



dovehouse
hospice



Quality Account

2024 - 2025

“Thank you so much for looking after our beautiful mam when we no longer could, we feel like we got a bit of extra time with her thanks to your care.”

Family member

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Part One: Overview



Statement from the Chief Executive, Chris Sadler

Welcome to our Quality Account for the year 2024/25. This report reflects our unwavering commitment to delivering compassionate, safe, and person-centred care to those nearing the end of life, and to the families and loved ones who need our vital support.

At the heart of everything we do is dignity, respect, and a deep recognition of each individual's unique journey. Over the past year, our team of healthcare professionals, dedicated support staff, volunteers, and partners have continued to uphold the highest standards of care, despite facing evolving challenges in health and social care environments.

This Quality Account offers transparency about our services, celebrates our achievements, acknowledges the areas where we strive to improve, and shares the voices of those we serve. Through collaboration, reflection, and continuous learning, we remain committed to enhancing and developing our services both at the hospice and in the community.

Thank you for taking the time to engage with this report. We hope it provides a meaningful insight into our mission and the impact of our work across Hull and the East Riding of Yorkshire.

Dove House Hospice Vision, Mission and Values

Dove House Hospice is based in Hull and serves the whole of the East Riding of Yorkshire region. For over 40 years we have provided specialist, personalised care for those dealing with a life limiting diagnosis and those approaching the very end of their lives, either in our Inpatient Unit or across Outpatient Clinics and groups. We also support the patient and their family with their emotional wellbeing, offer bereavement support, including a specialist service for children, as well as providing community groups to help overcome issues such as loneliness and social isolation.

Our Vision

Dove House Hospice has a vision, a vision that every adult within our community with a life limiting illness has the best quality of life possible, with easy access to high quality palliative care in the setting of their choosing.

Our Mission Statement

Dove House Hospice Limited exists to provide a range of specialist services for people with a life-threatening illness and those who care about them, in order to maintain and enhance their quality of life. This means that we will:

- Preserve the dignity of our patients and those who care about them, respecting their individuality, acting with honesty and integrity at all times.
- Continually strive to review and improve the services we offer to ensure that they meet the changing needs of the people of Hull and The East Riding of Yorkshire.
- Offer to share with others the knowledge and skills that are vested in our staff.

We were developed by the community, for the community and will continue to adapt our services to meet their needs.

Dove House Hospice cares for anyone over the age of 18 who is living with a progressive life limiting illness across Hull and the East Riding of Yorkshire. Providing holistic care, the hospice ensures that the patient and their family are the centre of all areas of care.

Our Values

United we will be: Passionate, Positive and Professional.

Everyone involved with Dove House Hospice, including Trustees, Staff, and Volunteers are proud to live and work by these values.

Introduction to Clinical Services

As Director of Clinical Services at Dove House Hospice I am proud to present this year's Quality Account, which highlights both the progress we have made and the challenges we have navigated. This report outlines our strategic approach to delivering high quality compassionate care amid a changing and often challenging health care landscape. The report reflects our ongoing commitment to deliver safe, effective, and compassionate care to patients and their families.



This has been a year of notable change and key challenges, but also one of progress and opportunity. Our clinical teams have remained focused on continuous improvement, staff development, and the delivery of high-quality, patient-centred care. The increase in patient demand and service capacity stands as a testament to the dedication and commitment demonstrated by our clinical staff.

