynamic, and innovative, but, most importantly, relevant to our local communities and motivational for our team and key stakeholders.

Our 5-year clinical strategy will focus upon enhancing what we currently do whilst offering more opportunities and support to those in need in our community. Years one and two will focus upon building strength and resilience within our workforce and developing our core offer. Moving into years three, four and five the focus will shift towards growth and the expansion of our offer for all those in our community living with a palliative condition or at the end of life.

As a clinical department our overriding philosophy is that whilst the patient is central to all that we do, their loved ones and those who matter to them are of equal importance in the care delivery that we provide. The clinical model wraps around the full carer unit.

This approach is aligned to the Ambitions for Palliative and End of Life Care 2021 – 2026 (National Palliative and End of Life Care Partnership, 2021), which states:

‘The need for honest conversation and the importance of joined up care are as important for carers and families as individuals. The need for support from, and for, empathetic and competent health and care staff is as important for carers, families and those who are bereaved, as it is for the dying. As is the help that can be given by the communities of which we are part.’

Six ambitions to bring that vision about

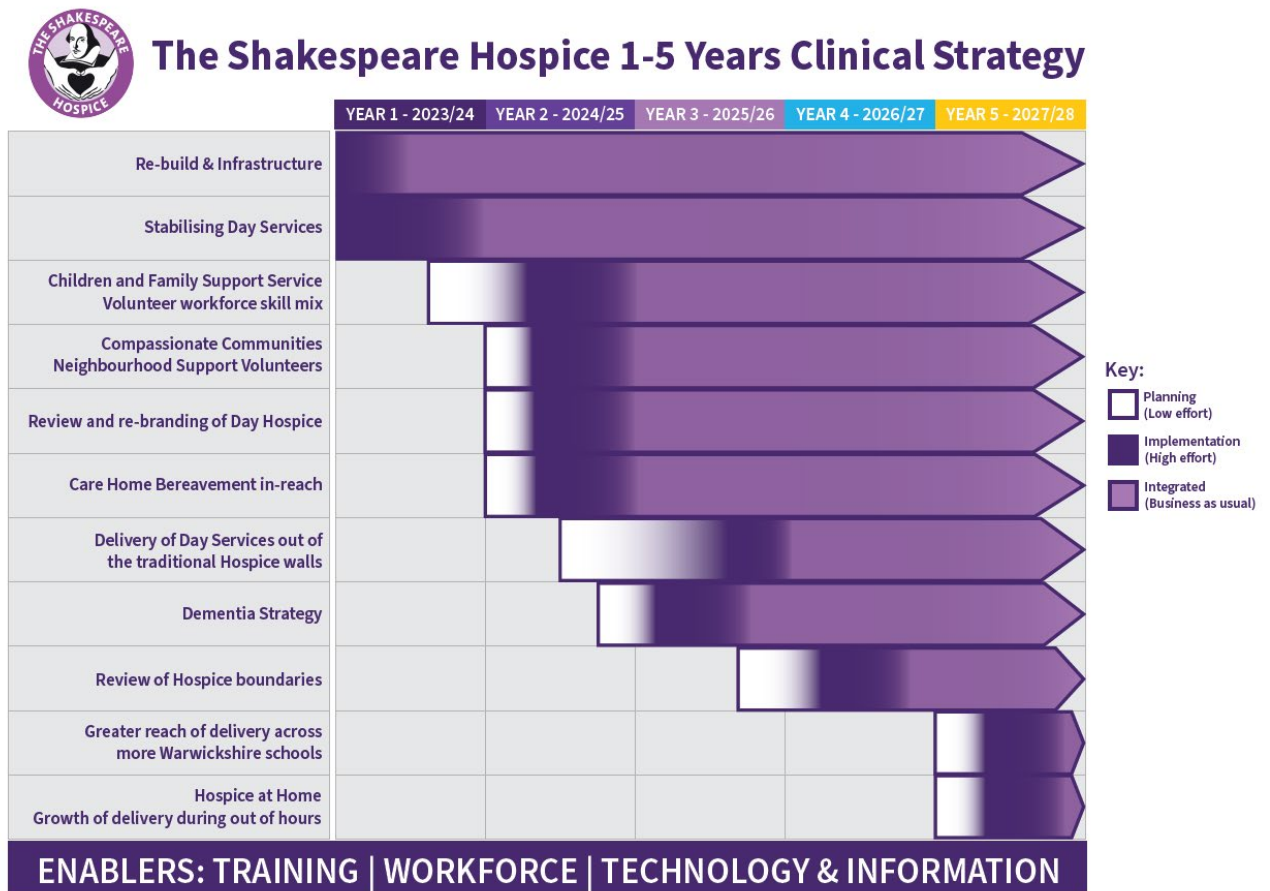
- 01 Each person is seen as an individual
- 02 Each person gets fair access to care
- 03 Maximising comfort and wellbeing
- 04 Care is coordinated
- 05 All staff are prepared to care
- 06 Each community is prepared to help

