

Rowcroft Hospice Quality Account 2023–24



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“We can't thank Rowcroft enough for the care they gave at the end. I hope that our donation will help you to look after others who also find themselves at the end of their lives.”

Chief Executive's introduction



As we reflect on the past year and present this Quality Account, I am filled with immense pride and gratitude. Despite the significant challenges of a persistent cost of living crisis and staffing shortages, our resilience and dedication have ensured that we continue to deliver the highest standards of care to our community.

This past year, we have not only sustained but enhanced our service delivery through the implementation of several strategic initiatives. The launch of the RISE programme to successfully integrate the new CQC framework; and implementation of the Patient Safety Incident Response Framework (PSIRF) to continuously improve our patient safety culture, have been pivotal, ensuring that our operations adapt and align with the highest standards of care and regulatory compliance. Our commitment to these initiatives reflects our collective spirit and dedication to excellence.

We also introduced innovative changes in our Inpatient Unit, improved our electronic care plans, and expanded our community outreach through the homelessness project – each step further strengthening our ability to provide compassionate and tailored care to those in need.

The feedback from our patients and their families continues to be extraordinarily positive, a testament to our professionalism and empathy. As we navigate these complex times, our efforts have not only met but exceeded expectations, embodying the spirit of Rowcroft in every action.

Looking ahead, we are excited about the future. With plans to enhance our digital capabilities, expand our educational outreach, and continue our research and quality improvement efforts, we are setting the scene for another year of impeccable care and innovation.

Thank you once again to all our teams for their hard work, passion, and unwavering commitment. It is an honour to lead such an exceptional team, and I look forward to building on our successes in the coming year.

Mark Hawkins

CEO, Rowcroft Hospice



About Rowcroft Hospice

“Our vision is to make every day the best possible day for patients, and those closest to them, living with life-limiting illnesses in South Devon.”

Rowcroft Hospice is an independent charity dedicated to providing specialist care and unwavering support to individuals facing life-limiting illnesses.

Our team of specialists in our Inpatient Unit (IPU) and in our Community and Hospice at Home Teams including doctors, nurses, occupational therapists, social workers, physiotherapists, complementary therapists, bereavement counsellors, a spiritual care specialist, and a music therapist, plus a range of support staff, work tirelessly for thousands of patients and their families every year.

We are also very fortunate to have a wonderful team of volunteers. Whether they're helping out on our reception desk, supporting the IPU as a ward attendant or hospitality volunteer, organising or volunteering at a fundraising event, working in our shops or cafés, or passing you a hot cup of tea, these volunteers make a real difference to the hospice and our patients.

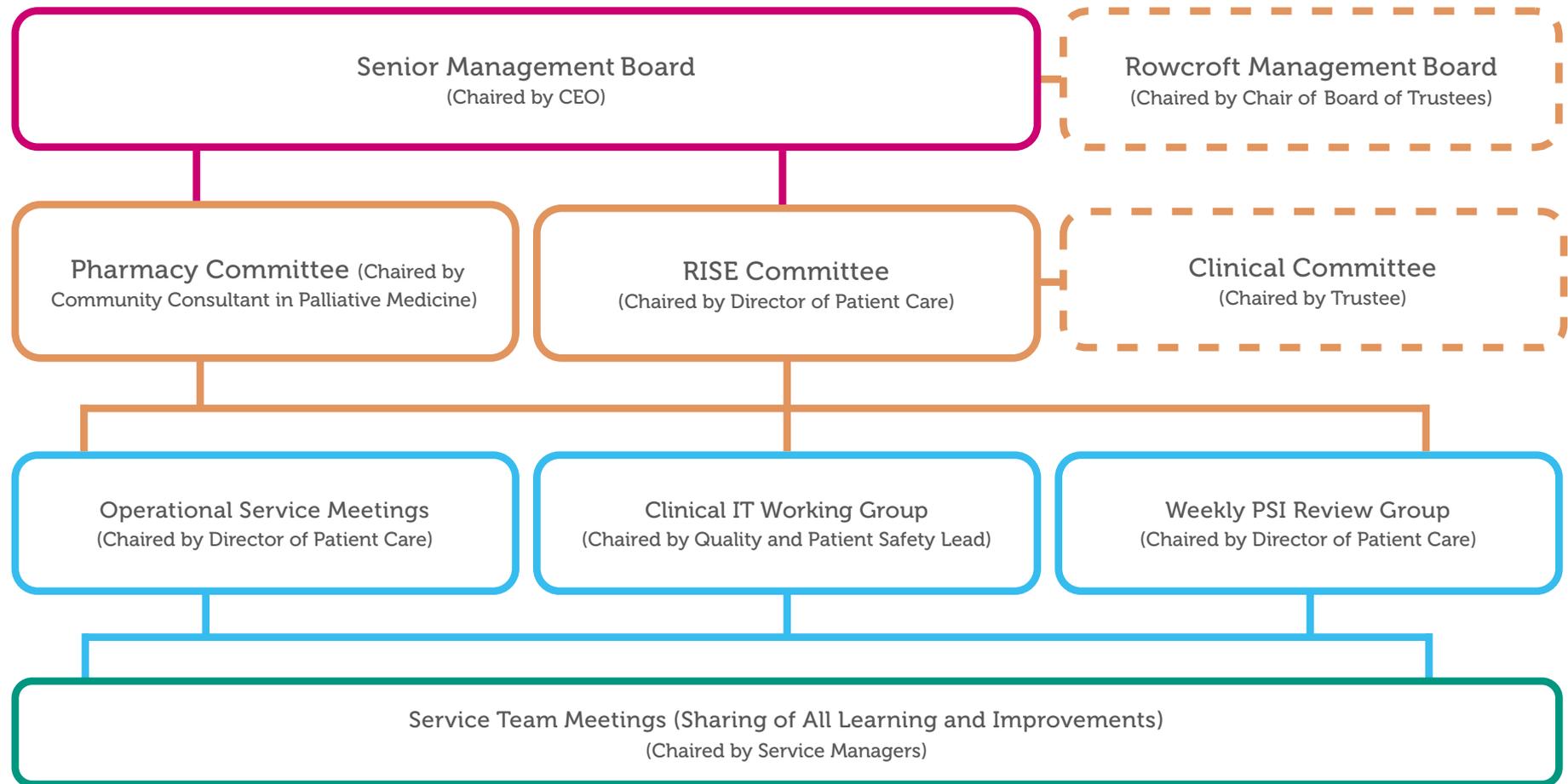
During the past year, we supported patients in South Devon, with 65% being located in Torbay, and also patients who were referred to us from out of the area.

Rowcroft Hospice is required to register with the Care Quality Commission (CQC). It is currently registered under the following category: Treatment of disease, disorder and injury and adults under and over 65 years.

Our last CQC assessment was in October 2021. We achieved 'Good' in all categories and 'Good' overall. The report is available at: <http://www.cqc.org.uk/location/1-106245011>. We have now embedded the new CQC Single Assessment Framework across the organisation, and welcome further assessments as they occur.

Our clinical governance structure

Clinical governance is overseen by the Director of Patient Care who is the CQC Registered Manager



Introduction from our Director of Patient Care

As Director of Patient Care, I'm incredibly proud to introduce Rowcroft Hospice's Quality Account for 2023–2024. This past year has been one of both challenge and remarkable achievement. We've navigated a period of significant staff vacancies, yet our dedicated teams have risen to the occasion with unwavering commitment.

