



Rennie Grove Peace



Statement of Purpose and Approach to Care

April 2025

Rennie Grove Peace Hospice Care

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We are an independent hospice care charity providing support for adults with a progressive life-limiting illness, and those who care for them, within Buckinghamshire and Hertfordshire.

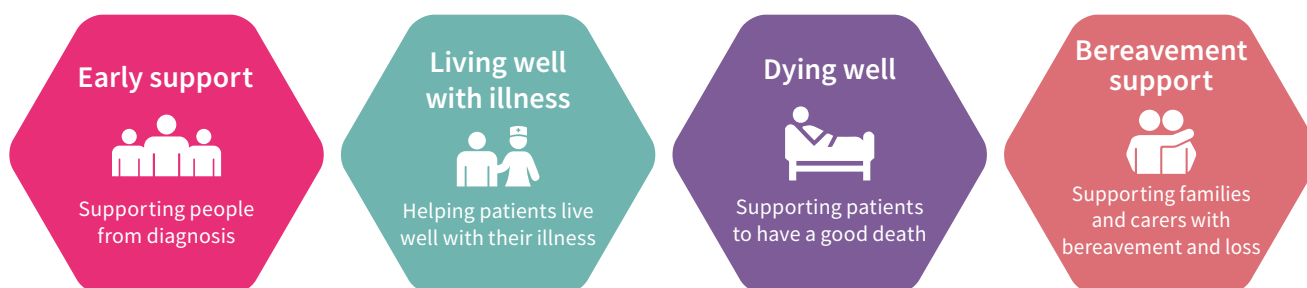
At Rennie Grove Peace Hospice Care, we are proud to offer excellent palliative and end of life care to those living with a progressive life-limiting illness in the place that best suits their needs or wishes. As an independent hospice care charity, we have offered this support, free of charge, for over 40 years.

Today we operate within Buckinghamshire and Hertfordshire, in people's homes, in care homes, in the community and in our specialist purpose-built facilities in Watford and St Albans.

Our team of 340+ includes a wide range of patient-facing disciplines plus operational support based in Watford, Tring, St Albans, Chalfont St Giles and Berkhamsted.

Looking after over 4,500 patients a year, as well as those around them, is a huge privilege, one we simply could not achieve without the incredible support of our 1,600+ strong volunteer workforce.

We work together with healthcare and social care professionals and integrated neighbourhood teams (INTs) within Buckinghamshire and Hertfordshire who directly refer patients into our care, but also with individuals and their families. Our Coordination Centre team is available 24/7 on ☎ 01923 60 60 30 and can be contacted as soon as a diagnosis has been confirmed. The team will usually book in a short assessment and explain the most relevant care to suit each individual's needs.



Our specialist palliative and end of life care is offered in four stages: Early Support, Living Well, Dying Well and Bereavement Support. Every individual receives personalised care, developed to suit their own needs.

This can include group and one-to-one sessions, signposting advice on how to keep well during illness, help maintaining independence and understanding how to plan ahead for future care needs. Support is offered in the community, at home or as a short stay in our Inpatient Unit. We work with individuals and those around them to discuss their own wishes and prepare to receive personalised support in the place that best suits their needs.

Our multidisciplinary care is delivered by our team of professional trained staff, supported by a whole workforce of volunteers, and is provided at no cost to our patients and families. This is made possible by the generous donations we receive from our local community, as well as some funding from NHS contracts.

Our vision

A future where every individual is empowered to live well and die well.

Our mission

To provide the quality hospice care that our community needs. We do this by:

- Listening to our community and delivering services that are accessible to all
- Caring for people from diagnosis with a progressive life-limiting illness
- Supporting people in the place that's best for them

Our values



Governance

Rennie Grove Peace Hospice Care is an independent registered charity governed by an elected Board of Trustees, with powers prescribed by its constitution in its main governing document, the Memorandum and Articles of Association.

The Trustees are formally selected and appointed volunteers from the local community who bring a range of expert skills to set the charity's overall vision and strategic direction. They ensure compliance with relevant legislation and that regulatory standards are met, quality is monitored, and services are effective, as well as overseeing efficient financial stewardship and financial planning of the charity.

