

Enter and View Report

Location of visit	Overgate Hospice, 30 Hullen Edge Rd Elland, Halifax HX5 0QY
Service provider	Overgate Hospice
Date and time	Thursday 4 th October 2018, 10-12pm
Authorised Representatives	Katherine Sharp, Lynne Keady, Eileen Rudden, Frank Reddington
Contact details	Healthwatch Kirklees, Units 11-12 Empire House, Wakefield Old Road, Dewsbury, WF12 8DJ Email: info@healthwatchkirklees.co.uk Tel: 01924 450379

Acknowledgements

Thank you to all the patients, staff, visitors and relatives at Overgate Hospice who spent time talking to us about their experiences of using services or working there. Thank you to Tracey Wilcocks for helping us to arrange our visit and for talking to us with other staff members about how the service operates and for taking the time to show us around the hospice.

Disclaimer

Please note: This report relates only to a specific visit and the report is not representative of all service users (**only those who contributed within the limited time available**).

What is Enter and View?

Enter and View is a visit to a health or social care setting by Authorised Representatives of Healthwatch Kirklees and Healthwatch Calderdale as a means of gathering evidence of people's experiences. Enter and View is one of the many tools used by Healthwatch to gather opinion. The visits are not a formal inspection or part of an investigation.

Healthwatch Kirklees and Healthwatch Calderdale have a right to carry out Enter & View visits under the Health and Social Care Act 2012. Enter and View visits give service users, carers and staff the opportunity to speak to an independent organisation about their experiences of health and social care services. They may talk to us about things which they feel could be improved, but we also want to find examples of good practice so that we can recognise and promote things that are working well. The visits may look at a single issue across a few settings or may be in

response to local intelligence about a single setting or from an area we have not visited before to understand how services work.

The Service

Purpose of the service

The hospice provides inpatient services for patients with life limiting illness to manage complex symptoms and holistic problems, respite, and end of life care in Calderdale. Patients from other areas are admitted, on occasions, to support other local hospices who they work closely with. The aim is to improve lives in a caring environment. The hospice is a registered charity that is partly publicly funded but relies heavily on charitable giving.

Staffing and patient numbers on the day of the visit

On the day of the visit there were eleven patients staying at the hospice, another patient was due to arrive later in the day for respite. The staff names were on a magnetic white board to show who was working on the unit. We were told that staffing is planned to meet the needs of the service and additional staff can be brought in, if required. During our visit there were four qualified nursing staff, auxiliary staff, domestic staff, kitchen staff and chef. We noticed on the board that three nursing staff were down on the later shift, in the afternoon and three nursing staff on the overnight shift.

The Visit

What we did?

We completed an announced visit of Overgate Hospice on request of the hospice. The visits took just over two hours to complete. During the visit we spoke to patients, visitors and staff and also provided a survey for staff and visitors to complete if they were unable to speak to us on the day. The survey was available for a short period after the visit for people to complete.

We agreed that the visits would not include the day hospice patients on this occasion, so concentrated on the inpatient unit. We also agreed that this visit would be informal and we would speak to as many people as we were able within the restrictions of the hospice and the patients who were using the service. We used prompt sheets with questions relating to how the service feels, good practice or recommendations for change, meal choices and access to services; questions were not asked in a specific order, nor were all questions asked of all people. Patients were asked if they would like to speak to us at the

Draft ENTER & VIEW report Overgate Hospice, Elland
Date of visit: 4th October 2018

time of the visit. We noted people's comments as they spoke to us, after getting their consent to do this. In addition, we used the 'five senses' approach to report on the overall impression of Overgate Hospice; this approach considers the atmosphere, smell and appearance of the environment and whether patients seem comfortable in their surroundings. We were not able to speak to all patients as the time of the visit due to patients been too unwell, resting, having their care needs met, uninterested or spending time with their thoughts or visitors.

