

# Scottish Hospices:

Working to address the challenges  
facing health and social care  
in Scotland



Summary Report



Hospice care reaches  
far beyond the walls of  
the hospice building.

A purple flower graphic with five petals, used as a background for the first statistic.

**46300**

family and friends  
supported each year

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**15200**

patients directly  
supported each year

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**3700**

inpatients  
each year

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**253**

hospice beds

Hospices are renowned for the individualised care and support they provide for people towards the end of life. However, inpatient care is the tip of the iceberg when it comes to the impact of hospices.



Hospices have expertise, experience and understanding of palliative care and the needs of local communities, and an enthusiasm to share this to improve local services. When involved in planning with statutory partners, hospices have proven to be a huge asset, leading and supporting the design and delivery of services that meet local needs.



# Hospices support the Scottish health and social care system by...

## ...delivering core services

Hospices provide specialist support in people's homes, inpatient beds, outpatient clinics, befriending and remote support like telecare. Hospice staff serve alongside NHS colleagues as part of formal palliative medicine on-call rotas, both in core hours and out-of-hours. Hospices provide expert telephone advice to health and social care professionals working in a variety of hospital, community and care home locations. This support is often available 24/7, and whether or not a patient has had previous contact with the hospice. Hospice staff work in partnership with colleagues working in other parts of the health and social care system, and are active in local professional networks.

## ...contributing major funding

Last year, hospices raised over £50 million from the public, without which vital services would not exist. This funding was harnessed through fundraising and charitable donations, and reflects the importance Scotland's people place on the availability of quality specialist palliative care. Together with a further £23million from statutory sources hospices were able to spend nearly £74 million. This represents 18% of the Third Sector's total contribution to Scotland's health economy.

## ...nurturing innovation

Hospices nurture innovation, and because of their size and structure can often explore new ways of working more quickly and easily than larger public sector organisations. Hospices recognise the need to continue to develop and adapt services, working with a range of partners to meet the ever-changing needs of communities. Hospices have strong governance and a pragmatic understanding of the importance of achieving best value for money through efficiency, good configuration of services and working co-operatively with other service providers. The Hospice Movement has been instrumental in ensuring palliative care in the UK is ranked best in the world.

## ...delivering education

Most hospices have education departments, and provide education and training on a range of topics including holistic assessment and symptom management; communication skills; anticipatory care planning; breaking bad news; loss, grief and bereavement; family support and spirituality in healthcare. Hospices are a main provider of palliative care education and training to the NHS, including GPs, district nurses and other NHS staff, and also provide education, training and advice to support to care home staff. Hospices provide education for undergraduate and postgraduate students in a range of health and social care-related subjects. Hospices also undertake outreach work and provide education and information to the general public.

## ...supporting research

Hospices are actively involved in leading and supporting palliative and end of life care research, for example undertaking research alongside practice, contributing to research conferences and journals, reviewing research evidence, contributing to the development of national practice guidelines, and providing funding for academic posts. Many hospices have close working relationships with local universities and colleges, enabling a variety of formal collaborations including shared educator/lecturer posts, delivery of palliative care education, collaborative research studies, commissioning of research, provision of student placements, and hospice participation in clinical research and trials.

## ...building caring communities

By taking their expertise, resources and understanding beyond the walls of the hospice building, hospices support individuals, communities and other organisations to better care for each other. Hospices are a hub around which supportive communities are built, and are at the forefront of work to equip people and communities to deal with the consequences of loss, death, dying and bereavement. Currently around 7000 people in Scotland are active volunteers in support of their local hospice.

# Hospices are for people...

## ...with any life-limiting illness

Hospices actively support people with any life-limiting, terminal illness that can benefit from their services. This includes (but is not limited to) people with cancer, heart failure, chronic obstructive pulmonary disease, dementia, end-stage liver disease, motor neurone disease, multiple sclerosis, Parkinson's Disease and stroke.

## ...from any background

Generally, people are referred to a hospice by a health and social care professional. Hospices strive to provide equity of access on the basis of clinical need, to people from all socioeconomic, cultural and minority groups.

## ...of any age

Adult hospices and the Children's Hospice Association Scotland (CHAS) work collaboratively to support people of all ages. CHAS is the sole provider of children's hospice services in Scotland and delivers care to babies, children, young people and their families up to the age of 21. Adult hospices provide services for people over 16 or 18 depending on the hospice.

## ...living at home

Hospice specialists visit and provide care for people who live at home but who need support with pain, other symptom management or psychosocial issues. This care is available to people whether they live at home, in a care home or in another residential setting. People can also receive holistic care and symptom management by attending a hospice outpatient clinic. Hospice staff also give advice and support to NHS and social care professionals providing care in community settings.

## ...or in the hospice

Scottish voluntary hospices provide a total of 253 beds, where patients can be admitted for management of specific symptoms and the assessment of complex needs and care at any stage of their illness and at the end of life. Some people have highly complex palliative care needs that can only be addressed within a specialist palliative care unit such as a hospice. Hospices have facilities and highly skilled staff on site which enable them to diagnose, assess and treat people who might otherwise experience unnecessary distress. Approximately a third of people admitted to a hospice return home after a period of assessment, treatment or symptom control.

## ...and their family and friends,

As well as caring for an individual with an illness, hospices support a person's family and those close to them. It is estimated that for every patient, a hospice supports an additional three family members, for example through drop-in information, support groups, complementary therapy and bereavement support.

## ...and community.

Hospices help to foster resilient and compassionate communities, and offer a safe and supported place for people to ask questions or have open conversations about death, dying and bereavement. Hospices shape and support their local community's capacity to care in many ways, for example by establishing peer support groups; employing outreach workers; developing public-facing resources and education; co-ordinating befriending services; working with schools; and training volunteers.



**Hospices optimise aspects of life which bring meaning, joy and hope.**

**People can use a hospice without dying in the hospice.**

**Hospices are funded, run and trusted by their communities.**

As independent organisations, hospices are often uniquely placed to deliver creative and quick responses to the changing needs and choices of people with life-limiting illness. By working closely with Integrated Joint Boards, hospices can bring leadership, expertise and patient-driven solutions to deliver greater value.



**For more detailed information about hospices and the integral role they play in Scotland's health and social care, please check out our full report here: <https://www.palliativecarescotland.org.uk/content/scottish-hospices/>**

In this report we use the term 'hospice' to refer to Scottish Independent Voluntary Hospices. Independent Voluntary Hospices are charities - owned, governed and financially supported by the communities they serve. Not every area in Scotland has access to an independent voluntary hospice. Both Hospices and NHS specialist palliative care units and teams deliver specialist palliative care. We use the term Integrated Joint Boards to refer to IJBs and NHS Highland in its capacity as a lead agency.

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