Statement of Purpose
Marie Curie - Betsi Cadwaladr University Health Board – Hospice Care at Home Service

Section 1: About the Provider	
Service provider	Marie Curie
Registered Address of Service Provider	One Embassy Gardens 8 Viaduct Gardens London SW11 7BW
Legal entity	Charitable company
Responsible Individual	Andrew Wilson-Mouasher, Director of Service Design
Manager of service	Lynne Phillips, Clinical Lead – Community Services (Wales)
Name of service	**Marie Curie - Betsi Cadwaladr University Health Board - Hospice Care at Home Service**
Address of Service	Marie Curie Nursing Service Marie Curie Hospice Cardiff and the Vale Bridgeman Road Penarth CF64 3YR
Section 2: Description of the location of the Service	
Regional Partnership area in which service is provided	North Wales Regional Partnership Board

Section 3: Range of needs of the individuals for whom the regulated service is to be provided

3a) Range of needs we can support

Marie Curie (Betsi Cadwaladr University Health Board) is a registered provider of palliative care services. We offer free nursing care to adults with all terminal illnesses, as well as support for family and friends.

The emphasis of care is community focused, enabling patients to be cared for and to die at home if this is their preferred choice. Our Healthcare Assistants have received training in palliative and end of life care. They provide one-to-one care and support overnight as well as care at very short notice in a crisis. Patients are referred to the Marie Curie Betsi Cadwaladr Service from the NHS for symptom control, end of life care and respite.

The service has been developed in conjunction with the NHS commissioners to meet specific needs. These include:

- **Planned Service:**

Care is delivered in the patient's home on a single patient per shift basis, usually overnight for nine hours (10pm to 7am). In special circumstances and in agreement with the Health Board we are also able to offer care for a shorter period during the evening or daytime**.**

- **Urgent Hospice Care at Home (Rapid Response) Service**:

Led by Registered Nurses and supported by Healthcare Assistants, this service provides flexible and responsive palliative and end of life nursing care, at short notice to patients at home. This overnight service (from 10pm to 7am) works in partnership with the out of hours GP service and overnight District Nursing service.

These services cover all palliative care patients who live in an agreed geographical location.

Our Local Clinical Coordination Centre (LCCC) staff are based in the Cardiff and Vale Hospice and the office in Dafen (Llanelli) to support the coordination of services across Wales. This includes the planning, prioritisation and allocation of care.	
3b) Age range of people using the service	Adults over the age of 18 and transition patients (16-18-year-olds) on request
3c) Gender of people using the service	The service is open to all genders
3d) Accommodation Based services	N/A
3e) Average number of adults supported by the service	900 per year
3f) Number of care hours delivered per week	400-750 hours of care

Section 4: How the Service is Provided

The Service is provided to ensure the following:

1) People feel their voices are heard, they have choice about their care and support, and opportunities are made available to them

Marie Curie (MC) proactively seeks feedback from service users and carers about what matters to them. Feedback can be given via our surveys (available in patient information packs and our website) and questions we ask include *'Did we listen and treat you how you wanted to be treated?'* and *'Did we involve you as much as you would have liked in decisions about care and support?*' - as well as *'How could we have done these things better?'*.

Feedback and any requests to meet patient and family needs is also facilitated via calls by Senior Nurses, our Local Care Coordination Centre, Registered Manager, Responsible Individual or Head of Nursing and Quality.

Care plans are jointly developed with District Nurses and with families to ensure the support provided meets the needs of patients.

As part of our Governance arrangements, quality standards are reviewed and monitored and we log all feedback including compliments and any complaints on InPhase (previously Vantage) which are reviewed weekly for trends and learning, as well as being reported to the Marie Curie Quality Committee. Feedback is also provided in reports back to commissioners.

The patient voice is shared with the wider Marie Curie team within the 'Experience of Care & Staff Wellbeing' Governance Group where opportunities for quality improvements are considered and implemented.

2) People are happy and supported to maintain their ongoing health, development and overall well-being

The team work collaboratively with the multi-disciplinary team in the Health Board to ensure those we support are happy with the care provided. Working in conjunction with primary care colleagues, staff ensure patient needs are identified through care planning. Quality standards are reviewed and monitored locally via governance arrangements, supported by policies and procedures.

Marie Curie provides free access to a telephone-based Information & Support Service, which is based in Wales. This is available to anyone who feels they might benefit from additional support and/or signposting.

