# Policy: Hospice Governance

Governance is an internal framework through which organisations are accountable for continuously improving the quality of their services and safeguarding high standards of care by creating an environment in which excellence will flourish. It underpins the standards against which the Care Quality Commission (CQC) inspects and regulates voluntary hospices.

Clinical governance ensures that patient care is the main focus and priority in hospices and each patient receives safe, high quality care from everyone involved in looking after them.

The Hospice Governance policy for Blythe House Hospicecare was formalised in 2015.
The term hospice governance is used to emphasise the governance framework of Blythe House and its policies apply to all areas of the organisation. The governance principles apply to all employees and volunteers.

**The five pillars of the framework are:**

❖ **Safe**
❖ **Caring**
❖ **Effective**
❖ **Responsive**
❖ **Well-led**

**Key components of Hospice Governance include:**
- Clear lines of accountability for the overall lines of quality of clinical care and all hospice activities and leadership.
- Effectiveness, using practice based on evidence.
- A programme of quality improvement.
- Risk management systems.
- Systems for identifying and dealing with poor performance.
- Systems for professional development and continuing education.
- Audit of care, activities and outcomes.
- Service user experiences.

**Hospice Governance responsibilities:**
- The Board of Trustees have the ultimate responsibility for the corporate governance of the hospice. (Charity Commission 2012)
- The Hospice Governance committee meets bi-monthly and reports directly to the full Board of Trustees.

- The CEO is the designated lead for Hospice Governance, chairs the Hospice Governance committee, reports on operational governance matters; this is a standing item.
- The responsibility for Hospice Governance as defined in this policy is the responsibility of all senior managers.
- All senior managers are responsible for implementing and monitoring governance matters within their own areas. They are responsible for disseminating information to all staff about Hospice Governance and informing them of their individual responsibilities with regard to Hospice Governance.

# Procedures: Hospice Governance

- Hospice Governance will be an agenda item at all team meetings including clinical and non-clinical forum meetings.
- Hospice Governance is a standing item at the Board of Trustees meetings.
- Governance bulletins printed with red border are issued as required to inform staff of important governance issue e.g. breaches in security or safety regulations.  These must be read and signed as read by all staff in all relevant areas and be minuted as discussed at relevant team meetings.
- The Hospice Governance meeting is normally attended by senior managers, but any member of staff may attend if agreed with their senior manager.
- Minutes of the Hospice Governance meeting are distributed to all attendees and to those giving their apologies.  The CEO maintains a central file containing minutes of all meetings.
- Members of staff are encouraged to use the Hospice Governance meetings as a forum for presentations.
- In addition to the above meetings any suggestions or concerns related to Hospice Governance may be discussed with the CEO, senior managers at any time.

**Hospice Governance and Audit measures:**
- Minutes of Hospice Governance meetings
- Presentations at Hospice Governance meetings
- Team meeting minutes including: Clinical committee; Income Generation, Finance and Remuneration   committee; Board of Trustees meetings; Staff meetings
- Governance bulletins
- CQC Compliance reports and action plans
- Health & safety reports and action plans
- Risk assessments
- Accident reports
- Complaints register
- Budget and finance forecasts
- Annual finance audit and action plans
- Annual Board of Trustees' report and accounts.

**Related policies:**
- Risk management　　　　Safety & suitability of premises　　　Health & Safety
- Infection Control　　　Care & wellbeing of service users　　Management of Medicines
- Safeguarding 　　　　　　Complaints　　Records　　　　　Meeting Nutritional Needs
- Lone working

**References:**
- The Charity Commission (2012)
- www.CQC  last accessed Feb 2019
- www.hospice.uk.org  last accessed Feb 2019

# Hospice Governance Framework

**Safe**    **Examples:**   Safeguarding
Fire policy & procedures; fire training; fire alarm checks
Management walk around checks.
Accident reports
Infection control
Mental capacity policy & training
Financial control policy
Managements of medicines
Risk assessment
Lone worker policy