This year also saw the exciting development of RISE (Reflect, Innovate, Suggest and Engage), and the successful implementation of the new CQC framework. We started a new innovative Inpatient Unit shift pattern, launched a vital project to support those experiencing homelessness, and hosted a highly successful neurological open day.

Furthermore, I'm delighted to share our continued progression of our sponsored student nurses and trainee nurse associates, further strengthening our clinical expertise. This year brings the exciting news of our first sponsored student nurse successfully qualifying and joining our Inpatient Unit Team. We're thrilled to see them continue their journey with Rowcroft.



Additionally, we've successfully transitioned Inpatient Unit care plans to an electronic format, streamlining processes and ensuring continuity of care.

It's also important to acknowledge the exceptional educational events we've delivered this year. The impact of our education on the health and care community has such a massive impact on patient care in this locality.

The positive feedback we've received from patients and families is a testament to the dedication and skill of our clinical teams.

Looking ahead, we remain committed to providing the highest quality care for our patients and their families. This Quality Account details the many ways we've achieved this over the past year and outlines our exciting plans for the future.

We've also witnessed a growing number of non-medical prescribers across both our community and Hospice at Home services. This expanded expertise allows us to provide an even wider range of care options for our patients.

I encourage you to delve deeper into this report and discover the stories of resilience, innovation, and compassionate care that define Rowcroft Hospice.

Vicky Bartlett

Director of Patient Care
CQC Registered Manager
Accountable Officer for Controlled Drugs



Our review of last year (2023–2024)

“My loved one had the best care from your team and us as a family felt very supported from yourselves. We thank you for the care you gave us, as a family. Thank you for staying twice overnight to care for my loved one. The team were absolutely fantastic and very caring towards us as a family.”

Overview

During the past year, we have faced challenges centred around staffing shortages due to a high percentage of registered nurse vacancies. This is due to career progression, retirements and general turnover, but being faced with the national and international shortages of registered nurses has meant that recruitment has been much harder than in previous years.

We are so proud of how our teams continue to support each other, working across teams where possible to ensure we maintain our care and support to our patients and their families.

Over the last year we have seen a continued overall decrease in Patient Safety Incidents (PSIs), taken in the context of increased admissions to the IPU. Our clinical teams have worked devotedly to ensure the services were maintained despite a lower number of staff, and their resilience and creativity has shone throughout this period.

The teams are working hard to introduce ways of being increasingly cost efficient, routinely looking at new ideas to do things in a more efficient way, including being mindful when ordering supplies and making journeys only when necessary.

“Extremely attentive staff. Nothing was too much to ask for. Always kind and friendly. Active and genuine listening. Amazing at accommodating my food needs and all food has been delicious.”

Our IPU (Inpatient Unit)

We are delighted to share that we recruited our first international nurse in March 2024, and welcomed our second nurse at the end of April 2024. This has been a great experience and a lot of learning. I truly feel this shows our dedication to patient care.

During the past year, following a full consultation, the team in the IPU have implemented a new shift pattern for staff which has brought us more in line with other local healthcare providers. This has allowed us to be more attractive to potential new staff and also has benefited our existing staff with an improved working pattern.

There have also been improvements made to our electronic rota system, Staff Care, and there are ongoing plans to use the technology of the system to help fill bank shifts which will ensure efficiency of this process.

We are pleased to share that during the past year, we have purchased new High Low Beds in the IPU. These beds are fully height-adjustable, and able to be moved up and down to support patients to get out of bed without a high risk of falling. In addition, we have implemented new colour codes for patient wristbands and walking aids to easily identify those at risk of falling, and replaced our floor falls mats with new sensors which are placed on chairs and beds. These new sensors trigger an

alarm when a patient attempts to stand from a chair or a bed, alerting our teams to patient movement sooner.

Our care plans in the IPU were reviewed and transferred to our medical records system, SystmOne, to enable care plans to be completed electronically, and we introduced new laptops for this to be possible at the patient’s bedside. The benefit to using electronic care plans means important information is accessible to all healthcare professionals when they need this to support all of our patients’ needs. The documentation by the healthcare assistants has also been added to SystmOne so that all the patient information is streamlined and recorded in one place. As part of this, we have also incorporated the use of the nationally recognised aSSKINg (assess risk; skin assessment and skin care; surface; keep moving; incontinence and moisture; nutrition and hydration; and giving information or getting help) bundle which is an evidence-based set of interventions.

We have also fully implemented the use of PURPOSE-T (Pressure Ulcer Risk Primary or Secondary Evaluation Tool), a new pressure ulcer risk assessment framework to identify those patients at risk of pressure ulcer development from admission into the IPU.



Our Hospice at Home Team

It has been a busy year for our Hospice at Home service. The team have seen an increase in the complexity of patients, notably with patients having more than one condition, and carers, on occasion, having medical conditions that the team have also supported.

The team have developed and introduced a new complexity tool, used to gauge the complexity of the patients and determine the level of support needed from the team. There are plans in place to review this tool to make changes, ensuring it is reflective of the work the team are doing.

The team have developed a new Hospice at Home Referral Criteria Leaflet for Healthcare Professionals to increase awareness of the service and to extend the reach further to support more patients.

“The level of care provided by Rowcroft and the Hospice at Home Team was nothing short of extraordinary. They wrapped their arms around us and really felt that caring was paramount.”

“Thank you for making him feel comfortable during his last 36 hours of life.”



Our Community Team

The Community Team have continued to see a high number of patients over the last year, and they have continued to work on the non-cancer conditions. These include a homelessness project focusing upon the unmet needs of those who are at the end of life with housing challenges or accessing hostel or temporary houses. The team have continued their good work in heart failure, working in collaboration with the local NHS specialist services. Another new focus has been neurological conditions, and the team hosted an open day for patients and health care professionals. The ongoing collaborative work in motor neurone disease with the NHS and hosting the MND Association support group also remains.

The Physiotherapy and Occupational Therapy Team have continued to work across settings and have created several opportunities for patients and their families to make special trips such as beach visits etc.

We have further embraced our spiritual care support, led by our Spiritual Care Specialist (in our IPU and in the Community Teams), supported by a number of specialist volunteers, who continue to engage with our local community's faith and belief groups and celebrate special, meaningful dates.

Our Complementary Therapy Team are now offering relaxation groups to patients and carers on site at Rowcroft including: guided relaxations; mindful movement; techniques and resources which can be used at home; and time to talk and share. They took part in a rare neurological conditions information day to further extend their reach, and they aim to offer complementary therapy sessions to this patient group. We are fortunate and thankful to our team who are able to also offer sessions in massage, aromatherapy, reflexology and reiki to our staff when they are possible.

“Thank you so much for all your care and kindness that you showed to our mum during this difficult year. We really appreciated all the support that you gave to her when you visited her at home. It was always reassuring to know that you were there and help and advise us. We will always remember your gentle and kind-hearted ways that gave us all more strength to help our mum during this time.”





Bereavement and Listening and Support Service

The Space for Nature spring events programme became a Bereaved Relatives Group that meets weekly throughout the year and includes a range of new reflective and creative activities. A second Space for Nature Bereaved Relatives Group has been set up after the success of the first. This group is full with 12 people having signed up. A new therapeutic Bereaved Relatives Group has also started with an 8-week programme of activities and will run 3 times a year, and there are plans for group members to share their craft skills as leading activities for the groups.

We are pleased to share that the Listening and Support Service re-opened to provide support to those with life-limiting conditions.

