



Our charity's future

Strategic Plan 2014-19

Marie Curie
Cancer Care



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Welcome

Marie Curie has a proud history. For the past 65 years, through our nursing service and hospices, we have provided high quality care for people who are terminally ill with cancer and, more recently, other illnesses as well. It is from this strong foundation that we plan to grow. The scale of the challenges facing us as a society is unprecedented, with a rapidly aging population who have changing needs at the end of their lives. People are also frequently coping with more complex health and social care problems than experienced by previous generations. And all this comes

at a time when the NHS is facing significant financial pressures.

Our response to these challenges is set out in this strategic plan for the next five years. Knowing their extent, we believe we must use our knowledge, expertise and resources to help more people by giving them the individual care, support and guidance they need.

But we can't do everything ourselves. We will continue to work in partnerships across

the UK with the NHS and the many other organisations which play a part in providing care and support for people at the end of their lives. We will nurture and grow these partnerships for the benefit of all terminally ill people and their families.

When someone is told that they are terminally ill, and that there is no cure, it can be devastating for them and the people close to them. We will launch new services to provide them with vital support, information, guidance and companionship in those

difficult early days. Over time people may require more intensive care and we will give them that through our expert teams. We will provide as many people as we can with high quality, personalised nursing care at home or at one of our hospices when the end of their life comes.

Our five-year strategic plan is ambitious, stretching and innovative. During this period we intend to establish new services; grow our nursing and hospice capacity; invest more in research and influencing the

development of health policy across the UK; and invest significantly in our infrastructure so we can deliver more extensive care and support, both directly and indirectly. To deliver these plans, we will continue to rely on the generosity of our supporters, for which we are immensely grateful.

We will all die. So we believe that how we live during the final phase of our lives is of universal importance. There is still a lot that needs to be done to improve the experiences of terminally ill people and their families; we

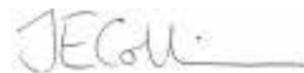
want to make an even greater contribution to this work in England, Northern Ireland, Wales and Scotland.

We are grateful for the views of everyone who has helped shape this strategic plan and we look forward to working with you to make it a reality.

John Varley
Chairman



Dr Jane Collins
Chief Executive





How we developed our strategy

To arrive at this ambitious plan we listened to many voices.

We heard directly from people living with a terminal illness and their families about their experiences. We asked them what life is like for them and what care and support they want to help them through difficult times.

We listened to our Expert Voices group, made up of family members, friends and carers of terminally ill people, on many topics, including life after the death of a loved one.

Our staff and volunteers shared their experiences, and we met with many others from outside the organisation to discuss how, together, we can improve care and support for people with a terminal illness and their families.

We also commissioned research to ensure that our plans for the future are underpinned with robust evidence.

We are grateful for the generosity with which people shared their stories, thoughts and ideas, and hope they feel this plan adequately represents their contributions.

Vision

A better life for people and their families living with a terminal illness

Mission

To help people and their families living with a terminal illness make the most of the time they have together by delivering expert care, emotional support, research and guidance

Values

Always compassionate

- Connecting and empathising with people
- Starting with the person's needs, respecting them and treating them with dignity
- Supporting people's choices and decisions

Making things happen

- Being clear and straightforward
- Listening so that we can understand and do the right thing
- Prepared to speak up and challenge on people's behalf

Leading in our field

- Building on our unique skills, expertise and experience
- Sharing, innovating and partnering
- Always seeking to improve in everything we do

People at our heart

- Valuing every individual
- All views and expectations are heard and respected
- Bringing people together and building relationships

The challenges we face

Between 2012 and 2030 it is predicted that there will be a 17% increase in the number of deaths in England and Wales¹. People are also dying at increasingly older ages; the population aged 75 and over is projected to increase to 7.2 million by 2033 and the number of people aged over 90 to increase to 1.2 million². This means more people will be living with a terminal illness in the future.

Many of these people will have multiple needs and their care is likely to be much more complex. And that's a concern, because many people today are already not able to live the way they want towards the end of their life.

For example, the National Bereavement Survey (VOICES) found that 81% of the dying people who communicated a preference to their loved ones said they wanted to die at home, but only 23% of people covered by the survey died at home³.

There are other issues that we already experience that will only become more acute as the make-up of our population changes. Today, access to good palliative care depends on diagnosis. People with cancer have greater access to care and support than any other group – but even then it can and does fall short. Forty-three per cent of

the 400,000 people each year that have a palliative care need will have cancer. The remaining 57% will be diagnosed with a terminal illness other than cancer⁴.

