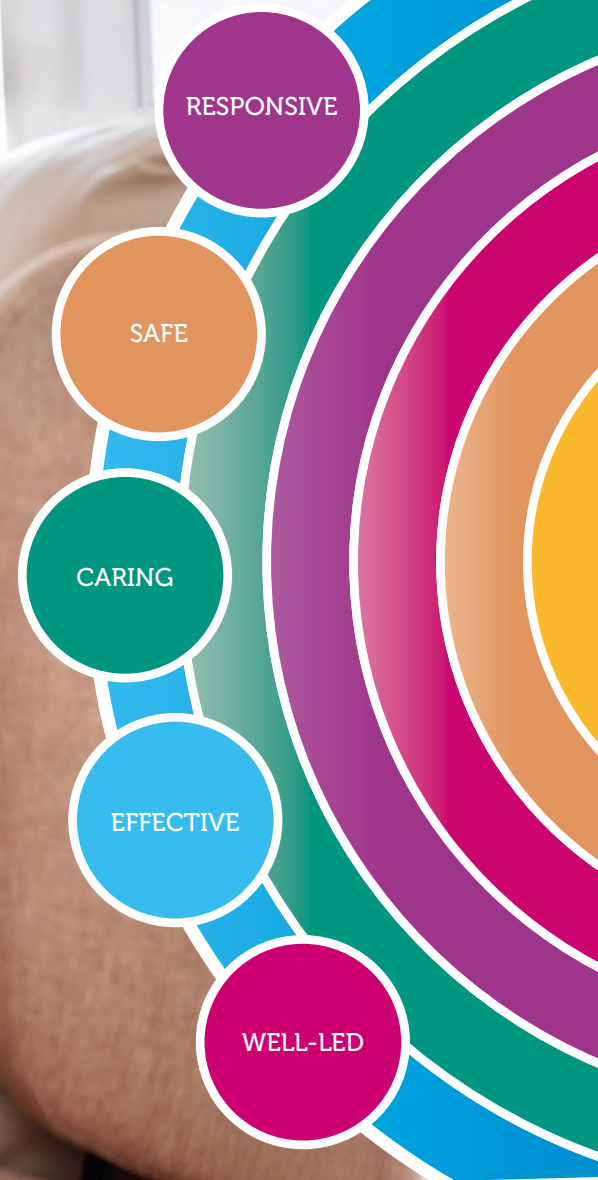


# Rowcroft Hospice Quality Account 2024–25



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*“I really can't say enough good things about Rowcroft and their staff, and the care they provide. The level of compassion, attentiveness, professionalism, and the sheer level of care that runs through the entire place and in every member of the team – from the receptionist to the cleaner – is really incredible. It is amazing and gives hope that a place like this can exist. I am so grateful to you all.”*

# Chief Executive's introduction

It is with great pride that I introduce Rowcroft Hospice's Quality Account for 2024–25.

In a year dominated by economic uncertainty and mounting pressures on the health and social care workforce, Rowcroft has once again risen to the challenge. We have remained true to our core purpose – delivering expert, compassionate care to those living with life-limiting illness, while continuing to evolve, innovate and extend our reach across South Devon.

At the heart of all we do is a powerful belief: that every day matters. Whether supporting people in their homes, within our Inpatient Unit, or across the wider community, our multidisciplinary teams have gone above and beyond to ensure each day is lived with comfort, dignity and meaning.

This year has seen real progress. Our Hospice at Home Team delivered its busiest year to date. We've fully embedded our RISE (Reflect, Innovate, Suggest, Engage) programme to drive continuous learning and improvement, and we've launched a bespoke escalation tool to ensure real-time oversight of staffing levels and patient needs.

We've also taken bold steps in digital transformation with the successful implementation of electronic prescribing in our Inpatient Unit to enhance safety and efficiency; piloting new care planning tools for people with dementia or without a fixed address; and progressing our Tech for Better Care project. Our commitment to inclusion remains a central pillar of our strategy: we've identified seven inclusive care priorities, invested in staff training and laid the foundations for a more equitable and accessible hospice for all.

Workforce development continues to be a key strength. Five sponsored student nurses have now qualified and joined our team, alongside our first-ever nursing associate. We've supported

international nurses through the Nursing and Midwifery Council registration process, and expanded our external education offer – sharing our expertise to strengthen palliative care delivery across the local system.

Above all, it is the voices of those we care for that guide us. Feedback from patients and families is both humbling and galvanising. Their stories remind us why this work matters, and why we must keep pushing forward.

Looking ahead to 2025–26, our ambition remains bold. We will further develop our unified 'One Clinical Team' model to enhance consistency and collaboration across services. We are committed to expanding our inclusive care offer, ensuring that our front-of-house experience in the Inpatient Unit delivers the same warm, welcoming service seven days a week. We also plan to sensitively refurbish our hospice environment, creating a more homely, comforting space and increasing the number of single rooms to better support dignity and personal choice.

To our extraordinary staff, volunteers, trustees, partners and our South Devon community - thank you. Your dedication and compassion are the heartbeat of Rowcroft. Together, we are making every day the best possible day.

**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, a music therapist, and an art therapist, plus a range of support staff, work tirelessly for thousands of patients and their loved ones every year.

