Compassion.. Jason, below right, and mum Susan. Below, son and mother



'I can't put a price on Mum's peaceful last three weeks'

Bv Hanna Geissler

JASON Newbiggin will be forever grateful for the compassionate care his mother Susan received from a hospice as she was dying of skin cancer. She had been diagnosed with

squamous cell carcinoma which left her in awful pain.

The family cared for her at home for as long as possible but when things became too much Rowans Hospice in Portsmouth offered respite care and later took her in full-time.

Susan was given a room where she could watch through a window birds feeding and squirrels playing.

Jason, 52, said: "It took her mind off of what was going on.

The hospice allowed us to stay as well so we took turns staying overnight with her.

"I was here at the end and I don't think I could have asked for it to be any more peaceful.

'That will always stay with me because it was a very caring, compassionate and dignified ending."

Susan, whose hospice care was funded by the NHS, died aged 56 in 2007.

Rowans Hospice is now facing a significant shortfall between what it is paying out in costs and the income it is receiving.

It has been forced to cut back some



Respite care...Rowan's Hospice Portsmouth

services and make staff redundant. Jason said: "It is an absolute crying shame to see hospices having to scale back their services and lose staff.

"Rowans Hospice provided us with really important moments - my family and I cannot put a price on what is meant to her or us for those two or three weeks."

Deborah Paris, executive chairman of Rowans Hospice, said: "These are heart-breaking decisions to have made, but we have no other choice but to take

"Like many other hospices across the country, who are facing financial challenges, we are simply asking for a fairer and more equitable funding system to stop the postcode lottery that exists for end-of-life care.'

already over-stretched. This means essential end of life care that could be provided by hospices is provided through the NHS at a greater cost to the public purse, not to mention with the risk of people missing out on the compassionate, personcentred end of life care.

Hospices need to be supported so people can get the care they need when dying.

We see a back and forth between NHS England and local Integrated Care Boards - the bodies that plan and fund services locally - over what funding is available and who can take action. While both blame the

other, hospice services are being cut. An immediate priority of the Labour Government must be to understand the scale of the challenge facing the

hospice sector. In their manifesto, Labour rightly made health and social care a priority, with a focus on reducing pressures in the NHS and on improving care in local neighbourhoods. Hospices are ideally placed to help, and stand ready to, with the right support.

Timing is critical for hospices, and we need to see swift action to avoid further cuts. We only have one chance to get it right at the end of someone's life.

that suffocating financial pressures year. Most facilities providing endhad forced it to slash inpatient beds and cut the equivalent of 45 fulltime roles – 14% of its workforce.

It was forced to act because of "unsustainable rising costs" and an

of-life care are operating in the red and look set to follow suit in a crisis which experts said would flood no more, or reduced levels,

Toby Porter, chief executive of Crusade...hospice estimated £2.4m deficit budget this Hospice UK, said: "We've recently boss Simon Fuller

the sector in 20 years with hospices facing a collective deficit of £77m. I really worry that what we are seeing in Birmingham will repeat itself across the country with, as ever, the most deprived areas hit the hardest.

"We think around one-fifth of hospices are already making cuts, and with the level of deficits in the sector, this will only go up. This situation can't go on.

Hospices are almost exclusively charities relying on voluntary income to continue services.

Some 200 facilities across Britain, collectively caring for 300,000 adults and children, have to fundraise 80% of their income from local communities - but sadly the reservoir of goodwill is

Two-thirds are receiving

seen the worst financial results for of taxpayer-funded support. The average adult hospice in England gets 32% of its funding from health budgets while children's hospices

funding, distributed via local integrated care boards.

But ICBs, which only replaced Care Commissioning Groups in 2022, are not yet ready to take on full responsibility for funding.

Without a rapid cash injection, services such as symptom control, short breaks and end-of-life care could be at risk, leaving families who are struggling even more exhausted.

Simon Fuller, chief executive of Birmingham Hospice, said: "The prospect of having to make highly skilled specialist clinicians and support staff redundant is totally unpalatable.

"We are doing everything we can

hospice colleagues. There is a growing need for palliative and end-oflife care and the NHS is unable to meet the huge demands on its beds.

"Most people do not want to die Hospice leaders have contacted in hospitals, and hospices provide the NHS to negotiate additional outstanding services that support people to die in a place of their choosing."

Corin Dalby, boss of community interest company Box Power, which is supporting the drive, said: "There are hundreds of millions in annual FCA fines which go into the Government pot. There is no better way to complete the circle by allocating these funds to hospices.'

The Department of Health and Social Care said: "We want à society where every person, their fami-lies, and carers, receive high quality, compassionate care, from diagnosis through to end of life.

"The Government is going to shift the focus of healthcare out of the hospital and into the community. We recognise that the care system, including hospices, will play a to support all our vital role in doing this."