**Caring**    **Examples:**   Holistic care plans
Key worker monitoring review systems
Supporting workers policy
Bullying policy
Patient post-discharge support groups
Self-referral systems
Advance care planning policy
Transfer of care policy
Safe staffing levels to optimise standards of care
Dignity & privacy policy
Comfortable private rooms to support practice
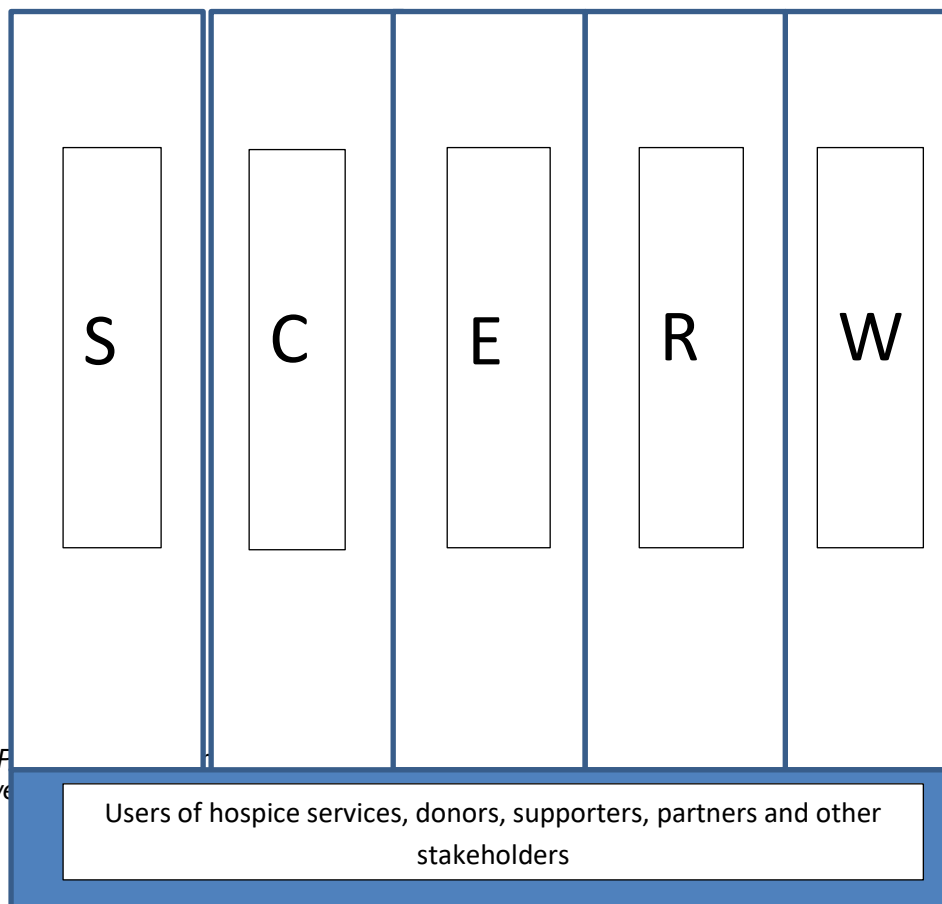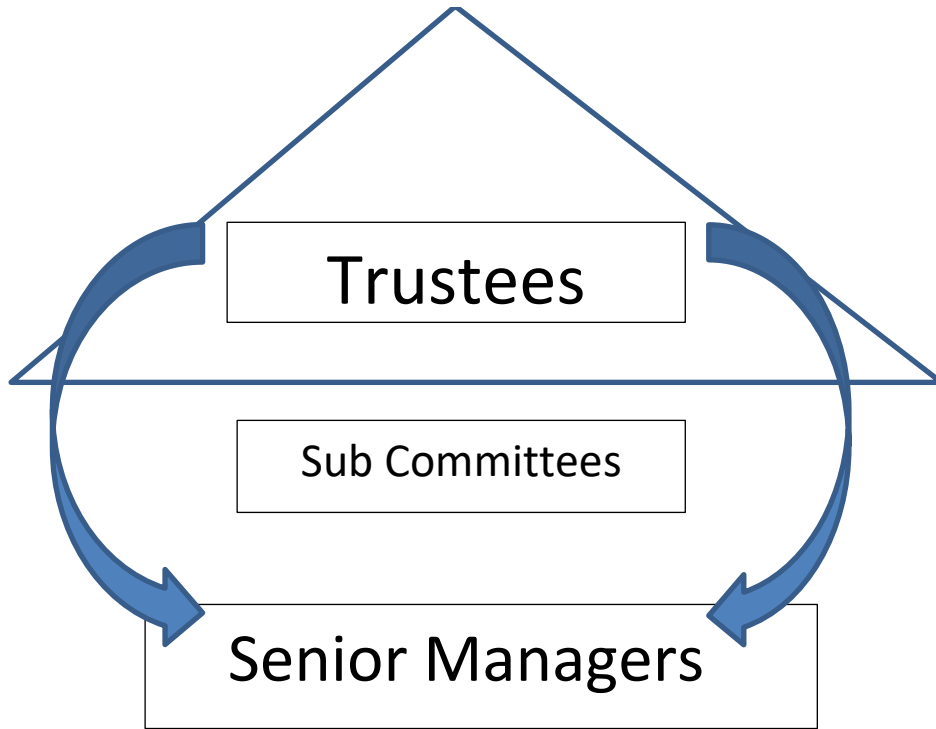Farewelling volunteers policy

**Effective**    **Examples:**   Policies and procedures
Standards
Guidelines
Information governance
Evidence based practice
Service-user feedback
Audits
Quality improvement plans

**Responsive**
    **Examples:**   Complaints
Service user feedback
Meeting nutritional needs policy
Whistleblowing policy
Working with donors
Events policy
Staff questionnaires

**Well-led**    **Examples:**   Policies and procedures
Meetings schedule
In-house education; bespoke and mandatory training

Annual individual performance review; 1:1meetings available on request with senior manager or Hospice Director
Multi-disciplinary working policy
Provision of regular information
Clear structure and systems of communication and responsibility
Robust recruitment procedures
Working with other organisations and services policy

# Hospice Governance Structure

Trustees

Sub Committees

Senior Managers

S    C    E    R    W

Users of hospice services, donors, supporters, partners and other stakeholders

# Governance Framework



A circular governance framework diagram. The outer ring segments, clockwise from top right: 1. Strategy, 2a. Policy, 2b. System, 2c. Support, 3. Quality Assurance, 4. Continuous Improvement. The inner ring labels, clockwise: Set Criteria, Provide Tools, Monitor Outcomes, Determine Improvement.