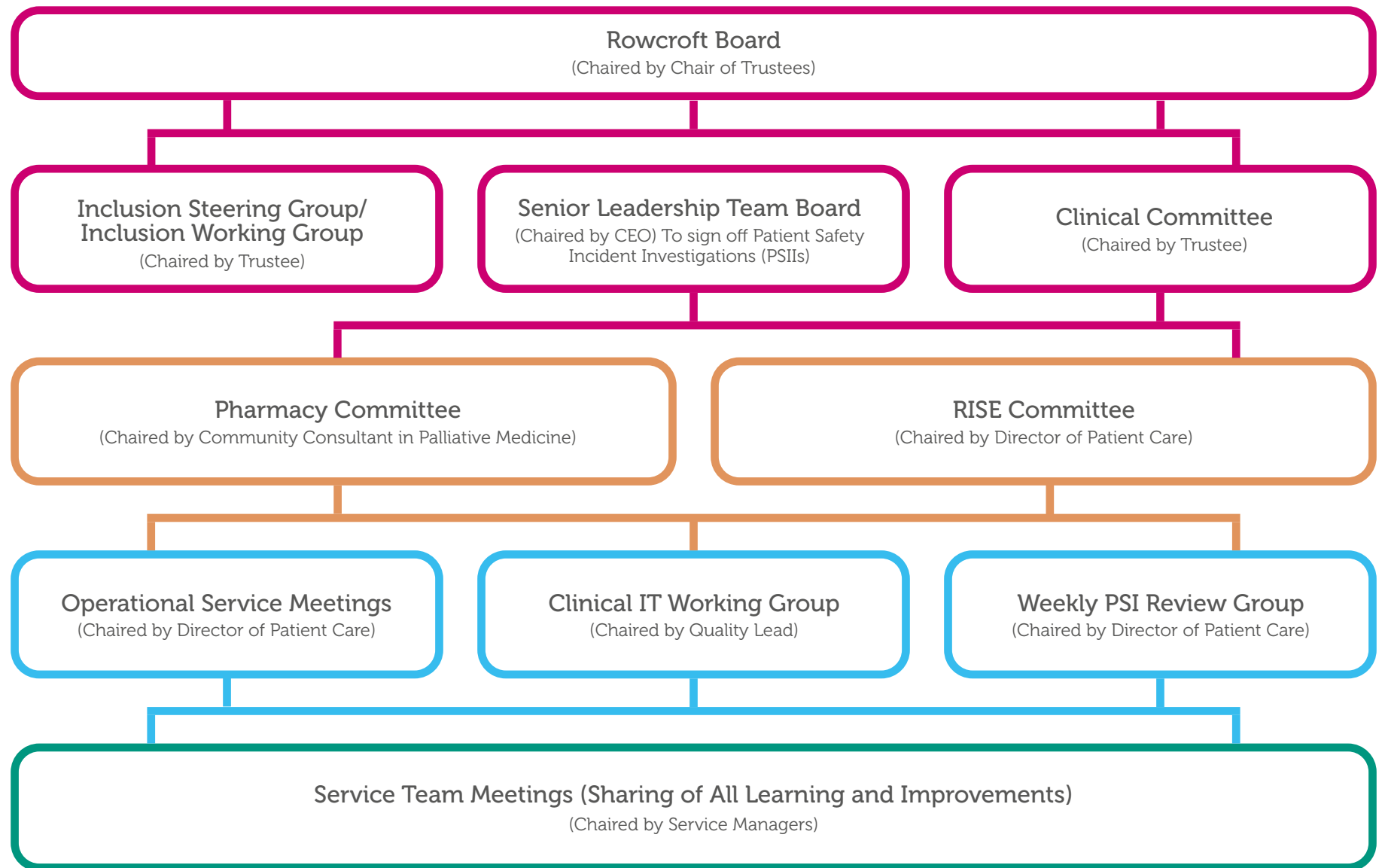
We are also very fortunate to have a wonderful team of volunteers. Whether they're helping out on our reception desk, supporting the IPU as a ward attendant or hospitality volunteer, organising or volunteering at a fundraising event, working in our shops, cafés, gardens or offices, or making cups of tea or coffee, 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. Patients were also 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 yrs.

Our last CQC assessment was in October 2021. We achieved 'Good' in all categories and 'Good' overall. The report is available at: [www.cqc.org.uk/location/1-106245011](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





# Introduction from our Director of Patient Care

As Director of Patient Care, I am proud to introduce Rowcroft Hospice's Quality Account for 2024–25. Over the past year, we have continued to strengthen and evolve our services to ensure we deliver the highest standards of care for patients and families.

Key developments this year include the creation of a new Head of Community and Hospice at Home role, enhancing integrated leadership across our services, and the restructuring of our Catering Team to focus exclusively on providing nutritious, high-quality meals tailored to patient needs.

Our quality improvement culture continues to thrive. RISE (Reflect, Innovate, Suggest, Engage) is now fully embedded, and the launch of the Rowcroft RISE Quality Improvement Programme is further empowering staff to lead change and drive continuous improvement.

We are proud to have supported five sponsored student nurses through to qualification – all of whom have joined us as registered professionals through our preceptorship programme, rotating across our clinical services. This includes our first-ever nursing associate, marking a milestone in workforce development.



In the Inpatient Unit, we implemented electronic prescribing and medicines administration (EPMA), significantly improving safety and efficiency. We also supported international nurses through the Nursing and Midwifery Council (NMC) registration process, enabling them to join our team as registered professionals.