There is much to do to guarantee that everyone with a terminal illness gets the personalised help they want and need.

It is essential we respond to the diverse challenges and healthcare environments across the four nations that make up the UK.

We believe passionately that everyone who is terminally ill, be it with cancer or any other illness, and their families, should be able to access high quality personalised care. They should be treated with kindness and dignity, with services that respond to their individual needs. We believe this should be the case regardless of where people spend their last days, whether that is in a hospital, a hospice, a care home or their own home.

1. Gomes and Higginson, Where people die (1974 – 2030): past trends, future projections and implications for care, Palliative Medicine, 2008, 22:33.

2. National End of Life Care Intelligence

Network, Deaths in Older Adults in England, October 2010.

3. Office for National Statistics, National Bereavement Survey (VOICES), 2012.

4. Fliss EM Murtagh et al., How many people

need palliative care? A study developing and comparing methods for population based estimates, Palliative Medicine 2014, 28: 49.



Objectives at a glance

1

We will reach more people and their families living with a terminal illness.

We will help people regardless of their diagnosis, and sooner after this phase of their illness is identified.

We will continue to have nursing at the heart of what we do.

2

We will improve the way terminally ill people are cared for across the UK.

As the experts in care for people with terminal illnesses, we will work with other providers and key decision-makers to improve care and support, wherever it is delivered.

3

We will manage our charity as effectively and efficiently as possible.

To deliver our strategic plan, we will invest in four key areas of the charity – our people, our fundraising, our brand and our communications.

Objective 1

We will reach more people and their families living with a terminal illness



We will provide more services to more people with terminal cancer or any other terminal condition, sooner after this phase of their illness is identified. We will grow our existing services and develop new ones to provide care, support and information throughout the UK.

How will we do it?...

At a glance:

- We will provide nursing and hospice care of the highest standard to more people each year.
- We will launch a free information service to support everyone affected by a terminal illness.
- We will expand our Helper service so that practical and emotional support from our trained volunteers is available nationwide.
- We will increase our support for bereaved people.

We will provide nursing and hospice care of the highest standard to more people each year.

Over the next five years, we will increase the number of people we provide excellent personalised care to through our hospices and nursing service each year from 39,000 to 50,000. We will learn from others, as well as innovate and share what we learn with others in turn. We will also deliver services more efficiently so that we can help more people.

"When we were caring for Mum on our own, we were so focused on looking after her that we'd forget to have proper conversations with her. But all that changed when our nurse came along. Mum was so happy in her own house. But without the help we got from Marie Curie Nurses, we just wouldn't have been able to care for her at home."

Patrick Mitchell, whose mother was cared for by the Marie Curie Nursing Service.

We will launch a free information service to support everyone affected by a terminal illness.

We know from people and their families living with a terminal illness that they need information and support on a range of issues, available in one place.

Marie Curie will become a key source of information on: clinical matters; help with navigating the health and social care systems; financial and welfare issues; advance care planning;

writing a will; funeral planning; and other issues.

People will be able to access information through multiple channels, including web, mobile and tablet, social media, telephone, face to-face, printed materials, peer-to-peer forums and live chat.

"This was all completely new territory. What would have been like gold dust would have been a single place to get help, when you're really in the depths of that urgent need."

Peter Buckle's wife died six months after being diagnosed with a brain tumour. He is now a member of Marie Curie's Expert Voices group.

We will expand our Helper service so that practical and emotional support from our trained volunteers is available nationwide.

We want to help people get as much as they can out of the time they have left. Many people have told us they want a range of practical and emotional support to help them live their lives. Some want companionship or the opportunity to do things they might not otherwise

do; many need help with practical tasks such as gardening or walking the dog.

"I find it difficult sometimes to sleep. I do get episodes sometimes when I fall asleep and wake up very breathless. Hannah will come and read to me. I don't know where I'd be without her now, now I've had the experience of the quality she can bring to my life."

Cecilia Ryan, who has chronic obstructive pulmonary disease, is supported by Marie Curie Helper volunteer Hannah.

We will increase our support for bereaved people.

We will increase the bereavement support we offer in all our hospices and explore how we can offer this to everyone supported through the Marie Curie Nursing Service. We plan to partner with a bereavement charity to achieve this.