The team have new trainee counsellors on board who are seeing more complex clients, and there are an additional 10 new volunteer listeners from last year's courses. Volunteers have also received further training to improve understanding and best practice in data governance, safeguarding, and

how to support people with conditions including autism, learning difficulties and dementia.

New guidance materials have been distributed to the wider hospice teams to improve understanding of the service's work and how to refer, and a range of articles and blogs have been released to highlight the service and expand their reach with plans to continue this during the next year.

We are delighted to share the team have plans to train new volunteers on the next updated Bereavement and Listening and Support Service course, with a second session to run in the autumn.

“Gave caring, professional, and quick responses. Helped with difficult decisions and broaching family differences in pain relief.”



Our year in numbers



367 patients were referred to our Inpatient Unit



255 patients were admitted to our Inpatient Unit



552 patients were referred to our Hospice at Home Team



1521 patients were referred to our Community Services Teams

2509 referrals were made to our Community Services Team within the Community Multidisciplinary Team

35,698 individual face-to-face and telephone contacts were made by our Community and Hospice at Home Teams

161

referrals were made to our Bereavement Support Service

180

referrals were made to our Social Work Team

409

referrals were made to our Physiotherapy and Occupational Therapy Support Service

369

people benefited from Art*, Music and Complementary Therapy Services.

"We can't thank Rowcroft enough for the care and support and dignity that every member of Rowcroft not only showed our mum, but us (daughters). All questions were answered with honesty and with care and compassion. The relationships built up between Rowcroft and our family have helped with our healing process, knowing that between us all we did an amazing job giving our mum the very best end to her amazing life and letting her have her wish to spend her last days at home. Thank you so much for everything you did and continue to do; we will forever be grateful."

*Art referrals were part of a trial pilot with a volunteer

Rowcroft's RISE – it starts with us

In July 2023, we implemented a new initiative called Rowcroft's RISE (Reflect, Innovate, Suggest and Engage). The purpose of RISE is to further embed the CQC Single Assessment Framework, regulations and compliance within our organisation, supporting and engaging with our staff and volunteers to give them the tools to support the role they play in our compliance with the CQC framework.

RISE is about encouraging our teams to **REFLECT** on everyone's experiences, come up with **INNOVATIVE** new ideas, **SUGGEST** ways to improve our services, and **ENGAGE** with those people that bring our services together – our staff, volunteers, patients, families and key stakeholders.

So far we have embedded RISE in our teams via team meetings, added it to our agendas to make sure we are sharing and learning from each other as much as possible and that we know all of the changes, improvements and innovations in our teams when they are happening.

We rolled out our RISE compliance module on our data management system, Vantage, to Rowcroft's Senior Management Team, to share our self-assessment with those that lead our organisation and ensure this is a collaborative process.

RISE has also been added to our welcome days, we are developing RISE champions in our teams and we are planning mock inspections with the support of our trustees.

We are so proud of how engaged our teams have been with RISE and how this has now been incorporated into our working lives.



As part of RISE, we did a survey for our staff to hear what working at Rowcroft means to them:

" I am proud to be part of a team who work hard to support palliative patients (and their families) in having the best possible care. Everyone treats patients as individuals with their own needs (rather than just a name on a caseload). Colleagues are very supportive towards each other as well as their patients."

"I love working in such a friendly and caring environment. I like to know that I am making a difference not only in my workplace but also in my community."

"Being able to do my job in a supportive, respectful and safe environment. I feel confident that I can focus on patient-facing work, which is my job, knowing that strategically, there are people working to raise funds, develop the future hospice, raise the hospice profile and so much more."

" I love working for Rowcroft and being a part of an incredible team of people, all with shared values. I feel valued, appreciated, and respected by my colleagues and the organisation endeavours to be supportive, progressive and inclusive. I am immensely proud of the care and service we provide to so many people in the local community and to be a part of the team here."

"Working at Rowcroft has a heavy meaning for me, knowing that palliative care has always sparked an interest in me, then after losing a very close family member I was able to give something back to my local community, whilst doing a job I love, in memory of someone I love."

"Having had Rowcroft's support on numerous occasions for both family and friends, I feel it is an honour to be able to work for them and contribute to the very special cause. It's a real leveller, especially on the toughest of days, remembering what we are doing it for!"

Our progress – priorities 2023–2024

SAFE

By safe, we mean that people are protected from abuse and avoidable harm.

Exploring and trialling a lone worker device

We are pleased to say that we have now implemented a new lone work app, Peoplesafe, which has been installed on the new smartphones and is being rolled out within our Community and Hospice at Home Teams.

The Peoplesafe app responds to alerts and can locate an individual via GPS locations in the event of an emergency.

Development of Hospice at Home specific competencies for SHCAs

We are pleased to share that the competencies for Hospice at Home SHCAs have been fully developed and we are in the process of adding these onto the Hive, our staff training website. Training on these competencies has also been underway and continues.

Patient Safety Incident Response Framework (PSIRF)

We are happy to report that we have fully implemented PSIRF (NHS England's new Patient Safety Incident Response Framework). A detailed update is included in this report.

“I cannot fully express my feelings of gratitude to you all for the care and support you gave to my loved one over the last few days of his life. I am overwhelmed by the devoted nursing to have when needed.”

EFFECTIVE

By effective, we mean that people's care, treatment and support achieve good outcomes, promote a good quality of life and is evidence-based where possible.

Electronic prescribing within the Community and Hospice at Home Teams

We are pleased to report that we fully implemented electronic prescribing (EPS) within SystmOne, our medical records system, and this is working well in our Community and Hospice at Home Teams.

Work is ongoing to look at prescribing injectable medications within our Community Teams, as at present this is not possible. We will continue to monitor this with the hope that this might be resolved later in the year.

Implementation of the new IPU care model

The new IPU care model was implemented and has been reviewed throughout the past year. Due to the implementation of the new CQC single assessment framework at the end of 2023 and our plans for future development of all buildings on site, work relating to the previous IPU care model plans has been superseded by the IPU cultural review and subsequent actions.

Hospice referral criteria leaflet

A new Hospice at Home leaflet has been produced for healthcare professionals and there are plans to develop a poster.

The purpose of this is to increase awareness of the service to increase referrals and extend our reach to support more patients. We have focused on GP surgeries, community nursing bases and more recently care homes, and have already noticed an increase in our referrals.

Fully implement competencies in the IPU

Clinical competencies for registered nurses and HCAs are now in place in the IPU. Team members are able to work through these, and specific training sessions have been coordinated. This is ongoing as new staff members join the team and commence the clinical competences completion. In addition, to remain evidence-based the clinical competencies are updated as required.

Research involvement

Across the clinical teams there has been involvement in research projects including hosting the research focus groups for end of life led by the University of Plymouth. The teams also access the South West palliative care journal groups.

RESPONSIVE

By responsive, we mean that services are organised so that they meet people's needs.

Community services five-year strategy

We are proud to report that our five-year strategy for our community services was approved in 2023, and significant progress has been made during the past six months. The team has been actively engaged in events including the rare neurological conditions open day, Complementary Therapy Team relaxation groups for patients and carers, and there has been increasing involvement in heart failure, GSF (Gold Standard Framework) and palliative care-related meetings with GPs and other organisations, to further provide joined up care for people in their final year of life, with any condition, in any setting, at any time.