Our new Inclusion Strategy underscores our commitment to equity, diversity, and inclusion across all areas of our work.

We now have ten qualified prescribers in our clinical teams, enhancing the timeliness and personalisation of symptom management.

Progress with our Education Programme has been another highlight. We delivered a range of impactful training events, supporting the wider health and care community and improving patient care across the locality.

Most importantly, the heartfelt feedback we received from patients and families is a powerful reflection of the compassion, skill, and dedication of our teams.

As we look ahead, our focus remains firmly on delivering exceptional care and continuously improving what we do. I warmly invite you to read on to learn more about our work, achievements and ambitions at Rowcroft Hospice.

### **Vicky Bartlett**

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



## Our review of last year (2024–25)

*“The whole team were absolutely awesome. You took care of Mum and me so kindly and compassionately in the last days of her life. The way you communicated with us, and other professionals was just brilliant. I can’t begin to thank you for the way you handled Mum after her death. The respect and tenderness you showed is something that will stay with me and my daughters forever.”*



# Our year in numbers



**295** patients were admitted to our Inpatient Unit



**604** patients were referred to our Hospice at Home Team



**1652** patients were referred to our Community Services Teams

**2571** referrals were made to our Community Services Team within the Community Multidisciplinary Team

**36,039** individual face-to-face and telephone contacts were made by our Community and Hospice at Home Teams

**1420**

requests were made for Community Nurse Specialists support.

**166**

referrals were made to our Social Work Team

**425**

referrals were made to our Physiotherapy and Occupational Therapy Support Service

**281**

people benefited from our Music and Complementary Therapy Services.

**179**

referrals were made to our Bereavement Support Service.

*“I would like to thank all the staff for looking after my husband. We really appreciate your kindness towards him and the support you gave to my daughter and myself in those difficult times.”*

## Our IPU (Inpatient Unit)

This year has been one of positive growth and meaningful change within our Inpatient Unit (IPU), marked by several key developments that have strengthened the quality, sustainability, and resilience of the care we provide to patients and their families.

A significant milestone was the successful onboarding of five newly qualified nurses, all of whom are progressing through our structured preceptorship programme. This investment in early-career development is helping to build a strong foundation for the next generation of hospice nurses, with a focus on palliative and end-of-life care.

We have also seen the positive impact of our international recruitment efforts, with internationally educated nurses successfully integrated into the IPU team – bringing valuable skills, experience, and diversity to our care provision.

One of the most transformative developments this year has been the implementation of the Electronic Prescribing and Medicines Administration (EPMA) system. This innovation has enhanced medication management by improving safety, efficiency, and communication across the multidisciplinary team. The transition

has also significantly reduced our reliance on paper records, aligning with our sustainability goals.

In addition, we restructured our Catering Team to allow them to focus exclusively on preparing nutritious, high-quality meals tailored to the needs of our patients – further supporting personalised care.

Looking ahead, the IPU remains committed to continuous improvement, embracing digital innovation, supporting workforce development and delivering compassionate, person-centred care every day.



## Our Hospice at Home Team

The team had their busiest year to date, supporting patients with both cancer and non-cancer conditions. They worked closely with Marie Curie and social care partners to deliver night support, daytime respite, and personal care for patients awaiting care packages, helping to maintain dignity in the final days of life.

This year, the team gained another Queen's Nurse and a non-medical prescriber, reflecting their professionalism and clinical expertise.

An increase in referrals from local residential and nursing homes has extended the team's reach and enabled them to share their knowledge across more settings.

*"As a family we are eternally grateful to the Hospice at Home Team. My brother received the best possible care. He was treated with the utmost dignity and respect. I felt listened to and totally included with regards to his care and medications treatment plan. Advice was a phone call away. He could not have been in better hands. All of your nursing team are magnificent. Thank you."*





## Our Community Team

The team supported a wide range of patients with both cancer and non-cancer diagnoses during the past year. Patients and their families have benefited from truly holistic care provided by our CNSs, social workers, occupational therapists, physiotherapists, spiritual care specialist, music therapist, and complementary therapists.

Our relaxation group, led by a complementary therapist, received excellent feedback and is planned to run again soon.

Workshops were held to explore new ways of working that would enable the team to see more patients while enhancing job satisfaction. There is enthusiasm for developing community-based groups to reach people who may not currently engage with hospice services and to strengthen our presence locally. We aim to bring these ideas to life over the coming year.

Our Housekeeping Team has undergone changes, including the appointment of a new team leader. Infection control audits continue to demonstrate consistently high standards of cleanliness throughout the hospice.

*"I had the pleasure of meeting my Clinical Nurse Specialist today and she was lovely. Very informative and very patient. I feel reassured that my wishes will now be adhered to as best as can be. She answered my questions sincerely in a simple way. She is giving me practical help with medication as well, interacting with my doctor on my behalf. I feel very reassured."*





## Bereavement and Listening and Support Service

The Bereavement and LaSS Service continues to support bereaved individuals and those with life-limiting conditions through counselling, listening support and group work. Our team now includes around forty volunteers, including counsellors, who assist those experiencing grief complicated by trauma, mental ill health, and relationship issues.

We run two 'Spaces for Nature' bereavement groups, offering reflective, creative and nature-based activities, led by former clients and guest activity leaders. We're also planning an eight-week therapeutic course next year and exploring a pilot group for GP-referred clients and the families of Rowcroft's patients.