Why we did this visit

Healthwatch visited the service after being contacted by the hospice who wanted to gather independent feedback from patients and visitors to make sure they were not missing anything that people needed or wanted from the service. They wanted to know if there may be things they could do to help improve patients' experience and the focus for this visit was to observe and gather comments. They also wanted Healthwatch to take a look around and give their own account of the service. We were told that the Healthwatch visit had not been announced to staff before the day so no advance preparation could be planned and the hospice would run as it normally would.

Who we spoke to

Patients had the opportunity to speak to us directly and visitors could either speak to us or fill in a survey about their friend or family member's experience during their stay at the hospice. Staff and volunteers also had access to a survey about working at the service which they were able to do via an online survey or return to us at the time of the visit. We also spoke to some staff members directly.

Overall Impressions

Premises

On entrance to the hospice we noticed that the signage was a little confusing. If approaching from a certain direction it appears to look as if it is a no entry sign on the entrance to the car park; we made this mistake and used the wrong entrance at first. Although there is a large car park it was full at the time of our visit and we didn't notice the signs to indicate the additional ten spaces in the cricket ground carpark across the road. Tracey later informed us that this is indicated on the cricket ground carpark entrance.

The hospice grounds are lovely and really peaceful with a view over the town of Elland. There is a good selection of outdoor seating in the garden and many places to sit and gather thoughts. There are a variety of features in the outdoor

area including plants and herbs. The four bedded units all lead to the garden with wheelchair access. We noticed a patient enjoying the area at the time of our visit.

A smoking shelter is available for patients to use in the garden due to the no smoking policy in the hospice itself. While we were there a visitor informed us *“The grounds are lovely.”* A two room, ‘holistic hub’ sits in the garden, where counselling for patients and visitors take place and people can have time out to reflect. This also has a kitchen facility to use. The hospice has recently invested in providing something called a ‘white noise machine’ for the kitchen area in-between the rooms to block out the noise from each room and give a more confidential area for counselling. This was purchased after gaining feedback from people using the service. We did not visit this area on this occasion and we look forward to knowing how it works out in future.

The greenhouse in the front garden is being used to grow lavender and this is used to create lavender bags. We all really liked the memory tree on the outer wall close to the main entrance with is used to remember loved ones who have stayed in the hospice, there is a small charge to add a name of a loved one to help fund the hospice. There were some interesting pieces of art around the hospice from the wooden picture near reception to the sculpture in the garden portraying clasped hands.

On our arrival in reception, we had a warm welcome by Tracey and senior staff. All guests visiting the hospice are requested to sign in at reception, where there is a hand gel to use for infection control and signs to encourage individuals to use this are placed around the building. This area is also used for selling gifts including Christmas cards and hosts a well-stocked fridge for purchasing sandwiches and snacks for visitors. There are a few spaces available in the hospice to sit and take time out for visitors but two chairs are available here with a coffee machine to purchase drinks. Visitors’ toilets and office spaces are also in this area. There are a few lovely little touches like this around the hospice we noticed. Information encouraging visitors to support with any fundraising events and a notice to say the week commencing 8th October 2018 is “National Hospice week”.

The notice boards in reception and near the nurse station had information of other forthcoming events displayed. Another had information indicating staff on duty and also providing information relating to the staff training that takes place monthly and with the different topics each time - such as:

- Nausea and vomiting
- Breathlessness
- Constipation

The nurses' station notice board looked easy to update as each message had a magnetic strip. Shift changes and staff names were displayed here as 7am, 1pm and 9pm; one of our representatives found it a little confusing to read.

Along the corridors there are two quiet rooms which are used for meetings and for families to use.