“I can make the last stage of my life as good as possible because everyone works together confidently, honestly and consistently to help me and the people who are important to me, including my carer(s).”

National Palliative and End of Life Care Partnership
www.endoflifecareambitions.org.uk



The principles of the six national ambitions underpins the development of the Hospice Clinical Strategy. The overarching areas for focus are detailed in the diagram below:



6. Year 1 2023 – 2024

The pandemic resulted in a reduction of some of our clinical service offers at our Shutterly site, following the need to safeguard the most vulnerable and those in our community who were immunocompromised.

Our restoration plan is underway. It will ensure that the Hospice will offer day services once again, whilst diversifying the range of opportunities on offer, enhancing patient care and experience.

We know that the demand for services across the whole of health and care is increasing, against a backdrop of workforce, financial challenges, and a growth in local population.

Part of our strategy is to prevent patients with a life-limited illness becoming unstable and returning to busy acute hospitals.

6.1 How will we achieve this?

We are keen to work on our admission prevention strategy, inviting patients into our health and wellbeing day hospice services, to work with them on strategies that allow them to remain at home, living well with their condition. Working with the patients and their families to identify when their management plan is becoming unstable, and to ensure that they have the tips and techniques to stabilise with the support of our Hospice team and the wider community. We have

achieved so much already, and we will go on to further this in 2023/24, consolidating our new ways of working and strengthening and stabilising the foundations we have built. We will develop the breadth and range of our day services provision in many ways, including, but not limited to the following:

We will grow our patient, carer, and bereaved offer to span across four days per week, whilst our fifth day will see our facilities available and used as a community hub. A vibrant space that will support local groups to meet, develop connections and empower a compassionate communities. approach.

We will continue to support and develop our specialist clinic model, by harnessing the strengths of an already successful Motor Neurone Disease clinic, launched in 2022. We will explore opportunities with local consultant and nurse specialists, and key stakeholders in areas such as heart failure, Parkinson's disease, breathlessness, and fatigue management.

We will launch opportunities that aid accessibility and support inclusivity, such as evening and weekend sessions and 'drop-in clinics' whereby the public can attend to learn more about us, ask questions they may have, familiarise themselves with the setting and staff and in turn reduce any preconceived inhibitions and anxieties. The theme of accessibility and inclusivity will become an ongoing one developed year on year throughout our strategy.

We will introduce a full range of complementary therapies once again, providing 1:1 and group-based sessions for those who would benefit. We will approach this in an equitable manner to open the complementary therapy opportunity for those accessing support from any of our site-based services. We will support and empower our Hospice at Home team to be skilled to also provide simple touch-based therapies for our end-of-life patients. We will also mobilise our complementary therapy offer at our local community hospital, to run alongside the cancer and chemotherapy clinic.

We will re-establish and develop our Creative Therapies provision (formerly Diversional Therapy), expanding the range of the offer from general seated activities, such as painting, crafting etc to areas such as horticulture and gardening, outdoor activities, wild writing, and many more new activities. We will grow our volunteer workforce to help support our staff who will lead this project.

We will develop opportunities for our carers, supporting them to be able to keep on caring for their loved ones and to help prevent carer breakdown.