The Board of Trustees delegates its powers to the Chief Executive and five sub-committees:

1. The Governance Committee
2. The Clinical Governance Committee
3. The Development, Operations and Performance Committee
4. The Audit and Risk Committee
5. The Investment Committee

Executive Board

The Rennie Grove Peace Hospice Care Executive Board is led by the Chief Executive who is appointed by, and accountable to, the Trustees. They have responsibility for the day-to-day management of the charity, ensuring it functions within the law in accordance with Charity Commission rules, Care Quality Commission standards and the Board of Trustees' Powers and Responsibility and Scheme of Delegation Policy.

The Executive Board consists of the Chief Executive; Chief Clinical Officer; Medical Director; Director of People; Director of Marketing; Director of Fundraising; Director of Transformation & Improvement; Director of Retail & Trading (currently being covered by other Directors); Director of Governance (currently Interim) and Director of Finance (currently being covered by other Directors).

Key statutory nominated individuals

Chair, Board of Trustees	Dr Jeremy Shindler
Vice Chair, Board of Trustees	Chris Inman OBE
Treasurer, Board of Trustees	John Wroe
Company Secretary, Board of Trustees	Erika Moralez-Perez
CQC Nominated Individual	Stewart Montgomery-Marks, Chief Executive
Senior Information Risk Owner (SIRO)	Stewart Montgomery-Marks, Chief Executive
CQC Registered Manager	Jackie Tritton, Chief Clinical Officer
Caldicott Guardian	Dr Sarah Klinger, Medical Director
Freedom to Speak Up Guardian	Shirley Burns, Executive & Board Support Manager
Safeguarding and Prevent Lead	Lisa Jackson, Patient Services Assistant Director (Centre Base Department)
Controlled Drug Accountable Officer (CDAO)	Caroline Allen, Patient Services Assistant Director (Community Department)
Data Protection Officer	Darren Kewley
Infection Prevention and Control Lead	Erin Beer, Inpatient Unit Service Lead
Medical Devices Safety Officer	Lisa Jackson, Patient Services Assistant Director (Centre Base Department)
Medicines Safety Officer	Maria Ivanova, Head of Pharmacy

Key messages and information

- **Total population:** 797,037 of whom 75% live in Hertfordshire and 25% in Buckinghamshire (based on our GP population)
- **Total of GP practices:** 59
- **Our clinical bases:** Peace Hospice, Grove House, Rennie House & Gillian King House
- **Our total combined workforce:** 161.63 wte and a headcount of 182
- We are part of two Integrated Care Systems (ICs), Hertfordshire & West Essex (HWE) and Berkshire, Oxford and Buckinghamshire (BOB)
- 14% of our income comes from statutory funding, including NHS contracts

We provide local hospice care services from four provider locations:

1

Our registered office: **Peace Hospice**, Peace Drive, Watford, Hertfordshire WD17 3PH

- Inpatient Unit (12 beds)
- Care Coordination Centre
- Living Well Centre including specialist clinics, Wellbeing therapies including Complementary and Creative therapies, plus Rehabilitation services
- Community Services including Hospice at Home, Rapid Personalised Care and Care Home Services
- Psychological Services including Bereavement, Listening and Talking Therapies
- Physiotherapist, Occupational Therapist and Social Worker

Wheelchair access is available as well as ease of public transport due to its central Watford location

2

Rennie House, Unit 3
Tring Industrial Estate,
Icknield Way, Tring,
Hertfordshire HP23 4JX

- Community Services including Hospice at Home, Care Home Services and Supporting Hands
- Bereavement, Listening and Talking Therapies

This location is offices – no patient services are directly delivered here

3

Grove House, Waverley Road, St Albans, Hertfordshire AL3 5QX

- Clinical Leadership Team (CLT) office – *note the CLT rotate across all bases*
- Living Well Centre including specialist clinics, Wellbeing therapies including Complementary and Creative therapies, plus Rehabilitation services
- Community Services including Hospice at Home
- Bereavement, Listening and Talking Therapies
- Physiotherapist and Occupational Therapist