Bereavement support and counselling sessions are available to everyone in Wales, and these are facilitated by either a trained Bereavement Counsellor (virtually or face to face) or a Bereavement Volunteer (virtually).

Volunteer Companion services are available to patients, living with a terminal illness and in the last 12 months of life. This service enables patients to be matched with a volunteer who can provide additional support, in turn aiming to improve and/or maintain quality of life and independence.

Where appropriate, staff are supported to encourage and empower patients to maintain their independence and lead their own care and also involving carers to participate in the provision of care when consent has been obtained.

3) People feel safe and protected from abuse and neglect

Our Patient & Carer Feedback Survey asks *'Did we treat you with compassion and respect?*' and *'Did you feel safe to talk about your thoughts, worries & feelings?'* – as well as *'How could we have better supported you?*'

Working with District Nursing teams, the team ensure all patients have an up-to-date care plan available in the patient's home. These plans are closely followed by the Marie Curie Healthcare Assistants. Quality standards are reviewed and monitored locally via governance arrangements, supported by policies and procedures.

Marie Curie Clinical staff complete mandatory training for Adult and Children Safeguarding - Level 2. In addition to their mandatory training, all senior staff across Wales have completed Level 3 safeguarding training. Staff have access to clear policies and processes when Safeguarding concerns are identified, and work with Health Board colleagues and safeguarding teams to ensure the safety of everyone that they encounter.

4a) Arrangements for admitting, assessing, planning, and reviewing people's care

Patients are referred to Marie Curie from the NHS for symptom control, end of life care and respite. For Marie Curie to become involved in a patient's care they must be referred by a healthcare professional already involved in their care. The NHS is responsible for ensuring that before referring a patient the District Nurse or their nominated representative undertakes the necessary risk assessment. The District Nurse or nominated representative will make a referral based on their assessment and every attempt will be made to allocate care. Staff feedback to the Local Clinical Coordination Centre (LCCC) to enable appropriate allocation of staff.

Patients are triaged to the Urgent Hospice Care at Home / Rapid Response Service by non-Marie Curie healthcare professionals who identify the patients care needs. The care and support provided in this service is predominately symptom control to avoid unnecessary hospital admission.

Occasionally younger patients (under 18 years of age) may be referred, and acceptance of the referral is considered on a case-by-case basis. A decision is made at senior clinical management level, based on our ability to ensure we can provide safe care to younger patients. When necessary, staff will work under the clinical leadership of other specialist paediatric care providers or community teams to ensure appropriate care and support can be given.

4b) Standard of care and support

Working closely with Community Nurses and General Practitioners, the emphasis of our care is to support people's choice to be cared for and die in their own home. As well as supporting people's choice, respecting people's privacy and dignity are values integral to the team.

Our Healthcare Assistants offer a high standard of care and expert support for patients and their families. All of them are trained and experienced in looking after people at home. They will be guided in the care and support they give by the care plan, provided by the District Nurse. They will also let the District Nurse know about any changes in the person's condition to help them plan their care.

Our Healthcare Assistants undertake a rigorous training programme and follow the code of professional practice for Social Care Wales. They can:

- give care as set out in the District Nurse's care plan
- assist with personal care needs such as washing, dressing and mobility
- help the patient to take their routine medicines
- maintain the patient's religious and cultural needs at end of life

4c) Language and communication need for people using the service

Marie Curie is committed to delivering an 'Active Offer' of Welsh language services in support of the Welsh Government's 'More than just words' strategic framework for promoting the Welsh language in health and social care. All patient literature is available in both English and Welsh.

Consideration is also given to whether an interpreter or other professional is required for the patient and their carers to ensure any communication or support needs are met. Marie Curie has access to the Wales Interpretation and Translation Service and Language Line Telephone Interpretation Service. We have Easy Read booklets available to help people understand information on our services, as well as British Sign Language videos**.**