Year 2 2024 – 2025

Community preparedness and willingness to support palliative and end of life care is one of the six national ambitions (National Palliative and End of Life Care Partnership, 2021). Detailed within this ambition are the roles of volunteers as part of the building blocks.

Each community is prepared to help

The building blocks for achieving our ambition



National Palliative and End of Life Care Partnership
www.endoflifecareambitions.org.uk

Our volunteers are an integral part of the Clinical team and are vital to the existence of the Hospice. Our volunteers are a huge asset, who inspire and motivate us every single day. Without our volunteers we would not be able to offer the extent and range of services that are currently available.

With the population growing, people living longer and long-term conditions increasing, it is essential that as a Hospice we adapt and strengthen our practices, to meet the inevitable growing demands and increasing pressures.

We know that our vision for the future will not be achievable without the growth of our clinical volunteer workforce, due to the significant contribution that they offer.

6.2 How will we achieve this?

We will grow our current Day Services volunteer workforce, aligned to the developments detailed in Year 1; this will be in areas such as hospitality, creative therapies, and spiritual care.

With the recruitment of a Complementary Therapy Lead we will recruit and develop a team of volunteer therapists to support the delivery of a range of complementary treatments and strategies. This service will deliver care across all of the clinical services.

We will look to develop the Compassionate Neighbours model, spanning across all of our services. This model is a social movement to help reduce loneliness within our communities. We aspire to create two elements to this project:

- 1) Compassionate Companions - This team of volunteer 'befrienders' will be trained and supported to be able to provide regular visits to those in our community who may be towards the end of life due to a life-limiting condition. These volunteers will be carefully matched by our clinical team to an identified community member who would benefit from company, a listening ear, emotional support, and social connection.
- 2) Compassionate Supporters – This team of volunteers will support with the smaller activities of daily life, to help reduce stress and ease the burden for patients and families. For example, assisting with transport to and from the Hospice, urgent collection of prescriptions for changing symptom management needs during end-of-life care (overseen by our Hospice at Home team)

We will commence our mission to ensure that all those within the Care Home setting can access Hospice services just as any other community residents would. We will endeavour to start this project in Year 2, exploring how we can support Care Home residents with accessing pre-bereavement support, but equally support those affected within the setting following a bereavement of a home companion or a loved one. We will look to build our volunteer counselling service further to support this project.

We will review our Children and Family Support Service and create a volunteer workforce model that enhances our offer and enables a greater reach so that we can support more young people.

Years 3 to 5 2025 – 2028

As we move into years three to five, our focus will shift towards expanding our reach, with the foundations embedded in years one and two providing the stability for this next phase.

6.3 How will we achieve this?

We will review our boundaries for each of our clinical services and give focus to ensuring that we are providing an equitable provision to all residents of South Warwickshire, both 'in hours' and 'out of hours'.

We will identify areas that are underserved and equally those whose access to palliative and end of life care is resourced sufficiently, looking at how we can work collaboratively with other providers to ensure a fair and equal distribution of all service opportunities.

We aspire to work towards meeting the requirements of individuals who have palliative care needs due to a dementia diagnosis. Dementia is one of the biggest health crises nationally, with 1 in 11 people over the age of 65 in the UK having dementia (Alzheimer's Research UK 2023).

We will build a dementia strategy, that will establish our corporate commitment to reach out to people with dementia, looking at our current models of care and how we can adapt these to meet the needs of this group of patients. Our dementia strategy will take an evidence-based approach towards both the care provision required and the care environment, whilst also outlining the investment necessary to adequately develop our workforce, so that they receive the training and education required and the skills to safely care for those with dementia.

7. Sustainability

What is our ambition?

The clinical vision for the Hospice will only be achievable if it is underpinned by solid and sustainable resources.

Financial stability is crucial if the Hospice is to restore its services and increase its reach into the community.

After several years of a pandemic the Hospice can now implement growth and restoration, and this will require substantial investment into staff and physical resources.

Years one and two of the strategy will focus on rebuilding the Hospice services and creating an effective infrastructure of support. This will create a sound base for the future.

In an uncertain economic climate and with increasing costs, the charitable sector is facing increased risk, uncertainty, and challenge. The ability to raise additional funds through fundraising and contracts is limited in the short term so the Hospice will be required to draw on its financial reserves.