The Community Team's commitment to caring for individuals with complex needs remains unwavering and is evidenced by involvement in initiatives such as the homelessness project, facilitating advanced communication with healthcare professionals from external organisations, and active participation in MND MDT meetings.

A CNS (Clinical Nurse Specialist) triage position was established to oversee the referral management process. This role is under ongoing evaluation to optimise the system's effectiveness and reliability.

The Community Team have enhanced the technology infrastructure by upgrading to smartphones, enabling easier access to emails while working remotely. This improvement facilitates direct communication with GPs, allowing for quicker responses even while attending to patients.

In addition, the team are continuing to:

- incorporate student placements and facilitating assessor training for existing team members
- foster close collaboration within the team to ensure coverage among team members, with a preference for the same individual to follow up or review cases for consistency
- train Nurse Medical Prescribers (NMPs) to expand this capability within the team and enable timely medication prescriptions following phone assessments, enhancing the ability to provide rapid responses to medication needs
- enhance volunteer engagement efforts, actively seeking new volunteers for the Complementary Therapy Team. We have welcomed two new trainee bereavement counsellors who are now providing support to more complex clients. This is alongside the addition of new volunteer listeners. Furthermore, a full bereavement training course is scheduled which will further strengthen our volunteer base.

- provide continuous learning opportunities. Our team has access to a range of resources including webinars, in-house training sessions, and the HIVE platform. Additionally, we are facilitating a full training course with 12 candidates scheduled to attend, enhancing the skills and expertise within our team.
- enhance career development opportunities within our team through mentorship and buddying programmes, fostering professional growth and support among team members
- actively support staff members working across clinical teams to develop skills that enhance their career prospects, both within and outside the organisation. This includes providing opportunities for cross-training, mentorship, and access to professional development resources.

The community strategy continues, and progress remains a priority for next year.

Support for trainee nurse associates (TNAs)

We are pleased to report that we have been able to support two trainee nurse associates (TNAs) within our Hospice at Home Team. One TNA is due to qualify in September and has progressed really well through her course. She is looking forward to returning to the Hospice at Home Team as a registered nurse. Our other TNA started their course in September and is enjoying it. She scored an incredible 100% on one of her assignments which is outstanding.

Support to homeless groups within the local community

In June 2023, a project, led by one of our clinical nurse specialists, began to seek to further enhance our support to those who have advanced, progressive and life-limiting illness and who are homeless or vulnerably housed. This project was

supported by funding received from Hospice UK. The project's primary objectives were to enable access to hospice services, facilitate advanced care planning, and offer emotional and practical support to those in need.

The project has involved collaboration with several local hostels, shelters, outreach organisations and other healthcare providers to ensure a holistic approach. We are pleased to report that this project is going well and continues through to December 2024. Our Community Team will continue to engage and promote the service to these groups on an ongoing basis.



CARING

By caring, we mean that staff involve and treat people with compassion, kindness, dignity and respect.

Implement digital care plans for patients

We are happy to report that the project undertaken during 2023 to transfer paper care plans to SystemOne (our Electronic Patient Records system) was successfully completed for our IPU, Hospice at Home, and updates were made to the Community Team's clinical windows.

Work is underway to transfer new risk assessments (for pressure ulcer reporting) from the new paper risk assessments to SystemOne so they can be completed electronically. The new electronic forms are set to be used from April 2024. It is recognised that some paper may exist temporarily where new initiatives are being trialled, but we are committed to ensuring that these are transferred to SystemOne as soon as possible.



WELL-LED

By well-led, we mean that the leadership, management, and governance of the organisation assures the delivery of high-quality person-centered care, supports learning and innovation, and promotes an open and fair culture.

Implementation of our new RISE (Reflect, Innovate, Suggest, Engage) initiative to embed the new Care Quality Commission's Single Assessment Framework.

As mentioned previously in this report, Rowcroft's RISE has been fully shared with our teams, and plans continue to make this part of our daily working lives.

GROW (Grow Reality Options Will)

We are pleased to share that we now have a number of GROW champions in place in the organisation, and there are plans to further strengthen this work in the coming year.



Education

We are delighted to report on our continued offer and commitment to share expertise about palliative and end-of-life care via our Education Service.

Our Education Service's ambition is to contribute to the care and support of people by enhancing the skills, competence, and confidence of a wide range of health and social care professionals who care for patients, families, and each other. Over the duration of Rowcroft's previous strategic plan we taught almost 5000 learners via our education programme alone.

73

learning events
were delivered

928

learners attended
the learning events

We are proud of our successes and have strengthened our reputation as a quality provider.

The team saw a 52% rise in care home attendances at our learning events, and a 59% increase on skilled non-registered workforce attendances. NHS learners have reduced by 33%, potentially due to an increase in clinical demands, however there was an increase in the numbers of students, assistant practitioners and pharmacists attending our programmes, including a 40% rise in Rowcroft staff attendances.

The new Education Programme for 2024–25 has been launched and the team remain committed to offering education both online and face-to-face and we are keen to support the building of our community beacon.

“The Rowcroft training sessions have proved invaluable time and time again. We have used the information gained to help improve the service we provide to our clients and make it more holistic; and we know where to signpost them for more information and support.”

“As a student, I have very little experience of palliative care. It was really helpful to understand that in our roles we are often providing spiritual care without realising it. In my career to date, we have often spoken about the difference between empathy and sympathy, but today's training was the clearest way I have had it explained so thank you. Having some real practical tools to help with sometimes difficult conversations around spiritual care is something I will remember.”



Research, quality improvement and innovation

Over the year we have continued to participate in the national journal clubs. We have also played a key role in a research project by the University of Plymouth, hosting some research focus groups looking at the priorities for research.

No further national minimum data sets have been produced for hospice care; however, we respond to surveys from Hospice UK (a national membership body of hospices across the UK) in relation to services provided and activity undertaken.

We have worked hard in the past year to map quality improvements in our clinical teams alongside patient safety incidents so we can continuously review changes that we make, continue and celebrate what we do well and change those processes that are not working as well.

PURPOSE-T risk assessments for pressure ulcers

Our teams have worked hard during the past few months to fully implement the use of PURPOSE-T (Pressure Ulcer Risk Primary or Secondary Evaluation Tool, developed by Leeds University) in the IPU and within our Community and Hospice at Home Teams. PURPOSE-T is a colour-coded risk assessment tool to support pressure ulcer screening stages for all patients to target assessment towards those in need. It incorporates a full assessment stage to be completed for those potentially at risk of developing pressure ulcers, helping decision pathways to be undertaken for all patients and to make a clear distinction between patients with an existing pressure ulcer(s) (or scarring

from previous ulcers) who require secondary prevention and treatment and those at risk who require primary prevention.

PURPOSE-T has been built into SystmOne for completion electronically within our patient's healthcare records.

Clinical IT

We have further strengthened our commitment to improving our use of technology within the clinical services, and during the past year we implemented new electronic care plans within our IPU and Hospice at Home Teams, enabling at the bedside completion of records with new laptops also being in place in the IPU.

Plans continue for us to further develop SystmOne and introduce quality checks of our data.

New Smartphones were rolled out within our Community and Hospice at Home Teams, which include the addition of a new lone worker app, to ensure that those teams working out in our community are safe and able to access help in an emergency in the event it is needed.



Trial of Dragon Medical One (dictation tool)

In early 2024, a small group of staff trialled the use of Dragon Medical One. This system enables dictation within clinical documentation (within SystmOne and the Microsoft Office suite) and aims to support staff to spend less time completing clinical documentation and spend more time with patients, giving the best care possible and have detailed notes whilst keeping all information secure and confidential.