Section 5: Staffing Arrangements

a) Numbers and qualifications of staff	**Andrew Wilson-Mouasher, Director of Service Design**, is the interim Responsible Individual and joined Marie Cuire in December 2000 as a Clinical Nurse Specialist in Palliative Care, Andrew is Registered Nurse with over 30 years' experience in Palliative and End of Life Care in acute community and hospice settings. Since Joining Marie Curie Andrew has held a number of clinical and operational leadership roles both locally and nationally and previously lead all of the clinical services in Wales as Divisional General Manager and was the previous held the roles of Registered Manager and Later Responsible Individual for the both the community and hospice services in Wales. Andrew has also held several committee and trustee roles during his career, most recently as Chair of the Film and Television Charity. **Viv Cooper, Head of Nursing and Quality for Wales** has overall responsibility for the quality of services delivered to patients and their families/carers and for non-medical clinical staffing in Wales. Viv is a Registered Adult Nurse with a Masters in Medical Law (LLM), a BSc (Hons) in Nursing and a Post Graduate Diploma in Palliative Care Nursing. Viv has been working in clinical and managerial roles for 35 years in cancer and palliative care and joined Marie Curie in July 2025 after 18 years working in NHS Wales as a Senior Nurse Manager in Oncology. **Lynne Phillips, Clinical Lead for Community Services (Wales) is the Registered Manager**. Lynne is a Registered Adult Nurse with a BSc (Hons) Degree in Adult Nursing and has over 10 years of experience working in District Nursing, palliative care, and a Community Practitioner Nurse Prescriber. Lynne has been with Marie Curie since 2019 and has worked as a Senior Nurse and Clinical Nurse Manager prior to being appointed as the Clinical Lead and has provided leadership and

<table>
<tr><td></td><td>operational support to Hospice Care at Home teams, ensuring high-quality patient care is delivered to both patients and families.

Zoë Evans, Clinical Nurse Manager is responsible for the oversight and support of Marie Curie staff working across the Betsi Cadwaladr University Health Board area. Zoe has a BSc (Hons) Degree in Adult Nursing and nine years of nursing experience having previously worked as a Deputy Ward Manager and in community nursing.

The staffing levels for the service budget is 15.86 WTE for Healthcare assistants and 5.07 WTE for registered nurses.

All Healthcare Assistants are registered with Social Care Wales.

Healthcare Assistants qualifications:
<table>
<tr><td></td><td>NVQ1</td><td>NVQ2</td><td>NVQ3</td><td>NVQ4/5</td></tr>
<tr><td></td><td></td><td>6</td><td>12</td><td>3</td></tr>
</table>
</td></tr>
<tr><td>b) Staff levels</td><td>The service has a 1.0 WTE Clinical Nurse Manager and a 1.0 WTE Senior Nurse

Planned Variable

On a day-to-day basis this service plans to deploy 15.86 WTE Healthcare Assistants and 5.07 WTE Registered Nurses, to meet the contract for commissioned hours with the Health Board. There will be a minimum of 6 staff on duty each night with additional availability to meet urgent patient needs.

Urgent Hospice Care at Home / Rapid Response Service

For each Rapid Response Service there will be 1 Registered Nurse and 1 Healthcare Assistant on duty per night (10pm to 7am). We currently deliver a Rapid Response Service in Central (Conwy and Denbighshire) and East (Flintshire and Wrexham).</td></tr>
<tr><td>c) Specialist staff</td><td>1.0 WTE Clinical Nurse Manager and 1.0 WTE Senior Nurse</td></tr>
<tr><td>d) Deployment of staff</td><td>N/a – accommodation based services only</td></tr>
<tr><td>e) Arrangements for delegated tasks</td><td>Healthcare Assistants will be guided in the care and support they give by the care plan, provided by the District Nurse. They will also let the District Nurse know about any changes in the patient’s condition to help them plan their care.

In the event of staff sickness or absence, Marie Curie will attempt to make alternative arrangements. Where this is not possible, we will communicate with the District Nurse and the patient and family as soon as possible.</td></tr>
<tr><td>f) Supervision arrangements</td><td>There is management support available from a Senior Nurse or Clinical Nurse Manager during office hours; and a manager provides on call support during out of hours.

Monthly team meetings take place and includes clinical supervision and reflective practice.</td></tr>
</table>

	Staff complete an annual 'My Plan and Review' process alongside the Career Development and Progression Framework, in which they review their practice and set objectives for the coming year; this includes a development plan to identify support needed to help you achieve their objectives. Clinical Nurse Manager/ Senior Nurse supervision sessions take place every three months.
g) Staff training	**Induction** All new starters complete a five-day induction programme prior to starting the role:

Day 1	• Introduction to Marie Curie and the Nursing Service • Staying safe • MySOS [lone worker training] • Record keeping and Confidentiality • Marie Curie Internet sites • Systems and Tablet training
Day 2	• Person centred culture • Introduction to communication skills • Caring for the dying • Personal wellbeing and development
Day 3	• Moving and handling training
Day 4	• Basic Life Support training • Group clinical skills assessments
Day 5	[to be completed after three months in post] • Introduction to Palliative Care • Death and Dying • Introduction to Symptom management • Loss, Grief and Bereavement

On completion of the four-day initial induction, shadow shifts are arranged, where the new starters will work alongside more experienced staff, until they feel confident to work alone.