We will also research the unmet need for individually tailored bereavement support and consider what

our role could be in meeting this need in the future.

"At the end, I suddenly felt a void. If there had been a connection that carried on at the end, that would have helped me with the aftermath. That kind of special support is the one thing that lives on."

Marie Curie Nurses cared for Bill Whiland's wife Edith, who had motor neurone disease.



Objective 2 We will improve the way terminally ill people are cared for across the UK

How will we do it?...

We are passionate about providing high quality care to terminally ill people, with cancer or any other illness, and their families. We will use our knowledge and expertise to improve both the care and support we provide ourselves and that provided by other organisations.

At a glance:

- We will double our investment in research on care for terminally ill people.
- We will increase our role in influencing the policy environment across all parts of the UK.
- We will innovate in how we design our services and in the partnerships we form.
- We will establish a Marie Curie Training Academy, to develop our own people and others.

We will double our investment in research on care for terminally ill people.

Increasing our investment will allow us to grow our research capability, commission more research and increase the number of Marie Curie research centres. We will make sure that what we learn is disseminated across the sector to improve the care of terminally ill people wherever they are cared for.

We will increase our role in influencing the policy environment across all parts of the UK.

We will use our knowledge and expertise to help policy makers and legislators better understand the needs of terminally ill people and their families. We will use our knowledge, based on the experience of the people we help, to campaign for improvements in care and support for all.

We will innovate in how we design our services and in the partnerships we form.

We will work in partnership with local providers and commissioners to design and deliver innovative services that meet changing needs in a challenging environment. And we will form innovative partnerships with a range of organisations to achieve lasting improvements in the experiences of terminally ill people and their families.

"This partnership between Marie Curie and the Royal College of General Practitioners is an exciting opportunity to really make a difference to the clinical care and compassion that patients receive at the end of their lives."

Dr Peter Nightingale, Clinical Lead for End of Life Care, Royal College of General Practitioners

We will establish a Marie Curie Training Academy, to develop our own people and others.

We will continue to train and develop our own professional workforce to deliver the highest quality care and support and explore how we can share our experience with the NHS and other organisations.

The Marie Curie Training Academy will have high quality personalised care, kindness, respect and dignity at its heart.

It will help raise standards of care across the UK, whether people spend their last days in a hospital, hospice, care home or their own home.



Objective 3

We will manage
our charity as
effectively and
efficiently as
possible

We are fortunate to be a highly respected charity and have significant support from the UK public, because of our track record in helping people with cancer and other terminal illnesses.

It is important that we respect that support and repay that trust by making sure every penny donated to us is spent well. We will manage our resources to ensure that we achieve the greatest impact for the greatest number of people, keeping our work simple and efficient.

We will ensure financial stability and long-term viability by investing in our capacity to raise funds and ensuring that our reserves policy is met. Initially, we will use our reserves to invest in the major change set out in this strategy.

How will we do it?...

At a glance:

- We will value our people and support them in doing their jobs well.
- We will invest in our fundraising to make sure our resources match our ambitions.
- We will transform our brand so everyone living with a terminal illness sees us as relevant to them.
- We will invest in expertise and equipment so we are communicating effectively with everyone involved with the charity.

We will value our people and support them in doing their jobs well.

Our organisation is built on the compassion and expertise of our staff and volunteers. Our new People Programme will involve staff and volunteers in embedding our values throughout the charity. It will seek regular feedback and input from all staff and volunteers and involve them during this period of wide-ranging change.

We will invest in our fundraising to make sure our resources match our ambitions.

We will support our fundraising in a range of ways, including investing in the growth of our community fundraising groups. They will play an important role in bringing together people who wish to support us, including bereaved friends and relatives.

We will transform our brand so everyone living with a terminal illness sees us as relevant to them.

The Marie Curie brand will make it clear we support all terminally ill people and their families – regardless of whether they have cancer or another illness. Our brand will reflect fully our vision, mission and values, as well as the range of services we offer.

We will invest in expertise and equipment so we are communicating effectively with everyone involved with the charity.

Through our Better Connected programme, we will invest in our staff and digital infrastructure to ensure we can communicate effectively with everyone we want to reach – from supporters and volunteers through to people living with a terminal illness, their families, friends and carers.

For more information

If you would like to know more about how you can help Marie Curie Cancer Care provide more care to more people with a terminal illness, please contact us:

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