Wheelchair access is available as well as ease of public transport due to its central St Albans location, adjacent to St Albans City Hospital

4

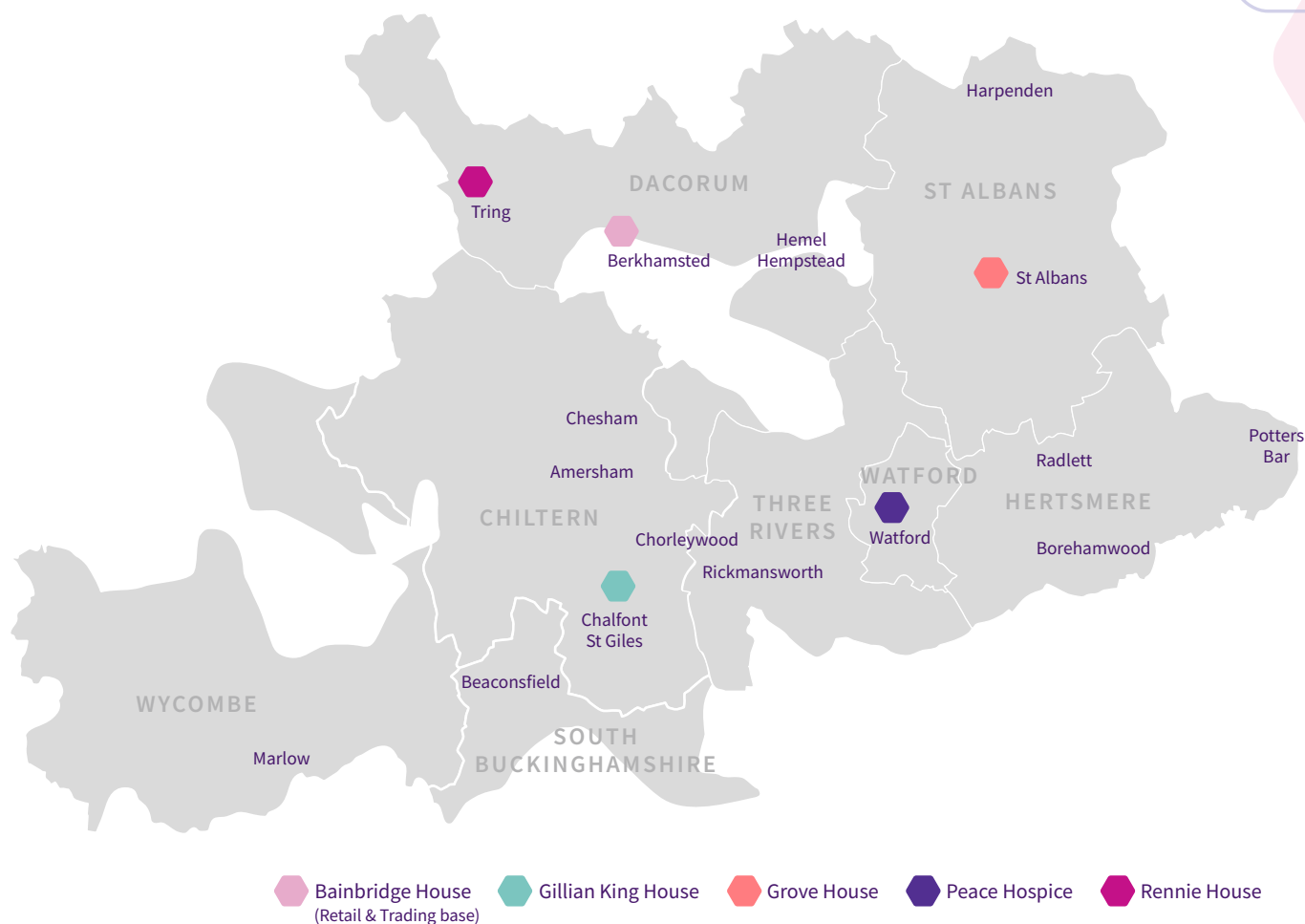
Gillian King House,
Hodgemoor View, Chalfont
St Giles, Buckinghamshire
HP8 4LS