In March, fifteen volunteers took part in group facilitation training, with seven more interested in future sessions. Four volunteers now lead 'Spaces for Nature' groups independently. Many have also received training in self-care, compassion, psychological first aid and de-escalation, with more training planned for 2026.

We've developed a new service description and referral criteria for our website update and referral app, with input from clinical colleagues, alongside a completed risk assessment for all service activities.

*"Just having someone who listened to you with empathy – and not someone with paper and pen and tick boxes – helped to put things and feelings in perspective in a kindly manner and there weren't any time limits."*



## Education

This year, the Education Team has continued to grow Rowcroft's external education offer, supporting our mission to share palliative and end-of-life care expertise across the community and professional networks.

We successfully embedded the new ARLO booking system, streamlining administration and improving accessibility and user experience.

To meet rising demand and ensure sustainability, we introduced paid places for face-to-face and bespoke training sessions. Online sessions remain free of charge, maintaining access for a wide audience.

The Education Ambassadors Programme had another impactful year, extending our reach and promoting best practice across diverse healthcare settings.

We contributed clinical expertise and organisational support to the successful Dementia and Palliative Care Conference, reinforcing our leadership in dementia-aware end-of-life care.

A new 7.5-hour clinical educator role was introduced to support internal training and upskilling, ensuring continued excellence in care delivery.

With ARLO in place and a strategy that balances access and sustainability, we're well-positioned to expand our education programme and strengthen partnerships across Torbay and South Devon.

*"Rowcroft Education is a brilliant resource, and empowers health and social care professionals, volunteers and others to provide more holistic care for those in some of the most fragile times of their lives. It's wonderful to have such a caring team on our doorstep. Thank you."*

**58**

**learning events  
were delivered**

**609**

**learners attended  
the learning events**



## Our progress – priorities 2024–25

*“I think the most important factor was and is the personal and obvious care and concern, with which I love being treated. I cannot think of anything better than what has been gifted to me.”*

### SAFE

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

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

We are delighted to announce that we fully implemented electronic prescribing and medicines administration (EPMA) within our medical records system (SystemOne) in the Inpatient Unit (IPU) in early February 2025. Feedback has been overwhelmingly positive, and the implementation has gone smoothly.

#### To implement an escalation activity tool within Vantage

While we explored the Hospiscare Escalation Activity Tool (HEAT) developed by Hospiscare in Exeter, we have since developed our own tool that is better suited to the specific needs of our services. Built within our data management system, Vantage, this bespoke tool (based on the Hospiscare tool) considers both safe staffing levels and patient complexity, and also incorporates pressures in the medical, housekeeping, community and Hospice at Home teams (including geographical pressures based on patient location and travel) and we are looking forward to piloting it. This represents a key step in our commitment to ensuring clinically safe and effective patient care.

## 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.

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

We implemented a new and improved single Key Patient Information screen within SystmOne, which has been well received by our teams, and enables them to see key information about a patient in their record in one place. This is to support personalised care based on a person's needs and preferences, without having to search multiple places. It also highlights gaps in important information and helps our patients to share their information and story once.

### Improved data collection of activity

Over the past year, we've improved how we collect and summarise patient data by creating an overview page in our records, making key information easier for teams to access. This work is ongoing, with further improvements to our patient care system planned for the year ahead.

### To explore the use of digital dictation and digital transcription

Plans to explore digital dictation and transcription were paused to prioritise improvements in data collection, care plans and the rollout of e-prescribing in the Inpatient Unit. We aim to progress this work in 2025–26.







## RESPONSIVE

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

### To develop a ONE Clinical Team approach

We are committed to fostering a cohesive and integrated approach to clinical care through the development of a ONE Clinical Team model. This initiative aims to enhance collaboration across all clinical areas, ensuring a seamless and consistent approach to patient care. While the strategic framework for this model is still in development, our focus remains on strengthening interdisciplinary working, improving communication and aligning practices to deliver the highest standards of care. By unifying our clinical teams under a shared vision, we seek to optimise patient outcomes, enhance staff engagement and create a more resilient and adaptable workforce. The strategy will continue to evolve in response to emerging needs, with ongoing consultation and refinement to ensure it fully supports our mission of delivering outstanding palliative and end-of-life care.

### Continued commitment to non-medical prescribing

We continue to support members of our team to become non-medical prescribers (NMPs) and hold NMP support events for the Rowcroft team members.

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

Although plans to introduce text messaging and email through SystemOne were paused over the past year, we aim to trial these features in the coming year to enhance communication – enabling us to send messages, forms and feedback electronically when telephone contact isn't possible.



## CARING

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

### To roll out the Inclusion Strategy

We are committed to fostering an environment where everyone is treated with dignity, respect and equity. Our Inclusion Strategy outlines our drive to make hospice care accessible to all and to address health inequalities.

We have identified seven inclusive care priorities focused on underrepresented groups, alongside the rollout of a comprehensive equality, diversity and inclusion (EDI) training programme for all staff – equipping them to deliver inclusive care and challenge barriers to access.

Creating an inclusive culture requires ongoing reflection and meaningful action. By addressing unconscious bias, promoting fairness and amplifying diverse voices, we strengthen both our workforce and the care we provide. Inclusion is a continuous journey – one that ensures everyone at Rowcroft feels seen, valued and supported.