The trial of Dragon Medical One was overall positive, and we are currently collating all feedback to explore options for the cost of licences going forwards. Those that trialled it expressed that it was very easy to use and saved them time of around 30 minutes to 2 hours a day.

Alongside Dragon Medical One, we hope to trial a smartphone app for digital dictation, and this will be taken forwards during 2024–25.



'Tech For Better Care' project

At the end of 2023, Rowcroft Hospice was selected by the Health Foundation, an independent organisation working to build a healthier UK, to be part of its exciting new innovation programme that will explore how technology can enable new approaches to care at home and in the community. We were chosen as one of ten teams across the UK.

The project aims to develop a wearable device or/and an app, particularly suitable for those living with end-stage organ failure, frailty, dementia, and other causes of cognitive decline, or those who may have no fixed abode or live alone and are not always able to express or communicate when they are in pain or distress. The technology will potentially monitor pain levels, vital signs (for example, temperature, pulse, respiratory rate, oxygen saturation), levels of distress, movement, and possibly fluid intake. This information will be monitored by Rowcroft's community triage nurse who, on identifying any changes in measures will make contact via a text message, phone call, or face-to-face visit to help manage symptoms, as well as providing support for loved ones. Digital technology has the potential to help the hospice to reach more patients who would benefit from Rowcroft's care and support.

We are pleased to now report that we have been able to progress through to Phase 2 of this project, being one of six teams from the original ten, and the only hospice team to be chosen.

Our first workshop was held recently, and this has helped gather more information about how the web app will look and what the content should be. We plan to develop a product by the end of Phase 2 and test it with patients, carers and staff.

We are excited to continue our journey into creating something that will benefit all patients needing palliative care support, their families and healthcare professionals involved in their care.

Patient safety

“We will respond to all aspects of patient safety and experience, responding to, learning from and Reflecting on those times when something goes differently to how we expected, look at how those involved were affected, and celebrate our successes. We will seek new Innovative ways of working and enable everyone to have a voice to Suggest ways to help shape our services and Engage and work together with our patients, families, staff, volunteers, and other key stakeholders.”

Last year, we planned to work towards implementing the new Patient Safety Incident Response Framework (also known as PSIRF) and we are proud to say that we have achieved this. We have really embraced PSIRF and are committed to continuously improving our patient safety culture. Our new plan and policy was finalised in January 2024, after being developed for the 12 months prior to this, alongside our new clinical governance structure, to further demonstrate our commitment to patient safety and engagement with those involved in patient safety incidents if they occur.

Quality of care



We will respond to, **Reflect** on and learn from patient safety incidents if they occur, putting preventative measures in place, celebrating our successes when things go well.

We will seek **Innovative** new ways to improve our patients' safety and experience, sharing our successes where things go better than expected.

We will enable everyone to have a voice so they can **Suggest** ideas and help to shape our services, and support those affected by patient safety concerns.

We will **Engage** and work together with our patients, staff, volunteers, and other key stakeholders when aspects of patient safety or experience turns out differently to how we hoped.

This framework is designed to focus on doing investigations in a collaborative way, led by those who are trained to conduct them. It ensures the involvement of patients, their carers, families, staff and volunteers in an embedded system that responds in the right way, appropriate to the type of incidents and associated factors. It recognises the need to provide a safe and supportive environment for those involved in any investigation, with an emphasis on systemic improvement.

In March 2023, we shared our experience of a new PSIRF investigation (moderate harm fall) and how we have implemented this within our organisation with the Devon and Cornwall Patient Safety Collaborative Group, led by the Integrated Care Board (ICB), with members including Acute Trust, Mental Health and Ambulance Service representatives. Feedback was overall positive, and we have been invited to be a member of this group going forwards.

Our new policy and plan was signed and approved by our Senior Management Board in January 2024 and is in full use and will be reviewed on an annual basis.

We also made changes to our feedback and complaints information leaflet for patients and families to reinforce that we really do welcome and encourage all feedback, suggestions, compliments, concerns and complaints. We created a new feedback email address and mailbox, so families are able to email a dedicated mailbox with their feedback.



Our incident profile 2023–2024

At Rowcroft Hospice we recognise that, although the level of harm for incidents reported within our organisation is low, PSIs do happen and there are occasions when the experience of our patients and their families may differ to what we hoped for. It is our responsibility to ensure that we support and work with those affected when something goes differently to how we hoped, to show our commitment to patient safety. We also recognise how important it is for us to capture and celebrate all of our successes when things go really well. All incidents that are categorised as 'high risk', or where someone experienced moderate harm or above, are fully investigated under PSIRF and will be formally reviewed and signed off at our Senior Management Board. This is a new process that we put in place in 2024.

We continue to encourage reporting of incidents to build on our positive incident reporting culture. During the past year, 124 PSIs were reported. We are pleased to say that this is a decrease compared with 144 reported PSIs during 2022–23. Of these incidents, only 1 incident related to moderate harm and met the serious incident criteria (in place until the end of August 2023).

We start 2024–25 with our aim to ensure that all Level 5 PSIs (our new Rowcroft PSI level) are investigated in line with our PSIRF plan and policy and will be formally signed off by our Senior Management Board. This will include incidents which previously met the serious incident criteria (requiring reporting to the CQC) and will now include PSIs which are near misses with the potential to cause significant harm.

Duty of Candour

We continue to have open conversations with patients and families in keeping with the 'Duty of Candour' regulation 20. Our annual audit of compliance with Duty of Candour was fully compliant with the regulation. In addition, our teams continue to have conversations with the patient and / or their family, where it is appropriate to do so, to let them know we report incidents. Our annual audit will continue to be completed each year.

Hospice UK Patient Safety Programme

We continue to be part of Hospice UK's National Patient Safety Programme and submit our data to benchmark against other hospices. We acknowledge that all hospices are at different stages in their quality improvement (QI) journeys, and this encourages us to review and scrutinise our incidents and themes internally and map out our own QI journey. We join the quarterly patient safety webinars that take place for learning and sharing across the region.

During 2023–24, we are delighted to report that at the end of the year we are below the national average for falls and pressure ulcers. Our average number of incidences of falls for the past year, 6.6, is below the national average of 8.1 (9.2 per 1000 bed days).

The number of pressure ulcers acquired at the hospice has decreased with our average being 6. This is below the national average of 8.9 (10.1 per 1000 bed days).

The average number of medication incidents reported, 12.8, remains over the national average of 10.6 (12 per 1000 bed days). We remain vigilant and continue to learn lessons from thorough investigation. We are planning additional reflection and learning groups in the coming months to focus on themes from incidents.

Patient experience

Our CNS was able to check the medication and discuss end of life issues with my husband who was determined to die at home. He got his wish. Your support, kindness, expertise, and understanding were an invaluable safety net during the hardest time in our lives. I wouldn't have got through it without you.

You have been amazing! It's very special that you look out for partners of those you have cared for during end of life.

I don't have the words to say how grateful me and the family were to have the support of this wonderful team in such a difficult time.

The relationships built up between Rowcroft and our family have helped with our healing process.

Thank you for the supportive, informed caring service you gave our family.

The care we received at the end of my husband's life was exceptional.



During the past year we made a number of improvements to our feedback processes, including an updated policy, patient and family leaflet, and a new dedicated email address for feedback.