- Community Services including Hospice at Home

This location is offices – no patient services are directly delivered here

Our Coordination Centre is the first point of contact for all patients, families and professionals when accessing our services

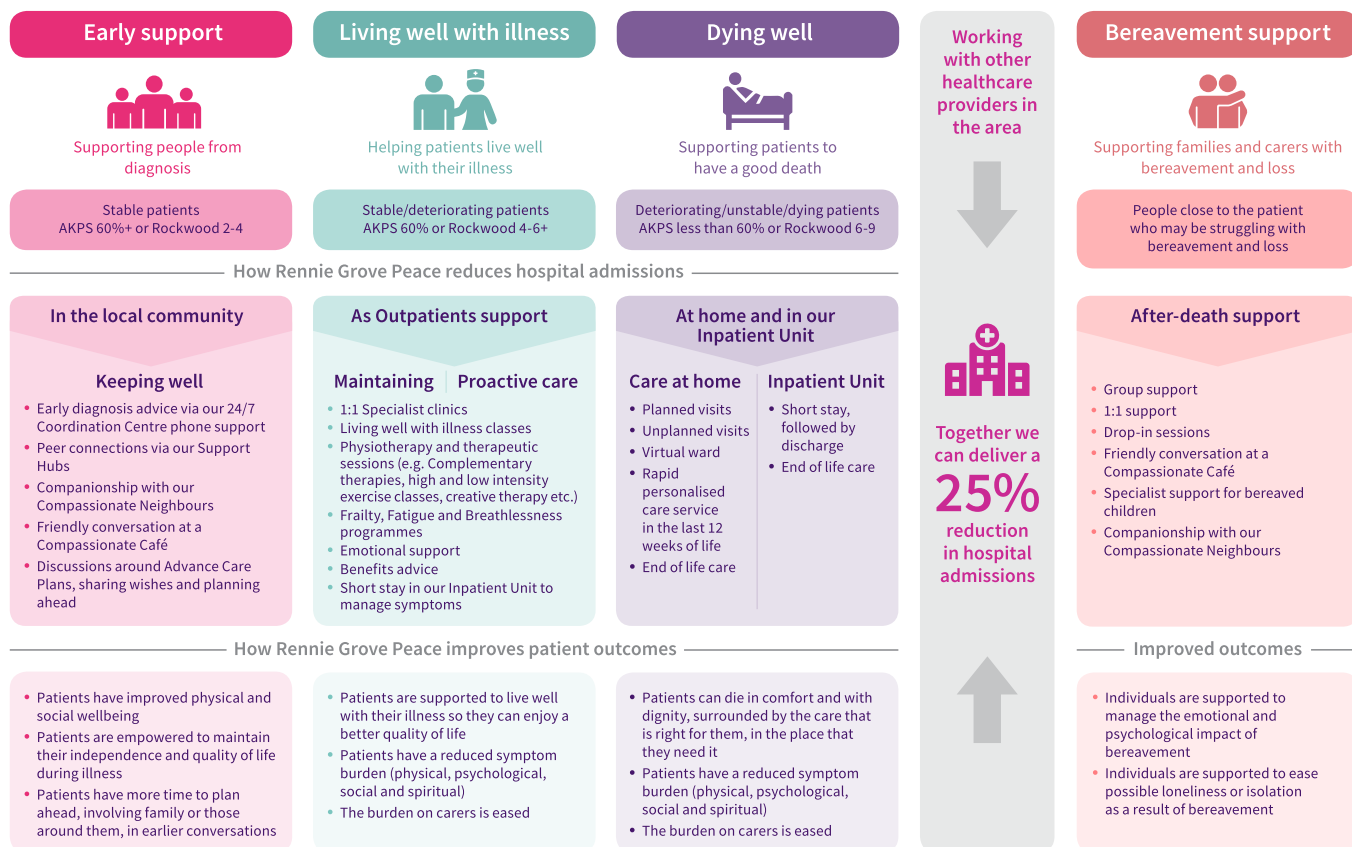
Our catchment area



Our Services

- We support individuals within Buckinghamshire and Hertfordshire who are affected by a progressive life-limiting illness or bereavement, and those who care for them. This includes: dementia, motor neurone disease and other neurological conditions, cancer, progressive respiratory conditions, heart failure and frail people (Rockwood Frailty Scale 2 i.e. 'well').
- We help people to live well with their illness, so they can maintain their independence and enjoy life. We provide the care that is right for them, in the place that best suits their needs.