The Hospice will continue to work with the NHS as a key partner whilst acknowledging that opportunities for additional NHS core funding are unlikely for the first year.

In the short term it is unlikely that the Hospice will generate sufficient in-year income to support the full cost of the clinical vision and a budget deficit is forecast. Strong reserves will support this initial investment. In the medium to long term, the Hospice and the Board of Trustees will strive to achieve sustainability and mitigate any ongoing risk.

7.1 How will we achieve this?

- We will make the best use of our limited resources; through our governance process we will develop a financial and operational strategy that ensures value for money and effectiveness. We will take steps towards improving our energy efficiency and creating an environment that reduces energy consumption and is less wasteful.
- We will strive to use our resources effectively with consideration to long term sustainability and current technological developments.
- We will streamline our processes to ensure that we are working efficiently and effectively. Implementing systems and IT solutions that support our strategy.
- We will nurture and develop relationships with our partners, funders, and supporters.
- We will support our staff with training, development, and wellbeing issues, enabling them to contribute and support the strategic aims and improving communication and cohesiveness across the whole organisation.
- We will implement and monitor the Income Generation and Marketing Strategy.
- We will work collaboratively with other hospices and organisations to identify improvements and efficiencies.
- We will seek to identify emerging business opportunities and build new collaborations.

- We will adopt an innovative approach utilising best practice and work flexibly to meet new challenges or opportunities. Identifying unacceptable risk and making timely decisions. We will work together creatively to embrace change and explore new ways of operating.
- We will ensure that robust forecasting and budgeting processes are in place and communicated effectively.
- We will improve our use of data, using benchmarking and costing data to inform our decision making and improve our reporting.

7.2 Good Governance

Overseen by the Board of Trustees and the Chief Executive, a robust coherent system of governance, scrutiny and oversight is followed.

There are four committees each chaired by a trustee, with ultimate accountability lying with the Board of Trustees.

The Board of Trustees operates in accordance with relevant legislation and regulation and the terms of the Articles of Association.

7.3 How will we achieve this?

The Articles of Association determines that the Board of Trustees will exercise supervision and control of the Hospice by:

- Ensuring the Hospice has a robust strategy,
- Ensuring the strategy is embedded within a business plan which the CEO is charged with delivering,
- Ensuring annual budgets are prepared and are consistent with the strategy,
- Ensuring the highest standards of internal governance are maintained with a focus on high quality patient care being delivered in a safe environment with risks minimised,
- Ensuring the Hospice is financially sustainable,
- Ensuring the Hospice meets all relevant statutory and regulatory requirements.

Through departmental reviews efficiency programs will be aligned and this will ensure increased productivity. Data analysis will be fundamental to demonstrate positive outcomes. We will focus on new ways of working and introduce tools such as Plan Do Study Act (PDSA) to give staff the confidence to make improvements. We will invest productivity gains back into our services to help grow and serve more of our local communities.

7.4 Collaborative working

We will continue to work with our partners, to collectively offer equitable and personable services to the South Warwickshire public, avoiding duplication where possible and streamlining clinical practice, sharing care, and aim to share resources.

7.5 How will we achieve this?

Each hospice will maintain its independence, but together will aim to offer a coordinated approach to improve user, family, and friends experience during their end stage of life. We are

working collectively to better understand the demand for hospice care, and when required we will ensure patients are cared for by hospices services and share care delivery.

7.6 Income Generation

An ambitious Income Generation and Marketing Strategy has been developed which will support growth and sustainability.

7.7 How will we achieve this?

The upgrade to a new fundraising Customer Relation Management (CRM) database in May 2023 will improve efficiency and support our plans with a clear focus on supporter motivation and loyalty, tailored communications, and journey.

The new website, due to go live in July 2023, will have an improved navigation structure enhancing the user experience for patients, carers and supporters. It will also offer access compatibility on all devices, including mobiles and tablets, integration with the fundraising database, and will offer a better content management system to allow more updates to be completed in house.