### Tech For Better Care

Work continued on the Tech For Better Care project, working 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. The team developed a poster summarising the project's concept and were chosen to display this at the 2024 Hospice UK National Conference. The next stage is to explore further funding to take the app forward for development.

## 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.

### Enhance quality improvement (QI) engagement in our teams

At the start of 2025, we implemented an additional part of Rowcroft's RISE (Reflect, Innovate, Suggest and Engage) initiative, RISE QI. Launching RISE QI and encouraging thinking around quality improvement aims to empower staff to drive continuous enhancements in care, ensuring we consistently meet the evolving needs of our patients and families while fostering a culture of innovation and excellence.

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

We are pleased to share that we held a mock CQC self-assessment in September 2024. This helped us identify gaps in our compliance and enhanced our culture of support to our teams to enable them to feel prepared and confident for an assessment. This assessment was supported by our Trustees and a member of our Senior Leadership Team and proved a positive learning experience.



# Research, quality improvement and innovation

We have plans to review and embed our research framework, and our Director of Patient Care is a co-applicant on an NIHR-funded end-of-life care research project in collaboration with the University of Plymouth.





# Quality of care

*“Absolutely outstanding care, compassion, support, expertise. There really aren’t enough words.”*

## Patient safety

We continue to work in line with NHS England’s Patient Safety Incident Response Framework (PSIRF) and have regularly reviewed and refined our plans and processes to further enhance our approach to patient safety. We are pleased to report that we now have a registered Patient Safety Specialist who leads our efforts to embed a culture of safety and continuous learning, with the aim of reducing harm and improving outcomes for patients.



## Our incident profile

While the overall level of harm from reported incidents at Rowcroft Hospice remains low, we recognise that patient safety incidents (PSIs) do occur, and that sometimes the experience of patients and their families may fall short of our expectations. We are committed to supporting those affected and to learning when something unexpected happens.

All incidents classified as Level 5 PSIs under our internal policy – those involving moderate harm or above, or those assessed as high risk – are subject to full investigation under PSIRF. These investigations are reviewed and signed off by our Senior Leadership Team Board to ensure robust clinical governance.

Over the past year, we reviewed our PSI processes and implemented a new approach using the SBAR (Situation, Background, Assessment, Recommendation) tool. This supports an early review within the first few days of an incident to determine whether a full PSIRF investigation is warranted. This approach has already shown positive outcomes, and we plan to continue developing it to ensure that any full investigations undertaken are both meaningful and proportionate.

We continue to foster a culture of open reporting to support learning and improvement. In the past year, 117 PSIs were reported – a decrease from 124 in 2023–24. Of these, three incidents were reported to the Care Quality Commission (CQC) and were investigated under the patient safety framework.

## 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 review 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.



# Patient experience

I am grateful for the support and complementary therapies given to my husband before he died and the ones I received later which were excellent.  
 Nursing and housekeeping have been amazing. The environment is also appropriate for the wellbeing of everyone – which is just right.  
 I have been very impressed with all the staff and the caring attitude in meeting my needs. Thank you.  
 Helped me to focus on various aspects of my life and to be a little clearer headed in my journey forward.  
 I just want to say that Rowcroft was a great place for our loved one to be with all of her family.  
 I couldn't have coped without them, everything changed when they came in to help.  
 We all felt very cared for and were treated well with dignity and respect.



We continue to actively seek feedback from patients and families on care received under our services through numerous surveys and are looking forward to further enhancing our engagement with patients and families during the coming year. It is our hope to find an alternative independent survey provider so we can promote inclusive surveys where patients and families can share their story in a way that meets their needs, whether that's by telephone, face to face, by words in writing or by telling their story using pictures.



## Family and friends surveys (FamCare)

We ran two friends and family surveys (FamCare) during 2024-25. We had 32 responses to the surveys and feedback received was supportive and highly positive. We will continue with our FamCare survey during the next year with plans to encourage digital completion of surveys with an online survey form.

*"I found the Rowcroft team thoughtful, kind, professional, experienced, supportive of our loved one's needs, physically and emotionally. Considerate with the needs of the family too. The amazing service you provided enabled our loved one and our family to be together in our family home. In our own bubble, loving him and caring for him for the last days of his life. Thank you."*

*"Every member of Rowcroft who visited our home and cared for my husband was highly respectful of our home, the family and most importantly cared for my husband with grace and compassion."*





## Hospice at Home feedback survey

122

responses were received to the Hospice at Home feedback survey during the past 12 months.

Some of the feedback received includes:

*"I was on my knees when they came – I hadn't slept for days, worried Mum would die when I wasn't beside her, as I was sleeping in her spare room. They were absolute angels, making me feel safe and supported. Words just aren't enough to express my gratitude to the Hospice at Home Team. They were wonderful to the end. Very special people."*

*"I do not know what we would have done without this service at the end of his life. Everyone was very caring and supportive and treated him with dignity."*

*"The service offered is amazing. I felt they went above and beyond to give him the care needed. They were at the house 24/7 for the last couple of days. Amazing people, just angels in disguise. Couldn't recommend them enough."*

*"Before you came, Mum and I felt alone and isolated. When you arrived, it was like angels descending; you made everything better and I can't thank you enough."*



## Bereavement survey

57

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

Some of the feedback received includes:

*“It’s allowed me to start moving forwards. Before I started, I was in a very dark place and struggling to focus at work. I didn’t think I could ever get past the sadness, but my bereavement listener has helped me to work through my grief and start living again. I’m extremely grateful to her; she has made a huge difference to my life.”*

*“It has helped me to cope with all the difficult emotions, and learning to move ahead at my own pace and in my own way.”*

## Infection control

We monitor infection control through updated guidance, incident reviews, hand hygiene checks and NHS cleanliness audits. All 11 audits completed this year (excluding June, deferred due to ward maintenance) were fully compliant (with a target of 95%). Monthly hand hygiene checks continue, with improvements made to the audit template for next year.