Journey of care



Rockwood Clinical Frailty Score and AKPS are tools used to assess an individual's frailty or ability to perform common tasks.

Our support can be split into four stages: Early Support, Living Well, Dying Well and Bereavement Support.

Early support, from diagnosis

We are here for people from the moment they get their diagnosis:

Support and connections – Our Support Hubs offer advice in the community, held in a safe and friendly place, with the opportunity to meet others also affected by a progressive life-limiting illness diagnosis.

Local companionship – Our Compassionate Neighbour volunteers provide company and emotional support through regular phone calls, visits and friendship, reducing the isolation of being unwell or frail.

Planning ahead – Our specialist palliative care team supports people to plan ahead and put together an Advance Care Plan.

Living well with illness

We support people to live well with their illness through:

- 1:1 symptom management and pharmacy review clinics
- Living well with illness group classes
- Physiotherapy and therapeutic sessions (e.g. complementary therapies, high and low intensity exercise classes, creative therapy etc.)
- Frailty, Fatigue and Breathlessness programmes
- Emotional support for patients and those close to them
- Welfare benefit advice and carers' support
- Short stay in an Inpatient Unit to manage symptoms

Dying well

We support people at end of life to understand what a good death looks like and achieve it in line with their wishes.



At home

- Planned care through regular pre-scheduled visits
- Unplanned care through advice or visits
- Virtual ward as an alternative to inpatient care, patients staying at home are overseen by the multidisciplinary team, including a Palliative Care Consultant
- Domiciliary care, available for the last 12 weeks of life, funded through Continuing Healthcare (CHC) funding
- Care home support through partner carer training and palliative care support

In an Inpatient Unit

- Our 12-bedded unit supports around 150 patients per year for a short stay in a dedicated bed

24-hour support through our Coordination Centre

Our Coordination Centre is available for advice and clinical assessment. It provides a single point of contact for everybody who needs to access our services.

As the central hub for new patient referrals, the Coordination Centre team ensure that everybody with a life-limiting illness can access the service that is right for them, by carrying out standardised assessments.

Each patient's needs and circumstances are reviewed to ensure they are referred to the service or services that are right for them – whether that is a service offered by Rennie Grove Peace or a partner organisation.

The Coordination Centre operates from 8am to 6pm, seven days a week.

The Centre can be contacted on ☎ **01923 60 30 30**, 24 hours a day (urgent calls only after 6pm) or on email via ✉ **coordinationcentre@renniegrovepeace.org**



Bereavement support

We are there for families and loved ones, providing care and kindness at the most difficult of times, through one-to-one and group support.

Our Compassionate Cafés in the community provide a place to meet others who have been affected by bereavement or loss. We also run CompassionART Cafés, where support is given while expressing feelings through art.

We also work with schools and workplaces to support conversations around death and dying and encourage access bereavement advice.



Medical team

Our medical team provide specialist medical and pharmacy support to patients as well as advice, support and education to nursing staff and allied healthcare professionals within the team. The clinical teams have access to medical support out of hours across the area we serve.



Community Engagement and Compassionate Communities

Our community engagement team works directly in our local community to raise awareness of our services and to enhance our profile in the area we serve, targeting under-represented groups and widening access to our care.

Our Compassionate Communities team aims to build a more connected community for all people affected by death, dying or bereavement. We do this through our Compassionate Neighbours service – matching volunteers with local people who provide friendship and emotional support; our Compassionate Cafés which provide relaxed, friendly spaces for bereaved people to meet over a cup of tea or an art class; and our Support Hubs which offer wellbeing activities, connection and advice for those living with a serious illness.