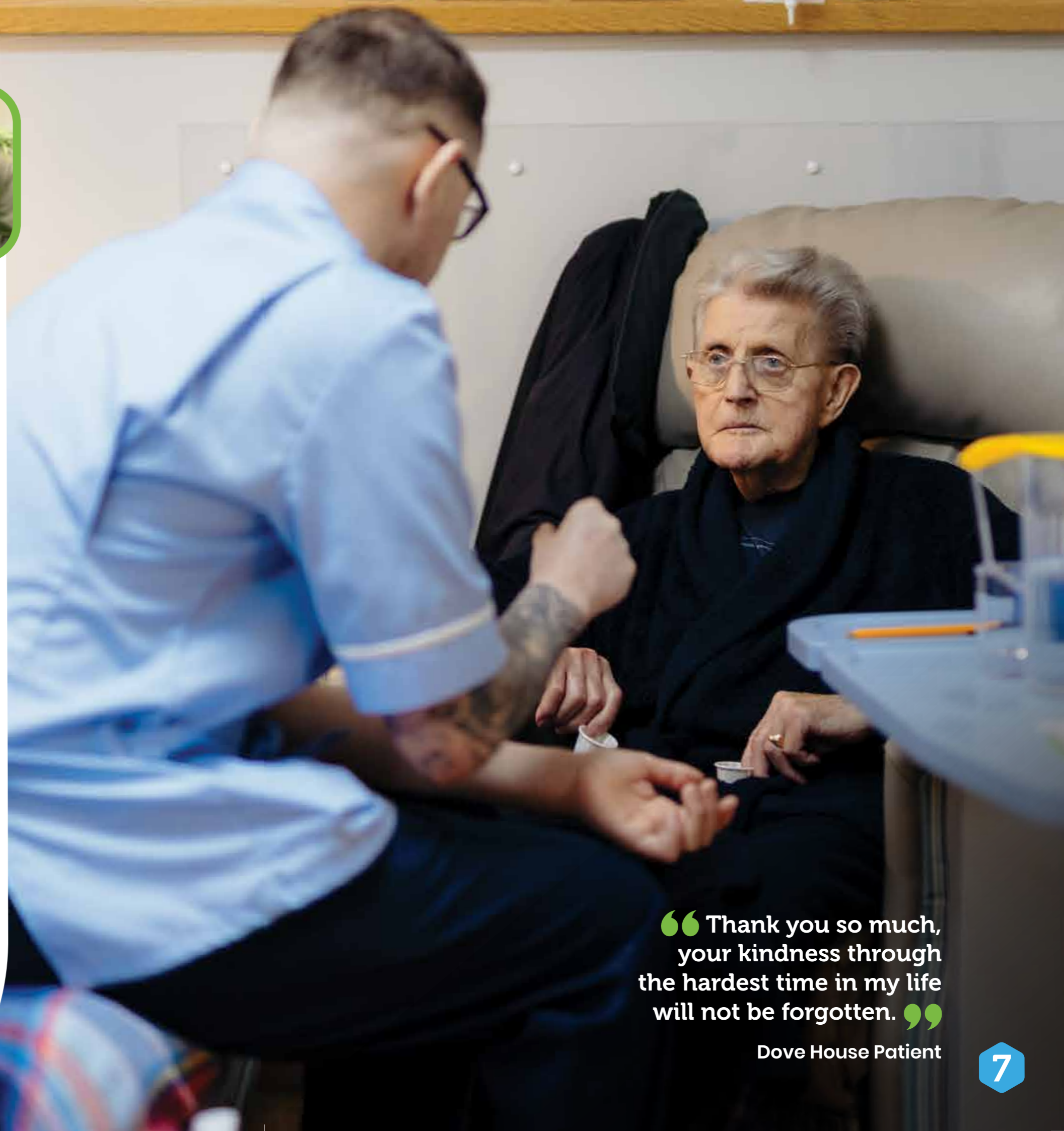
We have continued to align our clinical services with a forward-looking vision that embraces innovation, responsiveness, and sustainability. One of the key advancements has been the successful rollout of electronic prescribing, a milestone that enhances patient safety, improves workflow efficiency, and supports real-time clinical decision-making. This forms part of our wider digital transformation programme, which aims to future-proof our care delivery by optimising data management, communication, and clinical governance.

We have responded proactively to a significant rise in demand for our services, this growth reflects the increasing complexity of needs across our population and reinforces the importance of flexible care models. At the same time, we are navigating the realities of reduced funding, which have required us to prioritise resources carefully while safeguarding quality and equity of access.

