

Our ref: IG/FOI/FOI.158.25

5 February 2025

Sent via email to: [REDACTED]

Dear [REDACTED]

Request under the Freedom of Information Act 2000

I write further to your request for information, which was received on 8 January 2025, to confirm, in accordance with S.1(1)(a) of the Freedom of Information Act 2000, that Powys Teaching Health Board (PTHB) does hold the information that you require. For ease of reference your request is set out below and my response follows.

Your Freedom of Information (FOI) Request:

Under the Freedom of Information Act 2000, I kindly request the following information regarding hospice funding and end-of-life care provision within your Health Board for the financial year 2023-2024 (or the most recent complete financial year available):

1. Statutory Funding:

1a. The total amount of statutory funding allocated to hospices within your jurisdiction.

1b. The proportion of statutory funding as a percentage of total hospice expenditure (for each hospice separately, if applicable).

2. Service-Level Agreements (SLAs):

2a. Details of any SLAs or commissioning arrangements between the Health Board and hospices, including the scope of services covered (e.g., inpatient beds, hospice-at-home).

3. Bed Provision:

3a. The total number of dedicated palliative care/hospice beds available within your Health Board area, categorised by inpatient and other types of care (e.g., respite, end-of-life).

3b. The average cost per day of the dedicated palliative care/hospice beds? Including nursing, medical and pharmacy diagnostic costs.

3c. The average cost per day of general acute medical ward beds in a health board hospital, general community hospital bed and specialist palliative care bed.

3d. Any projections or assessments on the adequacy of current bed numbers relative to demand.

4. Funding Formula:

4a. Details of how your Health Board allocates funding to hospices, including whether any specific formulas or population-based methods are applied.

5. Patient Preferences and Outcomes:

5a. Any available data or reports on patient preferences for place of death (e.g., home, hospice, hospital) and how these are factored into service provision.

5b. Outcomes or performance metrics used to evaluate hospice and end-of-life care services.

6. Future Planning:

6a. Plans to address any identified shortfall in hospice funding, capacity, or services.

Powys Response:

Q1a. I can confirm Powys Teaching Health Board (PTHB) does not receive any ring-fenced (statutory funding). This is currently held centrally pending the outcome of the Hospice Commissioning Framework for NHS Wales review.

Q1b. Please see Q1a above.

Q2a. I can confirm PTHB commission services from:

- Severn Hospice
- St David's Foundation Hospice Care
- St Michael's Hospice
- Marie Curie
- Hope House Hospice (children's respite)
- Ty Hafan Hospice (Children's respite)

We also commission services via Swansea Bay University Health Board (SBUHB) for Ty Olwen Hospice for inpatient and consultant input for Southwest Powys which is currently being reviewed.

The scope of services varies depending on what the hospice provides however the scope includes:

Palliative Care:

Hospice Inpatient

Hospice Care at Home (night-time)

Medical – Consultant Advice

Day/Supportive Care

Childrens Services:

Children's respite hospice services of which Ty Hafan Hospice is via a collaborative agreement led by Cardiff & Vale University Health Board (C&V UHB).

Q3a. PTHB are unable to provide this information as we do not commission dedicated beds as part of our hospice agreements and operate on a level of activity to be undertaken. We do have end of life beds in the community hospitals that we directly provide however, patients are not admitted into these under the specialist palliative care team so therefore are not designated specifically as palliative care.

Q3b. PTHB are unable to provide this information as per response to Q3a above. We suggest that you contact the hospices directly to request these figures.

Q3c. Please see the list below for the average cost per day of the dedicated palliative care/hospice beds.

- Average cost (including Mental Health beds) – £661.
- Average cost (non-Mental Health beds) - £630.

Q3d. I can confirm PTHB are currently undertaking some specific work around End of Life Care which will look to inform our plans for future commissioning/provision of end of life/ Hospice beds based on current activity levels.