After the initial meeting with Tracey we were shown around the hospice and informed by Lucie, the ward sister, of any areas to avoid due to patients been too unwell to visit. The main corridors by the nurses' station and facing the wards are a busy thoroughfare. The passageways are wide and clear. One of our representative felt the signs for toilets in this area were not as clear as they could be. The wide, open entrances to the wards enable staff to observe patients easily. There are two wards with single sex accommodation which are spacious and pleasant areas. In each room there are four beds with TV at the ends of beds for patients if needed; each had personal storage cupboard also. There are large windows at the end of each of the rooms overlooking the garden. The windows are some distance from the beds with a dining table in this area and shared toilet facilities. There are also four single rooms available, which we didn't access on the day but were told these rooms don't have en-suite facilities.

The nurses' station was manned the whole time we were there and had information leaflets for visitors to take. This felt like a friendly area to speak to a staff member if needed. The shared bathroom for patients is situated near the nurses' station and this has an easily accessible bath. This room is a multi-purpose room where laundry is also stored in baskets for washing. We were told this was moved if people want to use the facility. The laundry room for bedding and hospice washing is situated to the left of this area; patients are asked if a family member can take their washing home. For patients who have no family members, their washing is undertaken by staff.

All areas we visited were clean and there were no unpleasant smells or masked smells and there was a pleasant temperature around the hospice. We noticed that internet access is available to use for patients. There were a number of laminated notices regarding the Healthwatch visit on display around the hospice premises.

Health and safety

Infection control is paramount in the hospice with hand gel available in various locations. A notice was displayed in the ward area relating to the infection

control weekly audits, this showed 100% for hand hygiene, equipment and Isolation policy.

We were told during the meeting that on road parking is not encouraged as it obscures the view for cars exiting the premises and there is a school just up the road.

Staff and Volunteers

We were greeted on arrival by a polite and helpful reception team. Nursing staff were identifiable by different coloured uniforms and name badges make them easy to identify. The staff were approachable, friendly and appeared respectful of patients, each other and us, as visitors. A staff member we spoke to told us they were able to take regular breaks and holidays and felt their conditions of work were good. This staff member would have no hesitation in reporting any concerns that they observed when working. The interactions we saw on the day between staff and patients were caring and compassionate and the feedback from patients and visitors reflected this also. Staff were very visible during our visit. One of our representatives spoke to a staff member who said they had worked at the hospice for over twenty years. They explained they were very happy working here. On our visit we witnessed some good interactions by staff such as encouraging and helping a patient in a wheel chair to use the garden area, also a staff member who was cleaning on the ward responded to a patient who remarked how dry her mouth was. The staff member immediately came over and handed her a two handled mug and helped her take a sip of water.

We noticed the nurse call buzzer was attended to immediately. It was nice to see that a staff member chose to come and find a patient who was enjoying the outside area to deliver their timed medication to them. We were told by Tracey they had a trained dementia lead and patient centred care is advocated to support patients' needs and the hospice have their own hospice doctors. In the meeting after our visit we were informed about the portable chairs doctors use during ward rounds to sit at patients' bedsides during these times.

The hospice have around 600 volunteers and their roles are very varied. There are 156 paid staff members across the organisation which includes the hospice shops.

On the notice board for staff there is also a "what would you like to see?" which is an invitation relating to the training section. On the staff and volunteer survey four members said they are offered opportunities for training, two said they aren't.

When staff were asked how the hospice involves patients and carers in their care, they said:

“If carers or family want help we involve them, we ask patients what they like and involve them”

“The hospice give the patient the option of how they would like to be cared for everyday”

“By meeting their needs on all levels”

“Very openly with all discussions re patients given to them also. Carer support groups in day hospice so that the patient’s carer can have access to facilities that are available from the hospice”

“We work to provide true patient centred care, all care plans are individualised and taken from a thorough assessment of the patient’s needs. We involve family and loved ones in all aspects of care and care planning as patient wishes. We actively encourage family to be present if they wish and provide them with the support to accommodate this.”

This is what patients and visitors said about staff and volunteers of the hospice;

Patients

“They (the staff) are marvellous.”

“The staff work with you at your pace.”