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

We are pleased to report that we once again took part in the national annual 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 97%. We plan to be part of this audit once again at the end of 2025.

## Clinical audit

**43**

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

Our clinical audit programme covered a wide range of areas, including infection control, cleanliness, equality and diversity, pressure ulcer prevention, consent, care planning, documentation (including allergies and resuscitation discussions), duty of candour, medicines management, medical gases, continuing healthcare funding and patient discharges.

Quality improvements across patient care services were made because of these audits and from the learning taken from incidents – for example, the enhanced collaborative working between our estates, housekeeping and clinical teams to ensure audit compliance with the PLACE audit and our monthly NHS standards of cleanliness audits which were all fully compliant.





## Freedom to Speak Up

'Freedom to Speak Up' is one of several channels through which our people can raise concerns, share suggestions and have their voices heard. It plays a vital role in safeguarding patient safety, enhancing the quality of care, supporting employee wellbeing and fostering a culture of continuous learning.

This initiative complements our wider restorative culture and works in tandem with mechanisms such as our employee surveys, staff forum, 'Bright Ideas' scheme and inclusive management practices. Together, these create an environment where shared responsibility and open dialogue are encouraged and valued.

We actively promote 'Freedom to Speak Up' through notice boards, our staff intranet (The Hub), and during the hospice's welcome days and staff induction programmes. Recently, we have recruited a number of 'Speak Up Champions' from across the hospice. These champions are available to support colleagues in identifying the most appropriate route for raising concerns or making suggestions.

During the reporting period, we received one 'Freedom to Speak Up' approach. The colleague was supported throughout the process, and the issue was resolved successfully.

## Caldicott Guardian

During the past year we received 13 requests for information relating to patient healthcare records, and 9 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 received 162 patient safety alerts from the national database. Six were shared with our teams for awareness. One alert related to missing safety information in a patient information leaflet (Sandoz Omeprazole); the batch was checked in the Inpatient Unit, staff were informed and no safety concerns were identified.





# Our priorities for 2025–26



## SAFE

### Continue our PSIRF journey

To further advance our patient safety journey, we are committed to fostering a no-blame, learning-focused environment that builds on our restorative culture. We will actively engage with patients, families, staff and volunteers to ensure that all voices are heard, experiences are valued and improvements are co-designed to enhance safety and trust across our services.

### Development of SystmOne and implementation of Brigid mobile working app

Redeveloping our SystmOne setup and implementing the Brigid mobile working app to strengthen safe, effective, and person-centred care – improving real-time access to information, supporting clinical decision-making, and ensuring patients remain at the heart of all we do.

## EFFECTIVE

### Digital dictation and transcription for clinical teams

To continue to explore the use of digital dictation and digital transcription within our clinical team to find a solution which will enhance their roles and impact on improved outcomes for patient care and improve clinical documentation.

### Rowcroft clinical faculty

The development of the clinical faculty which will support staff to develop and maintain their clinical knowledge by giving opportunities to access various courses.

## RESPONSIVE

### Patient feedback and family involvement through our new clinical strategy

Actively engaging patients and families to ensure their voices shape care planning, delivery, and improvement at every level of our clinical strategy.

### Exploration of seven-day administrative cover in our IPU

Align and enhance clinical administrative support by transitioning to a single unified Patient Care Support Team and extending coverage to support seven-day Inpatient Unit care and continuity of experience for those in the IPU or visiting loved ones on all days of the week.



## CARING

### Inclusive patient experience survey

To secure links with a new patient experience survey provider, enabling patients and families to share their whole story and experiences, via word or by using pictures, ensuring we hear feedback from everyone inclusively.



## WELL-LED

### Clinical educator post

The introduction of a clinical educator at Rowcroft strengthens the 'well-led' domain by promoting a culture of continuous learning and professional growth. Through ongoing training, mentorship, and support, clinical educators ensure staff are equipped with current, evidence-based knowledge and skills. This fosters a positive, empowered workforce and reflects strong leadership that values openness, innovation and development.

### Clinical dementia lead

The clinical dementia lead post will commence and initially undertake an audit for a baseline assessment. They will also develop a proposition for the next steps in terms of training and the environment at the hospice.



## Summary

As we reflect on the achievements of the past year and look ahead to the future, this Quality Account demonstrates our unwavering commitment to delivering high-quality, safe and compassionate care. Through continued collaboration, learning and innovation, we aim to build on our progress and address the challenges that lie ahead.

Our new priorities for 2025–26 continue to reflect the voices of our patients, staff and partners, ensuring that quality remains at the heart of everything we do. We are proud of the strides we have made and remain focused on fostering a culture of improvement, accountability and excellence.

*Thank you to all our staff,  
patients and stakeholders whose  
contributions and dedication  
make this work possible.*



# Chair of the Board of Trustees' statement



As Chair of the Board of Trustees, it continues to be a huge privilege to reflect upon the achievements of the Rowcroft team over the last twelve months.