Retail performance has been strong throughout 2022/23 exceeding budget and delivering the highest income on record. The retail operation continues to be a success story for the Hospice with a consistent increase in shop income (except for the impact of Covid-19 in 2020 and 2021), and therefore, the board of trustees have agreed an investment program to support a 10% growth.

Sale of new goods and the online platforms have also been a success and we will capitalise on these areas over the next few years. Following the review of Gift Aid, the conversion has improved.

Income Generation Strategy 2023-26



| Marketing | | Retail | | Fundraising | |
|---|------------------------------------|--|--------------------------|---|------------------------------|
| | New website and CRM | Increase shop portfolio | | | Trusts and Grants |
| Strengthen brand awareness | | | Learning and Development | Regular and sustainable income | £ |
| | Data analysis & targeted marketing | Diversify products and experience | | | Increase event participation |
| <ul style="list-style-type: none"> Maximise capabilities of the new website and CRM and with other digital platforms Strengthen brand awareness: <ul style="list-style-type: none"> Strong calls to action and compelling content Roll out brand guidelines, key messages, PR training Roll out brand refresh program Develop a podcast and vodcast plan Develop a brand ambassador strategy Healthcare professionals/education Targeted marketing, analytics, awards Staff and volunteer engagement strategy for recruitment, onboarding, and retention Opportunities for the 25th anniversary 2024 | | <ul style="list-style-type: none"> Open one new shop each year for the next 3 years Create pop up shop and retail event strategy Improve shop standards and customer experience Enhanced visual merchandising and brand awareness Implement staff training and development opportunities to support performance Continue expanding the ecommerce offer and strengthen position/ presence/reach Introduce more new goods lines: <ul style="list-style-type: none"> local suppliers New range of recycle/sustainability products | | <ul style="list-style-type: none"> Develop pipeline for Trust and Grants Foundations Identify new and statutory grant sources Focus on regular predictable income from direct debit, lottery, and corporate pipeline Create targeted appeals for Legacy and in-memory giving Increase support from corporate partnerships and other commercial income opportunities Continue to develop the supporter acquisition, retention, and engagement strategies Maximise opportunities with current flag ship events to increase participation and income Increase 'in aid' of fundraising activities | |

7.8 Marketing and Communications

The marketing strategy is designed to provide a sustainable audience base that will contribute to the dependable income required for the delivery of responsive, flexible services that will meet the future needs of the community. It sets out the process of planning and executing the conception, promotion and distribution of ideas, products, and services to engage audiences to meet the organisational objectives.

The key to success is to develop propositions based around 'The Shakespeare Hospice' putting the patients and supporters at the heart of raising awareness supported by the brand, advertising, key messages, case studies and clear communications making it easy for people to engage with us.

7.9 How will we achieve this?

- Maximise capabilities of the new website and CRM and with other digital platforms.
- Strengthen brand awareness:
 - Strong calls to action and compelling content
 - Roll out brand guidelines, key messages, public relations training
 - Roll out brand refresh program
 - Develop a podcast and vodcast plan
 - Develop a brand ambassador strategy
 - Work with clinical services to produce information for healthcare professionals/education
- Understand our audience and through data analytics evaluate effectiveness and create targeted marketing plans.
- Identify opportunities to apply for awards.
- Work with People and Workforce team to create a volunteer engagement strategy for recruitment, onboarding, and retention.
- Develop a plan of 25th anniversary activities to increase income and improve engagement with our community.

7.10 Retail

Our shops provide a significant source of income for the Hospice and provide a platform for us to raise awareness of our services, demonstrate our impact and engage with individuals, groups and businesses in our community.

The retail operation has already benefitted from the implementation of the 2020-23 strategy objectives and by building upon the research and success stories taken from St Francis Hospice. Changes include improving shop standards, customer experience, and engagement and stewardship. The strategic aim is to continue to build on our current progress and increase retail income through opportunities including the opening of new shops, the introduction of more new goods lines, an increased online presence, and more pop-up shops and events.