We have promoted feedback without our teams, building a culture of encouraging and welcoming all types of feedback, including concerns and complaints, always seeking to learn and improve our services.

We continue to actively seek feedback from patients and families on care received under our services through numerous surveys.

Dena's story

In spite of being born with Down's syndrome and a learning disability, Dena from Teignmouth had lived a very full and vibrant life. However in late 2014 she was diagnosed with Alzheimer's and developed incredibly complex needs. Rowcroft was able to deliver expert specialist care that was sensitive and compassionate, and that helped them all through the toughest of times at the end of Dena's life.

"It meant the world to us to be able to sit with Dena knowing her needs were being met and that she could die in her own bed in her own room at home, just as she had wanted," says Dena's sister, Karen. "It was a very peaceful time for everyone and if there is such a thing as a good death then this was it."



Family and Friends survey (FamCare)

We ran two Friends and Family surveys (FamCare) during 2023–24. We sent the surveys to a total number of 59 family members of patients that died while under the care of both Hospice at Home and Inpatient Unit Teams. We received a total of 19 responses to the surveys, with an average response rate of 32%. The feedback we received was supportive and highly positive and has been shared with the teams.

"My husband was lucky enough to be supported by Rowcroft's Hospice at Home team at the end of his life, arranged by one of the doctors. Everything was perfect and I could not have expected or asked for anything more. He greatly benefited from outpatient visits with the doctors."

"The team's kindness towards our loved one and our family was superb. The team made the time to talk to family members and nothing seemed too much trouble. We will take an active part in fundraising for Rowcroft in the future. The team were particularly supportive to my grandchildren, allowing us to have a final picnic with their mum. This was much appreciated as it was the last day, she was able to talk. Thank you for everything you have done – thank you again."

“Thanks to the Hospice at Home Team my husband was able to die in the home he loved surrounded by the people he loved. A big thank you to the people from Rowcroft who helped us care for him in his final days and also for their kindness and compassion to the family.”

Hospice at Home feedback survey

The Hospice at Home Team received an overwhelming 117 responses to their survey during the past 12 months. Some comments received related to concerns where family members felt that their loved ones would have benefited from an earlier referral to Hospice at Home. The team are aware that this has been raised and are aware that it is difficult sometimes for other healthcare professionals to know whether to refer to the service or not. With this in mind, they have developed leaflets to provide extra help to healthcare professionals in the decision-making process about whether to refer. These new leaflets have been distributed to our GP practices and care homes and the team continue to raise awareness as much as possible.



117

responses were received to the Hospice at Home feedback survey during the past year.

Some of the feedback received includes:

“The professionalism and incredibly high standard of care ensured that my father has his wish of dying at home.”

“It gave me the support and help that I needed at a time when I didn’t think I could continue on my own.”

“Thank you for your service; it was an honour to work with your team. I don’t think we could have done this without them.”

“Although he only had care in his last day, I thought that he received everything he needed from Rowcroft.”

The survey continues to be sent each month.

iWantGreatCare surveys

During the past 12 months we received a total of 64 iWantGreatCare survey responses, which are published by iWantGreatCare online on their website. The surveys were completed by those experiencing the services of our Inpatient Unit, Community Team and Complementary Therapy Team. Our overall score was 4.95 out of 5, with 97% of people saying they had a positive experience.

We were delighted to receive the 2024 Certificate of Excellence from iWantGreatCare for those teams that take part in these surveys (Community and Complementary Therapy Teams and IPU). The certificate was received for being one of the highly recommended clinicians and providers across the country for endorsement in recognition of outstanding care and patient reviews.

We continue to take part in the iWantGreatCare surveys and our teams continue to promote participation.

Bereavement survey

66

responses to the bereavement survey were received, and responses were overall positive

“The support I received has allowed me to move on with my life. I was able to let go of the guilt I felt was mine but came to realise this wasn't the case. Being able to talk openly and honestly was very helpful in itself. Having a different perspective offered by the volunteer, being able to laugh and cry which I did in abundance was a real help. The help and support I received was perfect. I am truly grateful for the service offered and feel there could be nothing more.”

Infection control

We continue to monitor infection control within our teams by reviewing updated guidance, monitoring incidents and taking part in the NHS standards of cleanliness audits, as well as continuing to undertake hand hygiene.

We are pleased to report that 10 of the 11 NHS standards of cleanliness audits completed during the past 12 months (with June's audit deferred due to our annual maintenance) were compliant with an overall annual compliance of 96% against a 95% target.

Hand hygiene checks continue each month, and we have updated our audit template to sit in line with the Hospice UK template for hand hygiene audits.

Patient-led assessments of the care environment (PLACE) – annual audit

We are pleased to report that we once again took part in the annual national PLACE audit (NHS England PLACE programme). These assess how an environment supports the provision of clinical care, assessing such things as privacy and dignity, food, cleanliness and general building maintenance and, more recently, the extent to which the environment is able to support the care of those with dementia or with a disability.

The PLACE audit has a target of 95% compliance, and we are pleased to share that we were compliant with results of 99.14%. We plan to be part of this audit once again at the end of 2024.

Clinical audit

Audits undertaken within our clinical audit programme included hand hygiene, PPE (personal protective equipment), standards of cleanliness, equality and diversity, pressure ulcers, consent, care plans, documentation, duty of candour, medicines management, clinical documentation, documentation of allergies, medical gases, continuing health care funding and discharges, and documentation of resuscitation discussions. Our clinical audit programme is fully held on Vantage, our data management system.

Several quality improvements across patient care services were made because of these audits and from the learning taken from incidents, for example:

- implementation of Purpose T regarding pressure ulcer prevention and care
- colour warnings, new falls sensors and assessments to help manage and prevent falls
- plans for a new matron's audit to be implemented to ensure our results are now in line with our digital care plans
- the implementation of the new Hospice UK audit for hand hygiene
- plans to implement the NHS standards of cleanliness audit within Rainbow House, Outpatients, and to include the non-clinical areas of our Inpatient Unit building
- plans to improve our recording of data relating to equality and diversity by the creation of a 'patient details' screen so this can be easily seen and updated by all teams

49

**clinical audits (monthly and annual)
were completed during the past year.**



Freedom to Speak Up

Our Freedom to Speak Up Guardian's role is to provide an additional route to support the protection of patients' safety, support the quality of care, improve the experience of our employees, and promote an environment of continuous learning by supporting and encouraging our people to speak up. They also work to remove barriers to people speaking up and ensure any issues raised are used for learning and continuous improvement.

The existence of the Freedom to Speak Up role works in harmony with our restorative culture, our employee surveys, our staff forum, bright ideas scheme, and management practices which create an environment where everyone is asked to be accountable for their actions and take joint responsibility for our success. It is promoted on notice boards, the HUB (our staff intranet) and at the hospice Welcome Day and induction.

There have been no formal Freedom to Speak Up approaches in the past year. During the next year, we plan to expand our Freedom to Speak Up scheme to enable this to become even more accessible to colleagues across areas of the organisation, with the appointment of Freedom to Speak Up Ambassadors.

Caldicott Guardian

During the past year we received 19 requests for information relating to medical records, and 15 of these were granted. All requests were reviewed by our Caldicott Guardian and responded to within the required timeframes.

National patient safety alerts

Last year we were notified of 152 patient safety alerts (including drug alerts and medical device alerts) from the national database.

We review all alerts when they are published, as these are automatically circulated to our teams through our data management system, Vantage. All required actions are recorded within these records and acted on accordingly.