Mandatory Training

All Healthcare Assistants and Registered Nurses must complete a range of mandatory training including:

Health Care Assistants

- Level 1 Medications (assisting)
- Level 2 Medications (supporting)
- Anti-Bullying and Harassment
- Medical Gases
- Marie Curie Code of Conduct
- Basic Life Support
- Infection, Prevention Control
- Food Hygiene Level 1
- Fraud awareness
- Record Keeping
- Prevent training

- Patient falls
- Safeguarding adults
- Safeguarding children
- Vantage/InPhase training
- Data protection
- Syringe Driver training
- Understanding the needs of people with specific conditions
- Conflict and Resolution training
- Mouth Care training
- Tissue Viability for HCA's
- Dementia training
- Manual handling- patient and load
- Equality and diversity
- Health and Safety
- Sepsis
- Fuel Poverty Awareness

Registered Nurse:

- Anti-Bullying and Harassment
- Medical Gases
- Marie Curie Code of conduct
- Basic Life Support
- Infection Prevention Control
- Food Hygiene Level 2
- Fraud Awareness
- Record Keeping
- Prevent training Level 3
- Patient Falls
- Safeguarding adults Level 3
- Safeguarding children
- Vantage/Inphase training
- Data protection
- RN Syringe Driver training
- Understanding the needs of people with specific conditions
- Conflict and Resolution training
- Mouth Care training
- RN Medication management
- Tissue Viability for RN's
- Dementia training
- Manual handling- patient and load
- Equality and diversity
- Health and Safety
- Sepsis
- Fuel Poverty Awareness

Mandatory training compliance is monitored by the Registered Manager who has access to reports from Marie Curie's Learn and Develop team. Action plans are in place to address areas of low uptake of training and non-compliance.

Clinical Nurse Managers ensure that all staff are clear about their roles and responsibilities and have appropriate support. They are responsible for regularly

	reviewing performance and identifying on-going training and development needs through Marie Curie's My Plan and Review process. Individual training plans ensure that required skills and competency levels are maintained and developed.

Section 6: Facilities and Services

Care is provided to people in their own homes. The District Nurse is responsible for coordinating care provided in the patient's home. Marie Curie Healthcare Assistants will document the care provided in the patient record, but the patient record belongs to the District Nurse/GP. We do not hold or store these records. Marie Curie clinical record system is EMIS. This is where the Marie Curie staff record the patient information from their visits, as well as ensuring the patient notes in the home are updated. Marie Curie value and proactively seeks feedback from people that use our services and their families. Due to the nature of the care, we provide patients and families can give feedback to us directly through completing one of our surveys (these are available in the patient information packs and, on our website,), or by making a complaint. The surveys measure different aspects of care and support. Service users can also provide direct feedback through our Information and Support Line. Details of these processes are incorporated into our patient information pack sent to all patients on referral to the service.