To build capacity and resilience, we have strategically invested in recruiting new clinical staff and launched targeted training and development initiatives. These are designed not only to enhance clinical competence but also to nurture leadership, encourage innovation, and embed a culture of continuous improvement across all teams.

Looking ahead, our focus remains on delivering sustainable, person-centred care. We will continue to collaborate across sectors, harness technology, and develop our workforce to ensure that we can meet current and future needs while upholding the values that define our hospice.

I am proud of the professionalism, adaptability, and compassion demonstrated by our staff and volunteers throughout the year. Their commitment continues to drive our progress and strengthen our impact within the communities we serve.



“ Thank you so much, your kindness through the hardest time in my life will not be forgotten. ”

Dove House Patient

Part Two: Our Services



Our Activity

Dove House Hospice is a local charity dedicated to providing exceptional care and support, completely free of charge to patients, their families, and carers. Based in Hull and surrounded by tranquil gardens, the hospice offers Inpatient Unit care for respite, pain, symptom management, and end of life support.

The needs of patients and families across Hull and the East Riding of Yorkshire are growing rapidly, we continue to respond with compassion and determination. Over the last year alone the hospice has acted decisively to meet this demand expanding capacity, adapting services, and recruiting specialist

	2023/24	2024/25	Growth
Bed Occupancy	4530	5363	18%
Available Bed Days	5333	6488	22%
Bed Occupancy Capacity	85%	83%	2%
Admissions	434	469	8%