Q4a. Please see Q3d above. I can confirm this is current work in progress to review and update on the previous historic commissioning/ provision of these services which is generally covered by a rolling annual contract.

Q5a. PTHB undertake the National Audit of Care at the End of Life (NACEL) audit which focuses on end-of-life care in our community hospitals Please Note: this excludes hospice beds. [Patients and Carers – National Audit of Care at the End of Life](#)

Q5b. As per Q5a above, PTHB undertakes a NACEL audit. PTHB also include the following Key Performance Indicators (KPI) in our commissioning arrangements with hospices. Please see the third sector KPI table below.

Third Sector KPI	Suggested Evidence Source
<ul style="list-style-type: none">• % of service users who are able to realise their potential and have a better quality of life.• % of service users who reported their confidence to deal positively with changed life circumstances.• % of services users who reported they felt valued.• % of service users who felt they were in control and independent.• % of service users who required additional support to safeguard their rights.• % of service users who reported that the service helped them to live the life they want to live to the best of their ability.	<ul style="list-style-type: none">• Service user survey feedback.• Service user outcomes/ goal plans.• Compliments and complaints.• Case Study.

<ul style="list-style-type: none"> • % of services provided which will reduce the need for onward statutory support for service user. • % of service users who confirmed that they were supported with dignity and respect. • % of service users who were able to improve or maintain their functioning and day to day living skills. 	<ul style="list-style-type: none"> • Service user survey feedback. • Service user outcomes/ goal plans. • Compliments and complaints. • Performance data sets.
<ul style="list-style-type: none"> • % of service users who report their needs have been met the first time (2 elements). • Average response time to a service user query or issue. • Average time taken by the service to process the referral/ a service user assessment and commencing the actual service. • % of staff (including volunteers) who participated in person centred and value based training. • % of staff (including volunteers) who feel engaged with the work they do and feel supported to continuously improve the service. • % of staff (including volunteers) who could demonstrate competency and confidence in delivering the service. 	<ul style="list-style-type: none"> • Service user survey feedback. • Service user outcomes/ goal plans. • Compliments and complaints. • Case Study.

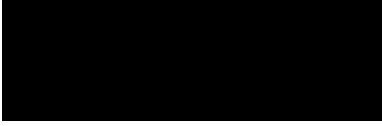
Q6a. PTHB is currently undertaking a transformational programme to agree our future commissioning strategy reviewing both our directly provided services and the services we commission to ensure safe, effective care is provided in the right place at the right time for our population and is affordable and sustainable. This will continue to evolve due to the nature of healthcare and we are working actively with our commissioned providers to ensure their voice and expertise is factored into our future decisions.

We are also actively engaged in the NHS Wales Executive (NHSWE) National Palliative and End of Life Care Programme to help inform our future commissioning intentions which is looking to develop a comprehensive and equitable Hospice Commissioning Framework for NHS Wales. We are currently at the stage of reviewing options for approaching this.

Under the terms of the Health Board's Freedom of Information procedure, individuals seeking access to recorded information held by the Health Board are entitled to request an internal review of the handling of their requests. If you would like to complain about the Health Board's handling of your request, please contact us directly at the address below or register your complaint via Powys.FOI@wales.nhs.uk

If after Internal Review you remain dissatisfied you are also entitled to refer the matter to the information commissioner at the Information Commissioner's Office (Wales), 2nd Floor, Churchill House, Churchill Way, Cardiff, CF10 2HH. Telephone Number: 0330 414 6421.

Yours sincerely



Hywel Pullen
Deputy Director of Finance



Chris Moss
Assistant Director of Performance and Commissioning

Rydym yn croesawu derbyn gohebiaeth yng Nghymraeg. Byddwn yn ateb y fath ohebiaeth yng Nghymraeg ac ni fydd hyn yn arwain at oedi.

We welcome receiving correspondence in Welsh. We will reply to such correspondence in Welsh and this will not lead to a delay.