Learning & Development

The Learning & Development team works across the whole organisation under the Director of People, tasked with the creation and nurturing of a confident and skilled workforce. They lead on the provision of mandatory and other training to staff identified through the appraisal process and to our team of volunteers.

Training Needs Analysis is carried out for all staff to ensure everyone can develop professionally. Training includes competency and additional specialist training to help develop a confident and competent workforce. Other work includes external education for care home staff, as well as training local healthcare professionals, student placements and volunteers on wider palliative and end of life care, and bereavement support.



Quality & Governance

Our Quality & Governance teams are responsible for supporting the whole organisation to meet its vision and overall strategic ambition standards, ensuring we adhere to regulatory requirements. The team monitors performance, proactively manages risk, provides quality assurance and clinical governance and demonstrates improved outcomes across all services.

We are committed to delivering the highest care, charity and best practice standards, ensuring our intended outcomes reflect the needs of our local population and we operate in an effective, efficient and ethical manner. The team is also responsible for ensuring the organisation's upholding of the CQC fundamental standards.



Development of a clinical strategy

Future challenges

There is no doubt that the UK hospice sector is currently experiencing challenging times. Against a backdrop of increasing costs, a tough economic climate for our supporters and a national shortfall of staff, we are now preparing for significant growth in demand for our services, but with reduced statutory funding.

The population is aging, the death rate increasing and progressive life-limiting illness is becoming more complex.

Our strategy for 2025-28 sets out our ambitious but achievable plans to ensure our core services are securely funded, our care meets changing local needs and our teams are operationally able to meet growing demand.

Our future sustainability as a hospice care provider, and our ability to deliver excellent patient care within Buckinghamshire and Hertfordshire, depends on:

- Leading the right people with the right skills to meet our patients' needs
- Streamlined operational efficiencies and processes
- Secure and planned funding
- A new data-driven approach to all our decision making, and
- An empowered and motivated workforce

This gives us five strategic priorities:



We are fully committed to providing excellent palliative and end of life care, free of charge, to all those who need it in our community, now and in the future.

Meeting growing patient demand

According to Hospice UK, the UK is facing a turning point. The death rate is expected to increase in the next 20 years. By 2040, around 130,000 more people in the UK will die each year, than deaths recorded in 2023.

In our defined catchment area, we are commissioned to support 59 GP surgeries. We serve a local population of 797,037 of whom 75% live in Hertfordshire and 25% in Buckinghamshire. It is estimated that 1% of this population will die each year, with 75% of those needing palliative or end of life care.

Supporting more patients

Using data estimated from the MacMillan Virtual Ward Project for patients in last year of life in West Hertfordshire, for 2025-26 it is estimated that there will be 5,989 palliative care deaths in our area, with the following requirements:

- 46% (2,745) will die in hospital
- 54% (3,244) will die outside of hospital, eligible for local hospice care

Understanding changing patient needs

Our own patient data shows us that increasingly individuals prefer to be supported in their own homes, surrounded by their belongings and the people they love. This may be in a care home, or a relative's home.

Healthcare and social care insight shows that living with a progressive life-limiting illness is also becoming more complex. Individuals may receive multiple diagnoses, known as comorbidities, which can present different care challenges and specialist knowledge requirements.

The key to Rennie Grove Peace being able to understand and support changing patient needs is for patients to be referred into hospice care much earlier in diagnosis. Together we can help both the patient and those around them to understand their diagnosis. This will help us empower individuals to live well with their illness and embrace the time they have left.

Strategic shift towards patient support earlier in diagnosis

We are currently well known for palliative and end of life care. Our strategic shift for 2025-28 is to encourage patients and their families to access our care much earlier in diagnosis, so that they can benefit from more support, and we can help them plan to live well. The recent Hospice UK awareness campaign talked about 'learning to embrace the time we have left' and this is our goal with more emphasis on Early Support and Living Well.