“The person who came to bring me here got things off to the right start and it has just carried on from there.”

“They give me a hug when needed”

“They are on the ball”

Visitors

“The staff are sensitive and they ask how I am,”

The image below shows some of the answers that staff and volunteers said on the survey they completed;

Overgate Hospice Staff & Volunteer Survey

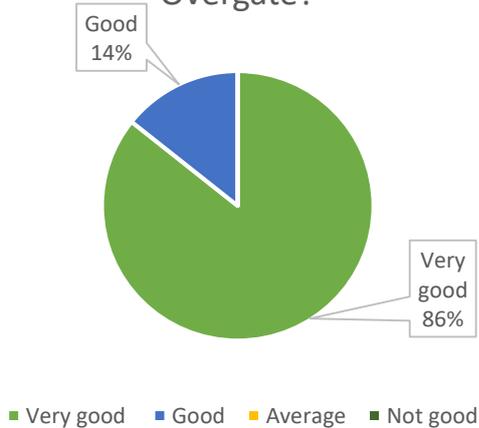
Most things are good, good support.

Four people said they were happy with their work load, three said they were most of the time

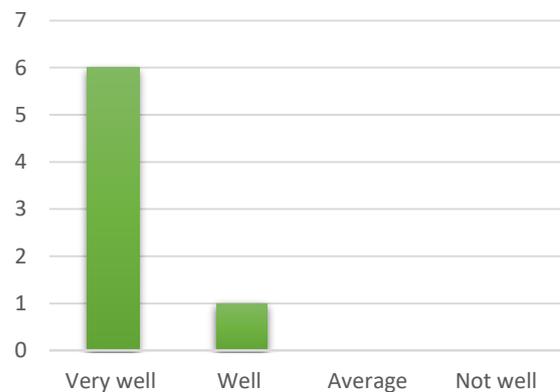
Three of the staff & volunteers said they had enough time with each patient one said most of the time

Staff are lovely, working atmosphere is brilliant, always there for you no matter what supportive, funny, always happy to go the extra mile,

What is it like working at Overgate?



How well are individual needs catered for?



Staff are friendly and no matter what department of the hospice you're welcomed with a smile

All staff & volunteers thought the overall service for patients was very good

A strong caring team with clear focus who wish to provide quality care to our patients.

Five people responding to the survey would be comfortable speaking to a senior member of staff if there were concerns relating to work, two were unsure

Will always help no matter how stupid the question is.

Visitors

There is a visitors' room provided in a quiet location, slightly away from the wards. It has its own bathroom with toilet, washbasin and a shower. There is a TV and CD machine with a small stock of CDs and DVDs. Children's toys are provided, including a dolls' house. There are pictures on walls and a clock and a variety of leaflets on display in this area. We noticed a blind on the door to make it private and "engaged" sign that can be used when families need some time to rest. There is a leaflet provided for visitors which we all had sight of and was available at the nurses' station; this fully explains the overnight options for visitors and sensitively stresses that patients' needs come first. It explains that visitors can be provided with a light breakfast if staying overnight. Speaking to a family member of a patient they said that they and other family members were made welcome when they visited. Children and pets were also made welcome.

There are some comfy chairs near the ward and a coffee table to use. Visitors can make hot drinks as required in the kitchen area. A visitor told us *"It's a very good service - we can visit any time and make drinks."* We were pleased to hear that a visitor thought *"There is nothing I would change"*, *"You couldn't wish for anything better"* We were told that an allocated family member could be kept informed of patient's health, with the patient's permission, they can then pass on information to other family members, although we did feel that other family members were able to ask too if needed.

Patients' comments

"Visitors are made welcome and are looked after - they are offered a cup of tea."

Visitor's comments

"We are all consulted regarding my mum's care - including mum herself."

"It's about her (mum's) needs and she is safe and comfortable here."

"We can ring any time."

How does the service feel?