Only 7 of the alerts received related to our services and require further actions to be taken. There were no concerns related to patient safety from these alerts.

One alert related to updated bed rail guidance, published in 2023, and we reviewed this alongside our practices and procedures, ensuring policies were updated accordingly and that this information was shared with our teams.



Our priorities for 2024–25



SAFE

Implementation of electronic prescribing and medicines administration (EPMA) within our Inpatient Unit

We plan to introduce electronic prescribing (EPMA) within our Inpatient Unit, to enhance and improve prescribing and medications administration and management.

To implement an escalation activity tool within Vantage

Within our data management system, Vantage, we plan to implement a tool created by Hospiscare in Exeter, known as the Hospiscare Escalation Activity Tool (HEAT). This is a tool that considers safe staffing alongside patient complexity to always ensure clinically safe and effective patient care.



EFFECTIVE

Improved data capture and visibility within patient records (including equality and diversity data)

We plan to implement a new and improved single Key Patient Information screen within SystemOne. This screen will ensure that we are capturing all information within the records that will enable us to oversee all information to support personalised care based on a person's needs and preferences. This screen will also provide a one-page overview about the person, which is visible to all of our teams, so our patients only have to share their information and story once.

Improved data collection of activity

We aim to further improve our data collection linked to increased visibility of the data to demonstrate activity and underpin how our services work to support our patients' journeys, by creating an overview summary page for our patient records and improving the important information we collate about our patients.

To explore the use of digital dictation and digital transcription

We plan to explore and implement the use of digital dictation and digital transcription within our clinical teams. This will involve digital dictation through a smartphone app, as well as digital transcription direct to patient records. The aim of this is to improve the quality of our clinical record keeping, enabling clinical reviews to be completed in real time after visits and calls, saving time in completing clinical documentation by our teams.



RESPONSIVE

To develop a One Clinical Team approach

We plan to develop a One Clinical Team approach to enhance collaboration within our multidisciplinary clinical services, to enable integrated and continuous, seamless patient care across our services.

Continued commitment to non-medical prescribing

We plan to continue to support one to two individuals to become non-medical prescribers (NMPs) over the next year and to hold a NMP support event for the Rowcroft team members.

To trial and seek to implement the use of text and email facilities within SystemOne

We plan to trial the use of text messaging and email facilities within SystemOne. This will enhance communication with patients by being able to send messages when telephone calls are not possible and send forms and feedback to our patients and their families to enable them to fill these in electronically.



CARING

To roll out the inclusion strategy

We plan to roll out our inclusion strategy to continue to ensure we are meeting the needs of all those who may experience exclusion.

To work towards a One Clinical Team direction

We plan to build on our aim to create a One Clinical Team direction, to meet people's needs in the most effective and timely manner utilising different mediums e.g. telephone, video call, face-to-face and outpatients appointments. This approach will also create a vision to work towards a more seamless and integrated clinical team over the next year.

Tech for Better Care

To continue to work on the Tech for Better Care project towards the creation of an app for those living with end-stage organ failure, frailty, dementia, and other causes of cognitive decline, or those who may have no fixed abode or live alone and are not always able to express or communicate when they are in pain or distress.



WELL-LED

In-house mock assessments (in line with the CQC Single Assessment Framework)

We will plan mock CQC assessments in-house to identify gaps in our compliance and enhance our culture of support to our teams to enable them to feel prepared and confident for an assessment and be a part of our compliance as one team.

Enhance quality improvement (QI) engagement in our teams

We plan to relaunch quality improvement within our teams and have developed a new quality improvement resource and policy in line with our RISE initiative. This aims to encourage our teams to think about QI when they are making even the smallest change, so we can share this in our teams.

Summary

The past year at Rowcroft Hospice has been characterised by resilience, innovation, and compassionate care. Despite facing significant staff vacancies, our dedicated teams rose to the challenge with unwavering commitment.

We launched the RISE (Reflect, Innovate, Suggest, Engage) and GROW initiatives, successfully implemented the new CQC framework, PSIRF, and introduced new innovative Inpatient Unit shift patterns. These changes have enhanced our operational efficiency and patient care.

Our commitment to community outreach led to the initiation of the homelessness project, providing vital support to those in need. The 'Space for Nature' initiative was also launched, promoting healing and well-being through nature-focused activities.

We've seen continued progression in our trainee nurse associates programme, further bolstering our clinical expertise. Transitioning Inpatient Unit care plans to electronic formats has streamlined processes and improved care continuity.

Educational events have had a significant impact on our local health and care community, further elevating patient care standards. The implementation of smart technology, such as smartphones, has enhanced communication and efficiency across our services.

Positive feedback from patients and families attests to the dedication and skill of our clinical teams. Looking ahead, we remain devoted to delivering the highest quality care and have exciting plans for the future. This includes the successful qualification of our first sponsored student nurse, an increase in non-medical prescribers, and ongoing efforts to expand our care options.



Chair of the Board of Trustees' statement



As Chair of the Board of Trustees, it is once again a huge privilege to reflect upon the achievements of the Rowcroft team over the past twelve months, many of which are echoed in this year's Quality Account.

I am continually humbled by the dedication and commitment of the teams who strive daily to achieve the high standards of care within the hospice environment.

The last year has been exceptionally stretching and challenging for the Rowcroft community, and especially for the clinical cadre. The national shortage of qualified nurses has been felt locally with difficulties recruiting to several registered nurse vacancies; this alongside sickness has added increasing pressure for the clinical teams. However, this has not in any way disabled the team – on the contrary, their keen thinking outside of the box has seen some wonderful initiatives including the international nurse recruitment drive which has resulted in the successful onboarding of two new international recruits within the Inpatient Unit as well as the trainee nurse associate programme which has been exceptionally fruitful.

I am immensely proud of the way in which all our staff and volunteers continue to rise above the operational difficulties to provide a second to none caring service for our patients and their families in our community.

I know the team at Rowcroft have continued to grow and develop both as individuals and team members because of the challenges and this has further embedded their desire to work in a continuously evolving and learning environment which has enhanced our patient-led care.

The drive for attention to detail and the cycle of continuous improvement along with amazing fortitude and flexibility continues to be driven top down through the organisation; Mark Hawkins and his senior team remain pivotal to this agenda. They constantly strive to ensure the open communication style continues to be an exemplar within the DNA of the organisation to the benefit of all.

This report is an inspiring example of our value of 'honesty and integrity' with its open and unambiguous style and very much the raison d'être of the hospice's drive for excellence in patient-led care.

This year, our Director of Patient Care has worked with the clinical team to aspire to greater levels of teamwork. They have shown impressive levels of flexibility and solidarity through some very difficult times across the Inpatient Unit, Community, and Hospice at Home Teams – shining examples of our value as a team player.

This environment cultivates a continuous cycle and culture of honest evaluation, learning and quality improvement which is exceptionally noteworthy.

The Medical Team, led by our Medical Director, provides an excellent, flexible, professional, and caring service ensuring that our patients and their families can make every day the best possible day. This experienced team continues to provide expert guidance to the medical training rotation programme. This in turn facilitates massive benefits both to the hospice and the individuals as they work their way through their medical training. It is a wonderful example of the collaboration we experience across the health care partnerships within our community.

Safety

A keynote activity during the last year has been continuing to operate and deliver our high standards of care with rising patient numbers and increased levels of staff shortages – this achievement is highly notable given the tension between resource fatigue and our team's desire to deliver a quality, caring service.