7.11 How will we achieve this?

- Expand the retail portfolio further by opening one new shop a year over the next 3 years to increase the Hospice net income contribution, widen our geographical reach, increase brand awareness, and build on our network of supporters and customers.
- Identify opportunities for pop up shops and stalls at external community events.
- Improve shop standards and the customer experience.
- Enhance visual merchandising and brand awareness by creating an emotional connection with customers and introducing cost effective solutions to improve the overall shopping experience.
- Roll out the brand and key message training with guidelines to support staff and volunteers with how to talk about the Hospice, including service information based on the need, impact, and outcomes for patients and their families.
- Implement staff training and development opportunities to support shop performance, improve staff retention and increase customer satisfaction and loyalty.
- Test and develop new goods lines and offers to include motivational purchases such as biodegradable and recycled products, and source local suppliers.
- Continue expanding the ecommerce offer and strengthen position, presence and reach across all shopping and social media channels:
 - Utilise social media to highlight offers and products' uniqueness using mobile-friendly e-commerce ads through Snapchat and visually appealing product images on Instagram.
 - Build a loyal follower and customer base with exclusive promotions, contests, promo codes, and discounts.

7.12 Fundraising

The key areas in the strategy for income growth focus on community, corporate, and regular giving. The successful implementation of the supporter journey programme will support these objectives which use a range of communication channels and techniques driven by an understanding of what motivates donor loyalty and lifetime value.

7.13 How will we achieve this?

- Develop the pipeline for Trust and Grants and identify new and statutory grant sources.
- Build relationships with funders and be creative with costs to package these as projects in applications.
- Focus on regular predictable income with direct debit and lottery, testing a range of traditional acquisition channels including direct mail and face to face campaigns.
- Continue to develop the supporter acquisition, retention, and engagement strategies through improved data management and targeted messaging.
- Recruit to the new role of Corporate and Major Gift Fundraiser
- Increase income from Corporate Partnerships by building a pipeline of supporters and well-developed plans to meet their corporate and social responsibility criteria.
- Create targeted appeals for Legacy and in-memory giving.
- Maximise opportunities with current flagship events to increase participation and income.
- Increase 'in aid of' fundraising activities to spread the workload in fundraising and engage with more community supporters.

8 Digital and Data Quality

What is our ambition?

To provide our patients, teams and supporters with online access to the information, tools and systems they need to work effectively and efficiently with secure and accurate data to support the important decisions they need to make. To continue to move towards cloud-based data solutions, which will help us maintain our place in today's digital age and continue improving efficiencies.

8.1 How will we achieve this?

Building on our 2020 strategy, an Electronic Point of Sale (EPOS) system was installed into retail shops bringing significant benefits to the business. The system continues to improve efficiency and stock management, and enhance customer service, enabling us to make data-driven decisions, and provide a better overall experience for customers. We have also invested in developing the Hospice e-commerce operation to grow a sustainable income for the future by broadening our reach through a variety of online platforms.

The introduction of EMIS in January 2022, now allows us to work with rich data to base line and benchmark and understand our clinical services. Data cleansing will be an ongoing part of the program, and regular reporting will provide the information we need to demonstrate the need for and impact of our services.

The start of 2023 has been positive with the implementation of a new cloud-based fundraising CRM which plays a vital role in donor management, relationship building, campaign management, communication, prospect research, reporting, and overall fundraising success.

The Hospice invested in a new website due to go live in July 2023, which will establish and strengthen the Hospice brand and online presence. The website serves as a powerful marketing tool and a platform to showcase our brand, services and overall offer, helping build credibility, expand our reach, improve user experience and increase engagement with healthcare professionals, patients and their families, and supporters. The new website will allow us to gather valuable data and insights about our audience and their behaviour. Using website analytics tools, we can track website traffic, user demographics, popular pages, and conversion rates. These insights will help us make informed decisions about our marketing strategies, website optimization, and overall business plans.

An in-depth technology review is underway which outlines a road map of ambitions, as well as ensuring that our digital technology is fit for purpose now and into the future.

The Shakespeare Hospice will focus on 5 key areas.

1. A full information governance review will take place.
2. Total telephony review
3. Systems and software review
4. Network and infrastructure
5. Develop a digital strategy.

9 People and workforce

What is our ambition?

