# Statement of Purpose
# Marie Curie Hospice and Community Services Midlands Region

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| Date: | September 2026 |
| Date due for review | September 2027 |

## Service Provider details:

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| Name: | Marie Curie |
| Address: | One Embassy Gardens<br>8 Viaduct Gardens<br>London<br>SW11 7BW |
| Email: | info@mariecurie.org.uk |
| Website: | www.mariecurie.org.uk |
| Main telephone: | 020 7599 7777 |
| CQC provider ID: | 1-102643321 |

Marie Curie is a charitable organisation, registered with the Charity Commission, which raises funds to offer care and support through terminal illness.

First established in 1948, we have been caring for people living with any terminal illness, and their families, for over 75 years. We offer expert care, guidance and support to help them get the most from the time they have left.

Our Caring Services operation includes the Marie Curie Hospice and Community Services(Hospice Care at Home) located across the UK. All services are free of charge to patients.

The people we help are referred to us from the NHS for symptom control, end of life care and respite. This is delivered both night and day by Marie Curie Registered Nurses and Healthcare Assistants trained in palliative care in patients own homes and in our hospices by a specialist multi-disciplinary team of staff.

## Legal status of provider:

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| Organisation details: | Incorporated organisation |
| Company number: | 507597 |
| Charity number: | 207994 |

## Location details:

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| Name: | Marie Curie Hospice and Community Services Midlands Region |
| Address for service: | Marsh Lane<br>Solihull<br>West Midlands<br>B91 2PQ |

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| Email: | Westmidlands.hospice@mariecurie.org.uk |
| Website: | https://www.mariecurie.org.uk/services/midlands |
| Main telephone: | 0121 703 3600 |
| Location ID: | 1-570827374 |
| CQC Service type: | Hospice services |
| Service users: | Adults (aged 18+) with a terminal illness and their families |
| Registered Manager: | Coreen Astle |
| Registered Manager contact details: | As above (address for location) |

## Regulated activities:

- Treatment of disease, disorder, or injury

## Aims and objectives:

**Aims**
Everyone will be affected by dying, death and bereavement. That can't be changed, but the end of life experience can. Everyone deserves the best possible care and support, reflecting what's the most important to them. Over the next five years and beyond, our mission is to close the gap in end of life care. Between now and 2028 we'll design and deliver services providing the best possible care and support to people living with any terminal illness, and those close to them.

**Objectives**
To provide high-quality, person-centred palliative and end of life care which supports individuals to achieve the best possible quality of life, including to:

- Deliver safe, effective and compassionate care aligned with individual needs and preferences
- Support symptom management, emotional, psychological and spiritual wellbeing
- Enable individuals and families to be involved in decisions about care
- Promote dignity, privacy, independence and choice at all times
- Work collaboratively with multidisciplinary teams and external partners
- Provide coordinated care that avoids unnecessary hospital admission where possible
- Ensure care is responsive to changing needs

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.

## Services

**Hospice Services**
Our hospice services provide specialist palliative and end of life care for adults living with any illness they are likely to die from, and support for those close to them. Care is delivered in a compassionate, dignified and supportive environment and includes inpatient and day hospice services, offering clinical nursing and medical care alongside physical, emotional, psychological, practical and spiritual support. Services are delivered by multidisciplinary teams and provided as part of an individual's wider care pathway, working in partnership with NHS and community services to ensure care is coordinated and responsive to individual needs.

**Hospice Care at Home Services**
Our hospice care at home provides specialist palliative and end of life care for adults living with any illness they are likely to die from, delivered in the individual's own home. Care is provided by Marie Curie nurses, healthcare assistants and other healthcare professionals and includes clinical nursing care, personal care and emotional support, available day or night depending on individual need and

local service provision. Services aim to support symptom management, provide reassurance, help people plan their care and support families and carers, working in partnership with NHS and community services to ensure care is coordinated and responsive, and where available offering fast, urgent support to help avoid unnecessary hospital admissions.

## Staffing:

Overall accountability for Marie Curie hospice and Hospice Care at Home services is held by the Chief Nursing Officer, who acts as the Nominated Individual and is responsible for ensuring the delivery of safe, effective and high-quality care.

Operational leadership is provided through a defined management structure, including the Managing Director for England and the Associate Director Strategic Partnerships and Services for the Midlands Place, who provides strategic and operational oversight of services.

The service is managed by the Associate Director, who is the Registered Manager for Marie Curie Hospice and Community Services Midlands Region and is responsible for the oversight of the service, including quality, patient safety and workforce.

Clinical leadership is supported by the Medical Director, who provides medical oversight and leadership for clinical practice.

Services are delivered by suitably skilled and appropriately trained staff, supported by clear clinical leadership and management arrangements. Staff are supported through supervision, appraisal and ongoing professional development to ensure they have the skills and competencies required to deliver safe and effective care. Robust recruitment processes are in place, including appropriate pre-employment checks, references and induction arrangements.

Volunteers also play an important role in supporting the delivery of services.

## Hospice Facilities

The hospice provides a range of clinical and non-clinical facilities to support the delivery of specialist palliative and end of life care in a safe, comfortable and dignified environment.

Facilities include patient accommodation all accommodation is single rooms, with en-suite facilities, designed to promote privacy, comfort and independence. Communal areas are available to support social interaction, dining and therapeutic activity, alongside quiet spaces for rest, reflection and private conversations. Outdoor spaces and gardens are available to support wellbeing and access to the external environment.

Appropriate facilities are in place to support assessment, treatment and care delivery, including clinical areas and equipment required for symptom management and ongoing care. Equipment is available to support safe care delivery, including moving and handling equipment, pressure-relieving aids and other specialist equipment in line with people's assessed needs.

Facilities are also available to support visitors and those important to the person, including spaces for family members to spend time with patients and, where possible, arrangements to support overnight stays.

Access to and egress from clinical areas is designed to meet the needs of people with disabilities, in line with relevant legislation and accessibility standards. All premises and equipment are maintained to ensure they are clean, safe, suitable for their intended purpose and support the delivery of effective care.

## Feedback - Compliments, Concerns, Complaints and Surveys:

We actively seek and value feedback from people who use or experience our services, including patients, families, carers, visitors, volunteers and staff. Feedback can be provided in a range of ways, including through surveys, comments, compliments, concerns and complaints. Information on how to provide feedback is made available through patient information, on our website and via staff.

Feedback is used to understand people’s experiences of care and to inform service evaluation, learning and continuous improvement.

We have systems in place to ensure that concerns and complaints are managed appropriately, in line with organisational policy.

We involve people with lived experience in supporting and advising on the development and improvement of services, helping to ensure care is responsive to the needs of those who use it.
We are regulated by the Care Quality Commission (CQC). The most recent inspection report is available on the CQC website, on our website, or on request.