During our visit the wards and nurses areas were very busy with a lot of different things happening from ward cleaning, ongoing care, supporting relatives to medication rounds. Considering staff were busy with day to day tasks they still were able to stop and listen to patients' requests and tend to their care needs with a friendly smile. The hospice still felt calm. We wanted to get patients' views on how the service felt to them, what's working well at the hospice and anything they felt would work better. Some of the patients chose to speak to us and others were either involved in care needs, sleeping or didn't want to be disturbed. Most of the patients we spoke to said that the service in the hospice was good and all agreed the staff were good. One patient said the atmosphere was of peace and calm and the individual attention by staff has helped them to understand and begin to accept their condition. Another explained, it's not brilliant - it gets very noisy at night-time with a lot of banging about.

When patients were asked if anything would improve the service one said *"Don't think so at all"* and *"I'm treated very well."* Another said *"I can't find any fault with it"* One mentioned *"It can be dreary and I get bored."*

Patients' comments

"Care is above and beyond"

"It's been alright"

"Happy with all of the care"

"I am comfortable here - yes."

"I give this place 10 out of 10."

"I am happy here and peaceful even though I really did not want to come here to begin with."

"I am looked after."

Six of the staff/volunteers completing the survey said they thought the hospice felt safe, one was unsure. Staff felt that the setting and environment were good at the hospice. They explained some of the things they would change are the amount of space they have, one felt that the environment at present decreases their ability to be responsive to admissions, but many mentioned the plans for new developments in place. Some said nothing they would change and one commented *"I love working here"*.

Choice and Dignity

All patients, we were told, have a customised care plan. This includes many things including the patients' likes & dislikes, to gain a better understanding to accommodate needs. There are monthly meetings held for patients and families as a social occasion at the hospice. There is also a monthly carers' meeting and a monthly bereavement support group. We were told by one patient that the hospice was helping them to feel confident to support others by being supported themselves. One patient said *"I feel safer here and my pain is managed"*. The patient went on to tell us that they just press their buzzer if staff are needed, the buzzer is answered immediately. Another patient said they were washed with care and patience and helped with eating. There was a difference in how patients felt about the noise, one person saying there were no noises to disturb sleep but another disagreed, finding it too noisy on the ward. It was lovely to hear that one patient felt that the staff seem to have a wish to make them as happy as possible and that they work with them. A patient mentioned cleanliness, saying their bed was always kept clean. We didn't notice the availability or provision of newspapers and books or ask about the access to telephones for patients. We did notice that the patient leaflet states that mobile phones are permitted, but requested these are switched off or on silent at quiet times.

We witnessed a patient using the outside area and a visitor said it was a nice area to use. One patient said they enjoyed being out in the grounds when they could be taken by staff. The sculpture of the clasped hands in the garden brought the feelings of calm and peacefulness to one patient.

Patients' comments

"I have my own space"

"I smoke and there are no lectures - it is made clear that it is my choice to do as I wish."

"I could go out and I would like to but it's not offered."

"I can have plenty of visitors and I am happy regarding that."

Food

The hospice make everything themselves from fresh produce. There are set times for meals and menus are planned with seasonal produce in mind, but they can be flexible in trying to accommodate patients' requests. Pureed food is provided as needed and coloured plates for patients suffering with dementia and plate guards are available. Meals provided are breakfast, three course lunch and evening meal. Should visitors want to eat during their visit, snacks and sandwiches can be purchased from the fridge in the reception. They can also have a three course lunch, we were told, for £6.00.

In conversation with a staff member, they told us how much they enjoyed their job, spending time with patients so that their favoured foods and drinks could be served. They stressed their policy of offering fresh vegetables and fruit, some of which they grow and store in their freezers. They also make fresh, attractive pastries which are on sale to staff and visitors and the money from these sales helps with fundraising. We were told that at Christmas fourteen extra meals were made for guests and a table was set up to eat for the Christmas meals. *"We are very flexible and adaptable"* said the staff member. Staff also told us that they think it is important that the food is visually pleasing, and we agreed.