We are mindful that it is no longer attractive to work in the health and social care sector. This added to differences in terms and conditions of a charity pay structure, compared to NHS terms and conditions, means that we must work very hard to be an employer of choice.

Our staff team are our most precious asset, and our ambition is to recognise and reward their dedication whilst enabling them to become confident and empowered in their roles.

Our vision is to create a workforce who are resilient, agile, and responsive to the changing needs of our service users. We will work to identify additional staff benefits, reviewing our policies to ensure that staff are well supported and encouraged to reach their potential and overcome any barriers to success.

We will recognise and grow our volunteer workforce. Their contribution is invaluable to the operation and success of the Hospice. We will work to acknowledge and support this crucial resource.

We will celebrate and encourage diversity and inclusivity across our workforce, recognising and supporting a strategy for inclusion and a willingness to embrace new approaches and ideas.

We will develop and improve our governance framework to ensure that we are well-led, and our senior leaders are equipped to achieve the long-term vision and strategy.

9.1 How will we achieve this?

- We will develop a people and volunteer strategy that demonstrates our values and supports our vision.
- We will invest in training for our staff and volunteers, ensuring that they are equipped to embrace developing technology and have the skills to adapt to the ever-changing demands of their roles.
- We will develop and encourage our volunteer workforce, ensuring that they are well supported in their roles and have the confidence to use their skills effectively.
- We will improve and promote employee benefits and associated policies, enabling staff to work flexibly and have access to support and assistance where required.
- We will embed our hospice values into the culture of the organisation, allowing staff and volunteers to flourish in an environment which promotes development and opportunity.
- We will develop and improve our diversity and inclusivity practices to ensure that we are properly representative of the communities that we serve and that we are able to adapt to change and challenge.
- We will adopt a holistic approach to staff well-being, offering opportunities to receive health, social, practical, and emotional support, and therapies.
- We will review our approach to recruitment and retention, ensuring that we are pro-active in our workforce planning and able to sustain optimum staffing levels.
- We will develop collaborative leaders and embed new ways of working that support and encourage all staff.

- We will encourage and develop middle managers, equipping them with the skills to progress to senior leadership.
- We will ensure that we listen to our staff views and encourage them to help drive improvements.
- We will ensure that our trustees are equipped to lead well by providing development and training in good governance.
- We will build upon the governance review and skills audit to enhance our Board and ensure that trustee succession planning is effective.
- It is important to the Hospice that all staff understand and truly sign up to our vision and values, but this will only be possible if supported by a strong leadership team.

10 Access

What is our ambition?

That we are accepting and adaptable to meet the needs of all.

10.1 How will we achieve this?

The executive and board of trustees have worked hard to ensure that The Shakespeare Hospice is representing our local communities. Understanding our population's health can help us deliver services with excellent outcomes. Over the past six months the executive and the Board have worked on the Hospice inclusion policy, this includes improving our on-boarding programs and appointments to our funded and volunteer workforce.

All our business planning, and changes to the way we work, have undergone an Equity and Diversity inclusion assessment to ensure that we are fit for purpose.

We are inclusive in our support of students both medical and non-medical, and our volunteer program includes working with local communities to support those with learning needs.

Year 3 & 4 of the clinical strategy will focus on taking the Hospice brand out into the community, this may be in the form of bespoke Hospice day service provision.

As identified in the mission statement:

- We will provide specialised care and support of the highest standard to those affected by a life-limiting illness or bereavement.
- For each individual we will ensure compassionate care and support throughout their journey, recognising their individual choices.
- We will reach out and provide support for isolated groups such as carers, cancer survivors and young people affected by a life-limiting illness.
- We will work collaboratively with other health and social care professionals to ensure responsive and seamless care.
- We will invest in innovative models of care that will thrive and adapt to the changing needs of our community.

- We will provide education and support to develop and enable good palliative and end-of-life care practice within our community.
- We will engage with our community to shape, deliver and fund our care.
- We will maximise our reach in our community with the support of our staff, volunteers, networks, and healthcare professionals.

References

[Health service use in the last two years of life Coventry and Warwickshire STP report](#)

Population Report for Warwickshire, 2021: [Warwickshire County Council](#)

For more information about the Hospice, please visit:

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