The team's dedication and commitment are inspiring and humbling in equal measure as they strive daily to achieve the exceptionally exacting standards of care within both the hospice and community environments.

The past year has once again been extremely stretching and challenging for the Rowcroft community, as it has for the healthcare and charity sectors. These challenges have brought about change for many of the teams. However, their keen thinking outside of the box has seen the birth of some great initiatives – for example, in fundraising for clinical needs, support for our bereaved families and growth in our volunteer numbers. The international nurse programme has enabled new clinical learning, as highlighted by the five newly registered nurses who bring a fresh outlook and perspective.

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 continue to grow and develop both as individuals and team members because of the challenges faced over the last twelve months, and this has further embedded their desire to work in a continuously evolving and learning environment to enhance our patient-led care.

The drive for a cycle of continuous improvement along with amazing flexibility continues to be driven top-down in the organisation. Mark Hawkins and his senior leadership team remain crucial to this agenda. They strive to ensure the open communication style that continues to be the DNA of the organisation to the benefit of all.

This report epitomises Rowcroft's core value of 'honesty and integrity'; it is open and unambiguous in style and very much a notable example of the hospice's drive for excellence in patient-led care.

Our Director of Patient Care has worked with the clinical teams to aspire to greater levels of teamwork in the ONE team approach. The teams have shown impressive levels of flexibility through some very difficult times across the Inpatient Unit, Community Team, and Hospice at Home Team – and their approach is a shining example of our value of 'team player'.

The Medical Team, led by our Medical Director, provides an excellent, flexible, professional and caring service ensuring that our patients and their families experience and make every day the best possible day for them. The experienced team continues to provide expert guidance to the medical training rotation programme. This is a wonderful example of the collaboration we experience across the healthcare partnerships within our community.

## Safety

With rising patient numbers and increased levels of staff shortages, the team have striven to operate and deliver our ambitious standards of care. This is a notable achievement given the tension between resource fatigue and the team's desire to deliver a quality, caring service.

It is pleasing to note the continuing success of the cycle of review of incidents and sharing of that learning across the clinical cadre.

I am delighted to see the full implementation of electronic prescribing and medicines administration with our medical records system (System One), facilitating our desire to increase our technological advantage in the clinical setting.

## Effective

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 introduction of the key patient information screen on System One, improved patient data collection and the number of diverse audits carried out. Moving forward the team will review the practicality of digital dictation and transcription which will facilitate the team's ability to enhance patient care.

## Responsive

The clinical team fosters an integrated approach to patient care through the development of the ONE team model, which has proven itself to be an exceptional success and highlights the team's desire to provide a professional and caring service to our valued community.

The clinical and medical teams work as one, reacting to the needs of our patients. They are ably supported by their colleagues from the other teams – including social work, catering, occupational therapy, physiotherapy, housekeeping, complementary therapy, bereavement support and spiritual care. It is a true exemplum of ONE Team.

The clinical strategy will continue to evolve to ensure we meet the ever-challenging and complex needs of an aging population.

The Education Team continues to deliver a wide range of learning opportunities for the Rowcroft team, as well as for care other health and social care professionals who can access a range of learning and development events. These are provided for free online or fee-based face-to-face. Alongside this, the success of the Ambassadors End-of-Life Care Programme further enhances the palliative and end-of-life care reach within the community.

It is heartening to see the drive towards career development and enhancement within the clinical spheres, and the success of our five newly qualified nurses as they move through the preceptorship programme.

## Caring

Our Inclusion Strategy is an exemplar of the commitment we have for fostering an environment where everyone is treated with respect, dignity and equity, regardless of their situation. I am proud of the equality, diversity and inclusion training which has been rolled out to all our staff. This is a continuous journey of learning and reflection for us to better equip our staff and volunteers to have those meaningful conversations and help remove perceived barriers to great care in the community.

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

The strong levels of great care are born from 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 Tech for Better Care project.

## Well-led

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

The Rowcroft's RISE (Reflect, Innovate, Suggest, Engage) initiative is now fully integrated in our day-to-day conversation and reviews and I am delighted with the launch of the further development RISE QI which drives continuous thinking around quality improvement, striving to ensure we consistently meet the evolving needs of our patients and their families.

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

The strategic leadership in palliative and end-of-life care is highly valued by the community we serve, as seen in the word cloud (7.2) within this report. This community support is very much appreciated by the Rowcroft team, and we are forever grateful for the diversity of that support in events, challenges, and fundraising activities – thank you.

My personal 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 amazed at their tenacity, forbearance, and selflessness that they show day in and day to 'help our patients to make every day the best day possible'.

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

### Sally Scott-Bryant

Chair of the Board of Trustees

# Stakeholder statements

## 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 2024/25. 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 2024/25 period.

Despite ongoing pressure on staff and services this Quality Account has highlighted progress against the priorities for 2024/25 which were aligned to the CQC inspection domains. Consolidating and building on the progress of the previous year, the goals included delivering expert, compassionate care to those living with life-limiting illness, while continuing to evolve, innovate and extend their reach across South Devon.

The 2024/25 priorities:

### **1. Safe**

**Implementation of electronic prescribing and medicines administration (EPMA) within the Inpatient Unit.** Rowcroft Hospice has fully implemented the EPMA and staff feedback has been overwhelmingly positive.