A patient we spoke to said that *"Food is very good and that the staff are sensitive when feeding me"* another said *"Sometimes I am dying for a cup of tea but it doesn't come."* We noticed water coolers are available around the building for patients and visitors.

Patients' comments about the food at the hospice;

Patients' comments

"The food is very good quality and well cooked."

"Alright"

"I accept what I am given."

"I never know when the food is coming or what it will be and it's not always very nice when it comes."

"The puddings are very good."

"Sometimes it would be nice to have some cake or a bun with my tea."

"It's not my kind of food - I don't like the soups."

Therapies and support

Patients can access physiotherapy, complementary therapies, and counselling services during their stay. There are two paid staff available to carry out the complementary therapies, who work in the day hospice also. A patient told us about accessing these services and how they had enjoyed having a massage with some essential oils. *“I had an arm and hand massage, I fell asleep. I will have again, lovely!”* Made the patient feel calmer and uplifts their mood. They also said they felt able to have this treatment whenever they wish. Some of the other patients we spoke to didn't express a strong wish to take part in the therapies and other services available. We didn't get chance to talk with the counselling and therapy staff during our visit. Visitors and relatives can access counselling and support services also. One patient said their family member had been offered support but didn't feel they wanted this just now.

Patients' comments:

“The physiotherapist tells me my options and then it's my choice and it's ok even if I choose to do nothing.”

“The therapies have nothing in my line.”

“There is no cure here - just plenty of help.”

General

We were told that the hospice are taking many steps to make the service more accessible to all. There have been education sessions to different community groups as they are eager to support people from all communities. Quality improvement meetings are held regularly to address different aspects relating to the running of the hospice. The hospice has received some Tunstall telecare equipment, funded by Calderdale Clinical Commissioning Group. This supportive medical equipment helps to maintain patient safety. They have a “wish list” of items that are desirable, this can be viewed by donors and forms the basis of grant applications and funding bids. At the moment they have advertising on buses in the local area and with family's permission have a picture of someone who used the hospice.

There is a plan in place for the activity coordinator in the Day Hospice to have more engagement with in-patients from 22nd October 2018 and a bi-monthly

dementia programme in the day hospice commences in 2019. The hospice contact visitors and patients at a later date to ask for feedback; this is called 'Just one more thing' survey.

Here are some comments from staff and volunteers about working at the hospice.

"I am very proud to say I am part of such a wonderful team and organisation"

"I have worked at Overgate for 20 years, seen so many changes, but most have been for the better"

Conclusion

The visit was very relaxed and calm, even though it was a busy environment we were made to feel very welcome.

It was good to hear that the hospice are utilising volunteers' skills to help with roles in the hospice but also understanding that not all volunteers want to stick to the role they are trained for and sometimes they want to be supported to try other things.

It was good to know about the plans to introduce equipment to improve care for patients who suffer from dementia and the expansions that the hospice are hoping will be happening in the near future. The development of more single rooms and space should help greatly as some rooms are multi-purpose due to limited space.

The hospice understands the need to gather feedback but we wondered if a more effective way would be to utilise a volunteer befriender, who may have had involvement previously in the day hospice, so the individuals feel at ease discussing any good practice or issues they may have.

We feel that senior staff and managers seem to be making constant efforts to improve the service offered and keep up with new developments in the hospice and hope that the feedback from our visit will help see the hospice through fresh eyes.

We enjoyed talking to patients, visitors and staff and hope that it didn't feel intrusive when chatting and taking visitors' time away from their loved ones.

The hospice felt very person-centred and it was lovely to see the great staff interactions with patients and visitors and we felt a real sense of care and compassion for all while we were there.