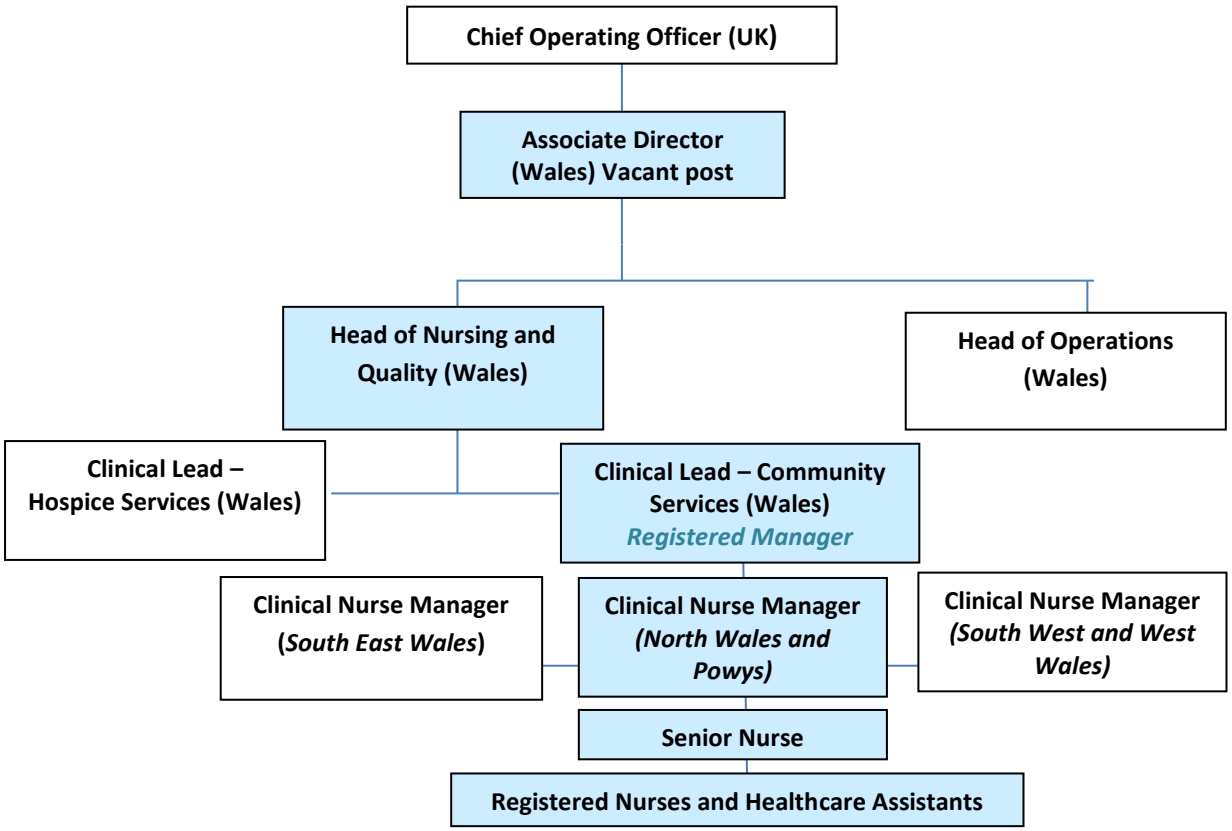
Face to face staff training is arranged at appropriate venues depending on the location of staff or via Microsoft Teams.

Section 7: Governance and Quality Monitoring Arrangements

The charity has a robust system of clinical governance that ensures the highest possible standards of care for our patients, which means we continually develop our policies and procedures. We have clear policies and procedures in place regarding the administration of, and assistance with medicines by healthcare assistants, and staff receive appropriate training for their roles and responsibilities. All community staff can access these policies and procedures via the Marie Curie intranet and the Marie Curie staff handbook.

Service Performance is managed through monthly Wales Clinical Governance meetings which the Responsible Individual attends and which covers incidents, compliments and complaints, review of mandatory training and appraisal compliance, audit findings, health and safety and Infection Prevention and Control. The Responsible Individual also attends quarterly meetings with Commissioners and monthly service performance reports of Key Performance Indicators are produced and shared with commissioners.

The **management structure** of the Service and lines of accountability are:



Measures used to monitor, review and improve the quality of care and support include:

- # Patients seen
- Total and average care contacts
- # of Referrals and discharges
- Time on caseload
- Preferred place of death and % achieved
- # of Commissioned and delivered hours
- Skill mix of hours delivered by Registered Nurse and HCA
- Patients by age, gender, locality, diagnosis and Index of Multiple Deprivation deciles

The Responsible Individual is a member of the National Caring Services Leadership Team and reports to the Quality Trustees Committee. The Quality Trustees Committee is a formal committee of the Board of Trustees (the Board) which oversees all aspects of clinical governance and quality of care, patient safety and clinical standards. The Board has delegated to the Committee oversight and assurance for clinical governance, clinical risk management, quality, and safety (including being assured that services meet the needs of patients and their families), applicable quality standards, and regulatory compliance requirements. They receive quarterly quality assurance reports and review the clinical Key Performance Indicator dashboard – these combined reports highlight any areas of concern about patient safety, patient experience and clinical effectiveness.

Marie Curie policy for addressing complaints ensures that all complainants will receive an acknowledgement within two days unless a full reply can be sent within five working days. Every

endeavour will be made to provide a full response to the complainant within 20 working days. If this is not possible, the complainant will be informed in writing of the reason for the delay and a full response will be made within five days of the conclusion of the investigation.

Marie Curie undertakes announced internal compliance visits.

Patients' and carers' views are sought to ensure we continue to provide the services they want and need. We also seek feedback from referrers, staff, and commissioners. Comments are included in the compliance visit report. The Responsible Individual joins these visits.

Updated February 2026