To implement an escalation activity tool within Vantage. A bespoke tool considering a wide range of factors has been developed to indicate pressures across the hospice. This includes staffing level, patient complexity and geographical location. This data allows for responsive planning and ensuring clinical safety is maintained. This will be piloted in the coming year.

## 2. Effective

**Improved data capture and visibility within patient records (including equality and diversity data).** A single key patient information screen has been tested and rolled out. This allows clinicians to view all intelligence in one place and supports personalised care.

**To explore the use of digital dictation and digital transcription.** This priority was understandably paused to allow the roll-out of e-prescribing in the Inpatient Unit. It is positive to see that this will be taken forward in 2025/26.

**Improved data collection of activity** has been achieved via an overview page within SystmOne.

## 3. Responsive

**To develop a ONE Clinical Team approach** by strengthening interdisciplinary working and aligning practices to deliver high standards of care. The strategic framework model for this will continue to evolve in response to need and will provide the governance to support staff.

**Continued commitment to non-medical prescribing** through events and education.

**To trial and seek to implement the use of text and email facilities within SystmOne.** This priority was paused for 2024/25 but will continue into 2025/26 and will allow enhanced communication where telephone contact is not possible.

## 4. Caring

**To roll out the Inclusion Strategy** which includes seven inclusive care priorities and equality, diversity and inclusion (EDI) training which will complement the aims to ensure everyone is treated with dignity, respect and equity. This has been completed in year 2024/25.

**The Tech For Better Care project** has started and a poster summarising the concept was chosen for display at the 2024 Hospice UK National Conference. In 2025/26 funding will be explored for the next stage of development.

## 5. Well-led

**Enhance quality improvement (QI) engagement in their teams,** building on the existing 'reflect, innovate, suggest, engage' (RISE) initiative which encouraged staff to use quality improvement methodology to drive enhancements in care. We look forward to seeing the impact of this in 2025/26.

**An in-house mock CQC assessment** has been undertaken in September 2024 and proved a positive learning experience for staff and teams.

The ICB welcomes the 2025/26 priorities outlined by Rowcroft Hospice in their Quality Account and will look forward to seeing achievements related to:

- 1 Safe – Continue their PSIRF journey and development of SystmOne and implementation of Brigid mobile working app**
- 2 Effective – Digital dictation and transcription for clinical teams and development of the Rowcroft faculty**
- 3 Responsive – Patient feedback and family involvement through the new clinical strategy and exploration of seven-day administrative cover in the Inpatient Unit**

**4 Caring – Inclusive patient experience survey****5 Well-led – Clinical educator post and clinical dementia lead role.**

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 and improvements achieved from 2024/25.

**Care Quality Commission (CQC) involvement:**

As a commissioner, we have worked closely with Rowcroft Hospice during 2024/25 and will continue to do so in respect of CQC reviews. The last CQC inspection was in October 2021 and Rowcroft Hospice achieved 'Good' in all categories resulting in an overall rating of 'Good'. The new CQC Single Assessment Framework has been embedded and strengthens Rowcroft Hospice's approaches to inspection.

On review of this Quality Account, the commitment of Rowcroft Hospice to continually improving the quality of care is evident. The ICB looks forward to working with the 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), 2025**

# Healthwatch Torbay

Healthwatch Torbay is part of Healthwatch in Devon, Plymouth and Torbay and is your local health and social care champion. We make sure NHS leaders and other decision makers hear the voice of local people and use this feedback to improve care.

It is always a privilege to be given the opportunity to comment on Rowcroft's ambitions and journey to excellence. This Quality Account has so much to celebrate. We acknowledge the progress made against the 2024/25 Quality account priorities. The work undertaken against these priorities should lead to better patient experiences.

The feedback given by patients and relatives also highlights the breadth of work both at the hospice and at home and is heart warming to read and it highlights the difference it has made to individuals during difficult times.

Healthwatch Torbay supports the key priorities for 2025/26 especially those that look to enhance and strengthen patient care and safety including the involvement of family to help shape service delivery and clinical strategy.

Healthwatch also look forward to continuing to work with Rowcroft Hospice as a critical friend around the future development of services. As services continue to become more integrated, it remains important to listen to patient feedback to ensure that patient journeys are positive and meet the expectations of patients.

## Healthwatch, 2025



# Torbay Carers

Torbay Carers is the organisation which supports family members and friends of people in Torbay affected by any disability, physical or mental health condition, addiction, long-term or terminal illness. (If people live in Devon County Council area, they can be supported by Devon Carers.)

This year Rowcroft has, as always, done amazing work supporting the people who directly use their services, but also the family members / friends who are an integral aspect of their support services – I can wholeheartedly say this from first-hand experience this year, when my mother-in-law was supported by Rowcroft's Hospice at Home service. All the staff who visited were caring, supportive and understanding. They answered all our questions and helped our family with awkward conversations and decisions. In the words of Rowcroft's Strategic Plan, they 'lived the values' that Rowcroft stands for.

Besides offering personal support, Rowcroft also continues to improve their on-line information. This includes their 'Planning for the Future Hub' with information about everything from starting conversations, wills and funerals to advance directives and treatment escalation plans. It is very easy to put these things off, but so important for everyone to do, even if you are in good health.

Torbay Carers are pleased to work in partnership with Rowcroft in its Commitment to Carers, to continually improve Torbay's support to family members of all ages.

**Torbay Carers, 2025**