Recommendations

Enter and view Recommendations	Feedback from Manager
<p>We recommend a more effective way to gather feedback from patients would be to provide easy-read anonymous feedback forms in the initial information given to patients and visitors. Feedback boxes could be placed in prominent places around the hospice such as the nurses' desk and reception.</p>	<p>We will introduce feedback forms as part of our admissions procedures.</p> <p>We plan to improve the visibility of our existing feedback boxes.</p>
<p>We recommend that preliminary discussions are had with patients using day hospice services as how best to gather feedback about the hospice.</p> <p>Recruit volunteer befrienders trained in this role.</p>	<p>We will hold some focus groups with day hospice patients on how best to gain user feedback.</p> <p>We will explore the of a volunteer befriender</p>
<p>We recommend you encourage feedback from visitors and patients on an independent, feedback site such as Healthwatch Calderdale website. A widget can be provided for your website</p>	<p>We will provide a link to Healthwatch Calderdale via a widget.</p>
<p>We recommend that the Complaints & Compliments section is easier to access on the hospice website. This could be improved by general re-wording, eg "tell us how we are doing?" Provide an anonymised survey or online form to complete and submit</p>	<p>We will revise our existing wording on the website and provide access to anonymised survey</p>
<p>We recommend that patients are made more aware of the different food and drink options available to them during their stay.</p>	<p>We are planning a catering survey to gain wider feedback on our catering services and will utilize this to help improve patient experiences.</p> <p>This review will include making patients aware of the catering options during their stay.</p>

Update on Recommendations- January 2020

We contacted Overgate Hospice for an update on the recommendations made during Healthwatch Kirklees & Healthwatch Calderdale visit in October 2018. The chart below gives an updated account of this information. Date received 15th January 2020.

Recommendation update Jan 2020	
<p>1. We recommend a more effective way to gather feedback from patients would be to provide easy-read anonymous feedback forms in the initial information given to patients and visitors. Feedback boxes could be placed in prominent places around the hospice such as the nurses' desk and reception.</p>	
Initial Manager feedback October 2018	12 -18 months Manager update Jan 2020
We will introduce feedback forms as part of our admissions procedures. We plan to improve the visibility of our existing feedback boxes	Feedback cards are displayed around the hospice with feedback boxes too. All patients receive a leaflet explaining how they can provide feedback. We have plans to revise the display boards within the IPU to allow feedback information to be displayed. These will be in place by the end of March 2020
<p>2. We recommend that preliminary discussions are had with patients using day hospice services as how best to gather feedback about the hospice. Recruit volunteer befrienders trained in this role.</p>	
Initial Manager feedback October 2018	12 -18 months Manager update Jan 2020
We will hold some focus groups with day hospice patients on how best to gain user feedback. We will explore the of a volunteer befriender	User engagement meetings have been held. A volunteer is in place to gain real-time feedback from service users in the inpatient unit.
<p>3. We recommend you encourage feedback from visitors and patients on an independent, feedback site such as Healthwatch Calderdale website. A widget can be provided for your website</p>	

Initial Manager feedback October 2018	12 -18 months Manager update Jan 2020
We will provide a link to Healthwatch Calderdale via a widget.	A link to Healthwatch is on our website.
4. We recommend that the Complaints & Compliments section is easier to access on the hospice website. This could be improved by general re-wording, eg “tell us how we are doing?” Provide an anonymised survey or online form to complete and submit	
Initial Manager feedback October 2018	12 -18 months Manager update Jan 2020
We will revise our existing wording on the website and provide access to anonymised survey	The section regarding feedback is clear and easy to navigate.
5. We recommend that patients are made more aware of the different food and drink options available to them during their stay.	
Initial Manager feedback October 2018	12 -18 months Manager update Jan 2020
We are planning a catering survey to gain wider feedback on our catering services and will utilize this to help improve patient experiences. This review will include making patients aware of the catering options during their stay.	Catering feedback cards are given to patients to allow them to provide feedback and make suggestions.

Thank you Tracey at Overgate Hospice for providing this update.