The continuous cycle of review and the sharing of learning from incidents are noteworthy and seen the revision or introduction of several policies covering patient safety having done great work with the Devon and Cornwall Patient Safety Collaborative Group established by the ICB.

It is pleasing to see that we have now integrated patient care plans into our IT system which has enabled a speedier and professional review of each individual in real time.

Caring

Our staff and volunteers are marvellous advocates for our caring services to make every day the best day possible for patients and their families in our community.

The strong levels of great care are borne out by the positive feedback we gain from our friends and family feedback and experience surveys. It is very pleasing that there have been several initiatives put in place because of additional feedback on making our services even better including the new patient leaflet for referrals to the Hospice at Home service and the risk assessment framework enhancements.



Our inclusion and diversity project team are working through the formulation of plans to increase everyone's understanding of what that means within Rowcroft and this will undoubtedly help us achieve greater inclusivity for individuals and our community moving forward.

Operating effectively

The team has a strong drive in the pursuit of continual review, learning and improvement of our effectiveness to ensure that every individual receives the appropriate treatment and care they need. This is evidenced by the number of diverse audits carried out alongside the introduction of new working practices, for example the review of clinical competencies within the IPU, electronic prescribing in the Community and Hospice at Home Teams and procedures.

Responsive

The community strategy is now embedded in the way the team operates more efficiently enabling our patients a quicker access to the services we provide and in turn facilitating the handling of the complex needs of our ageing population.

The technological advances have enabled the Education Team to deliver a wide range of learning opportunities for the team and further facilitated an increase in number of care professionals accessing a wide range of learning and development events either online or face-to-face which further enhances the palliative care reach within the community.

It is heartwarming to see the advent of nurse medical prescribers, trainee nurse associates and the drive towards career development and enhancement within the clinical spheres.

Particularly noteworthy is the excellent work with the homelessness collaboration which has led to greater accessibility to palliative care support within the local communities.

Well-led

The leadership team continues to ensure that the hospice has an agile, motivated, educated and appropriately skilled workforce to continue our strategic journey.

I am delighted with the implementation of Rowcroft's RISE (Reflect, Innovate, Suggest, Engage) initiative to embed the new Care Quality Commission's Single Assessment Framework. This has been impressive in its formulation, structure, and communication across Rowcroft.

The Education Team have once again excelled in their provision of palliative care and end-of-life training, making them a much sought after quality provider of palliative education.

The strategic leadership in palliative and end-of-life care continues to be exceptionally valued by the community we serve, as seen in the word cloud within this report. This community support is highly valued by the Rowcroft team, and we are forever grateful for the diversity of that support through events, challenges, and fundraising activities – thank you.

My heartfelt thanks go out to all the staff and volunteers who continue to be an 'exemplum' of superb teamwork and flexibility. I continue to be in awe of their tenacity, grit, and selflessness that they show every day to "help our patients to make every day the best day possible".

I am immensely proud of the organisation and all the people within it for the continuing commitment to the highest quality of patient care in a challenging and ever-changing environment. I highly commend this report on behalf of the Board of Trustees.

Sally Scott-Bryant

Chair of the Board of Trustees

Stakeholder statements

Healthwatch Torbay

Healthwatch Torbay is the independent consumer champion for people using local health and social care services in Torbay and South Devon. Our work covers all areas of health and adult social care. We seek to ensure that the views of local people, especially patients and their families, are part of system design and that feedback is valued.

This Rowcroft Hospice Quality Account for 2024 is a celebration of a learning organisation. There is an evidenced ethos of constantly seeking improvement by education, research and patient involvement, especially in the context of national guidance and learning from others. Expertise and experience are willingly shared with other organisations to the benefit of patients' experience of care and the well-being of all care givers.

A forward-looking digital approach is well in evidence, with the views of patients considered and valued as part of the design. Potential partners across the care sector are encouraged to contribute, including Healthwatch. In this way Rowcroft may be proud to consider itself a catalyst for forward-thinking and collaboration.

Healthwatch Torbay is confident that this Quality Account represents a true picture of the challenges and achievements of Rowcroft Hospice and has a clear vision for 2024/25.

Healthwatch, 2024

NHS Devon Integrated Care Board (ICB)

NHS Devon Integrated Care Board (ICB) would like to thank Rowcroft Hospice for the opportunity to comment on the Quality Account for 2023/24. Rowcroft Hospice is commissioned by NHS Devon ICB to provide a wide range of specialist palliative care services for people and their families with progressive life-limiting illnesses. We seek assurance that care provided is safe and of high quality, ensuring that care is effective and that the experience of care is positive.

As Commissioners we have taken reasonable steps to review the accuracy of data provided within this Quality Account and consider it contains accurate information in relation to the services provided and reflects the information shared with the Commissioner over the 2023/24 period.

Despite ongoing pressure on staff and services, this Quality Account has highlighted a number of positive results against key objectives for 2023/24. These include:

- 1 Safe** – full establishment of the Patient Safety Incident Response Framework. Implementation of a lone working app which can perform welfare checks as well as providing accurate GPS locations for workers.
- 2 Effective** – Several achievements have been made under this domain, including implementation of the new Inpatient Unit model including clinical competencies for registered nurses within the unit.
- 3 Responsive** – Rowcroft Hospice’s five-year strategy for community services was approved in 2023 and has underpinned several initiatives to improve collaboration across the system.

- 4 Caring** – Transfer from paper care plans to an EPR was successful for both the Inpatient Unit and Hospice at Home.
- 5 Well-led** – Rowcroft has implemented the new RISE (Reflect, Innovate, Suggest, Engage) initiative to embed the new Care Quality Commission’s Single Assessment Framework.

The ICB also notes and welcomes the 2023/24 priorities outlined by Rowcroft Hospice in their Quality Account and will look forward to seeing achievements related to each of the CQC domains. Each of these programmes will continue to evidence and improve quality and safety for the benefit of patients, families, carers and staff, building on the lessons learned from 2023/24.

Rowcroft Hospice was last inspected by the CQC in October 2021 and achieved “Good” within all categories. Rowcroft has now embedded the new CQC Single Assessment Framework across the organisation. As a commissioner, we have worked closely with Rowcroft Hospice during 2023/24 and will continue to do so in respect of all current and future CQC reviews undertaken, to receive the necessary assurances that actions have been taken to support continued, high quality care.

On review of this Quality Account, Rowcroft Hospice’s commitment to continually improving quality of care is evident. The ICB looks forward to working with Rowcroft Hospice in the coming year, in continuing to make improvements to healthcare services provided to the people of Devon.

NHS Devon Integrated Care Board (ICB), 2024

Torbay Carers

Rowcroft continues to prioritise supporting the family members and friends of the people who use its services. Unpaid carers often neglect their own health and well-being while they support their loved one. This year, besides running relaxation and support services, Rowcroft has also improved the information on their website about wider support to carers across Devon including those aged under 25. This should hopefully mean that carers of all ages can more easily find all the support they need.

In November, Rowcroft staff also supported Torbay Carers at their annual Carers' Rights Day event at Paignton Library. The national theme was 'planning for your future' and Rowcroft with a number of other local agencies supported family and friends to find out more about planning ahead, such as power of attorney, Treatment Escalation Plans and funeral planning. Their support and partnership working is truly valued across the community, and alongside the other achievements in this Quality Account demonstrate the commitment to the people who use their services, their families and their friends.

Torbay Carers, 2024