In 2024-25 the split of patients supported by phase of illness was as follows:

- 65% Dying Well Current local need is mainly end of life care
- 21% Living Well Opportunity to encourage earlier use of our services
- 13% Bereavement Opportunity to offer more support to those affected

We plan to build on the current Early Support opportunities in the community, where we host Compassionate Cafés, including our new CompassionART Cafés, Support Hubs and provide one-to-one Compassionate Neighbour support.

As each activity can be planned around the local need, and is led by our team of trained volunteers, more individuals in need of support can discover access to free local hospice care earlier in diagnosis. We provide accessible support and wellbeing services, offer volunteer-led companionship, as well as community-based drop-in bereavement support to all who need it.

Celebrating excellent patient care

With streamlined processes and ensuring we have the right people with the right skills delivering excellent care, our organisation will be able to meet this growing demand and continue to receive feedback we can be proud of.

We will actively seek feedback around experiences of our patient care, our charity shops, our events and activities. This will help us identify the impact we are delivering, any areas for improvement and encourage both our teams and our local community to be proud of the care we deliver.

Ensuring we are here to serve our local community

Sustaining our own future is critical to being able to meet the ongoing palliative and end of life care needs of the community. Our 2025-28 strategy is therefore planned around building a solid organisation, to ensure local hospice care is available for all, for now, forever.

In 2023-24, a total of £2.6m, just 14% of our income, came from statutory funding within Buckinghamshire and Hertfordshire. Our catchment area was reduced for community services in Buckinghamshire and we decided to stop offering Children's services and NHS Talking Therapies, as there are other providers of these in our local area.

In 2025-28, we plan to secure additional healthcare funding opportunities, such as local investment in frailty support, as well as focusing on improving overall cost efficiency across our whole organisation.

The remaining 86% of our income, a total of £15.68m was provided thanks to the generous support of our local community. Maintaining this level of support and encouraging more local involvement will be key to our ongoing success. Supporter activities and engagement and a more efficient retail and trading portfolio will be key to building revenue.

With our patients and those around them

By supporting individuals much earlier in diagnosis, we can develop stronger relationships, both with those in our care and with their wider friends, families, work colleagues and all those around them. We can get to know their wishes, help them embrace the life they have left and improve their overall palliative or end of life experience.

With our local commissioners, hospitals, hospice, healthcare and charity partners

Thanks to our planned care approach, rather than unplanned crisis visits, we can serve our community as part of an overall joined up healthcare provision. During this strategic period, we will collect evidence towards our goal of working together with local healthcare partners to reduce hospital admissions during palliative care by 25%.

With our future supporters

Finally, through building stronger patient, family and supporter relationships, we will have the potential to develop and grow income generation that will help secure the future sustainability of the organisation.

Developing stronger relationships will help ensure that local hospice care remains accessible to all, for now, for all, forever.

Investing in people

With investment in people, we will empower and motivate our workforce to collaborate both internally and externally. Stronger working relationships will not only improve outcomes for patients and those around them but also help improve work processes for the overall success of the organisation.



The Care Quality Commission is the independent regulator of health and adult social care in England. It ensures health and social care services provide people with safe, effective, compassionate, high-quality care and they encourage care services to improve. It is responsible for:

- Registering care providers
- Monitoring, inspecting and rating services
- Acting to protect people who use services
- Speaking with its independent voice, publishing its views on major quality issues in health and social care

Rennie Grove Peace Hospice Care is regarded as an independent provider of healthcare for the whole population and is registered with the Care Quality Commission (CQC) www.cqc.org.uk for: Treatment of disease, disorder or injury.

Our patient services are available to adults as well as patients transitioning into adult services (16 to 25 years). Bereavement Support is offered for all ages to families of patients and those around them, as well as throughout the community, in schools and workplaces.

CQC provider identification number: 1-14251877133. The Registered Manager is Jackie Westlake-Tritton – ID CON1-743055241 and the Nominated Individual is Mr Stewart Montgomery-Marks.



Registered address: Rennie Grove Peace Hospice Care,
Peace Drive, Watford, Hertfordshire WD17 3PH

✉ info@renniegrovepeace.org

☎ 01923 33 03 30

🌐 renniegrovepeace.org

Registered Charity Number: 1201713

Company Number: 14355610