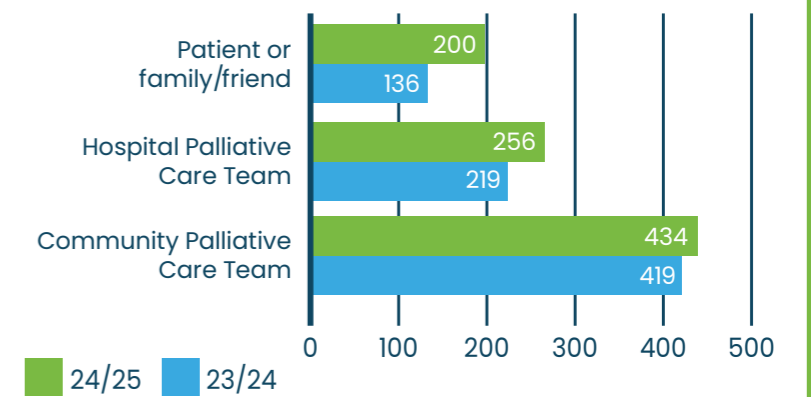
31%
increase in online referrals

48%
Patients with non-cancer diagnosis

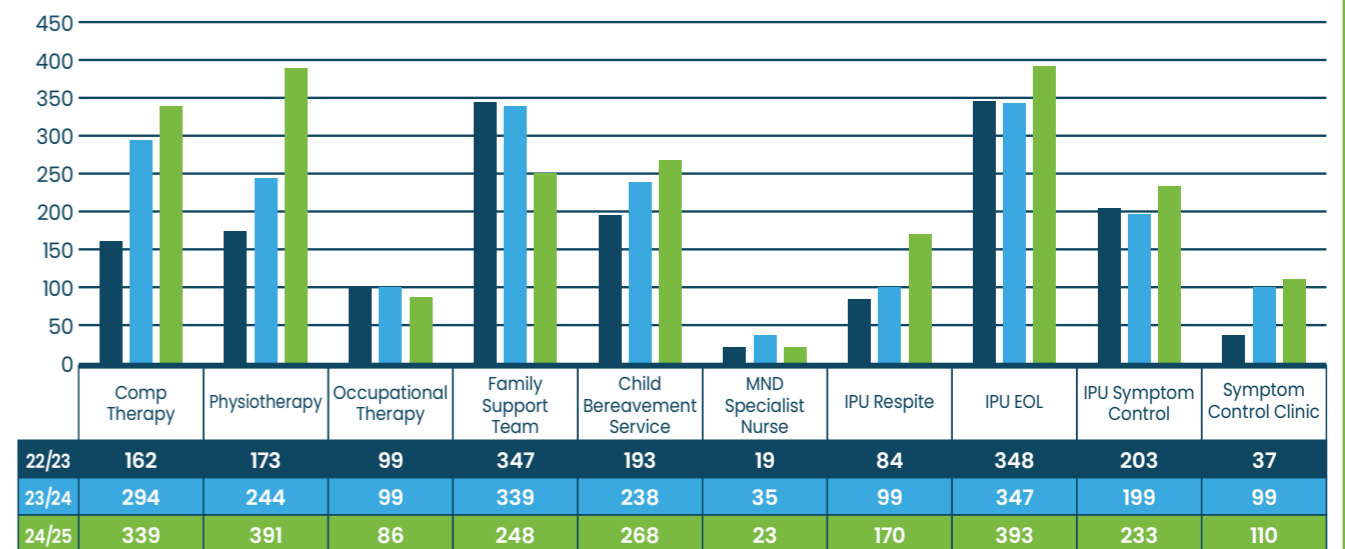
18%
increase in referrals since 23/24

2151
Total referrals to Dove House

External Referral Sources



Service Referrals 2022 - 2025



Our Services

Inpatient Unit

Our Inpatient Unit provides care for respite, pain, symptom management, and end-of-life support for the whole of the East Riding of Yorkshire region. A multidisciplinary team delivers holistic 24-hour Consultant led care, physiotherapy, occupational therapy, and complementary treatments, enabling patients to maintain comfort and independence for as long as possible.

Over the past year, our Inpatient Unit (IPU) has continued to provide high-quality, compassionate care to patients and families. Despite operational challenges, we have made meaningful progress in service development, safety, and staff engagement.

This year saw the successful launch of electronic prescribing and we are starting to see the benefits of this with improved communication and enhanced audit capability. We have initiated planning for digital care records integrating into systmone. The team have embraced local Quality Improvement projects focusing on pressure ulcer prevention, and medication safety.

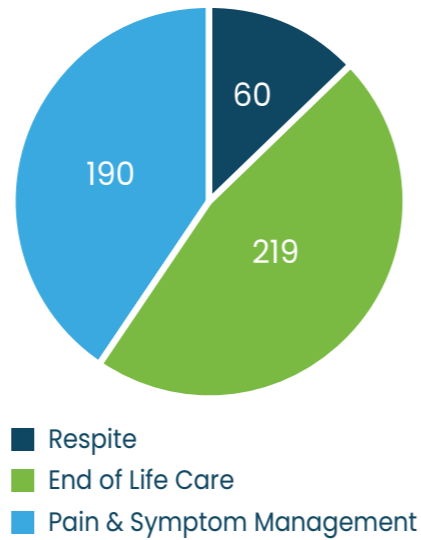
Recognising the significance of personalised experiences our teams have continued to arrange memorable events for patients throughout the year. These have included a wedding ceremony within the hospice, movie nights, family BBQs and other patient and family centred activities.

In support of our strategic priorities and operational plan for 2024/25, we have made some improvements to the Unit. This investment reflects our continued commitment to enhancing the environment for both patients and carers. Feedback from service users and staff remains central to our improvement plans, we have responded by upgrading equipment and resources to uphold a consistently high standard of care.

To strengthen clinical capability, we appointed an experienced Clinical Educator Lead who has led a comprehensive review of our nursing staff skills and competencies. This has supported professional development and enabled the team to expand their clinical expertise in line with patient needs. We are pleased to report that mandatory training compliance remains consistently above the agreed performance thresholds.

A workforce review undertaken has resulted in increased staffing ratios across the Unit. This has enabled us to maintain a stable bed capacity, ensuring timely access to services for patients referred from both the acute trust and community. Furthermore, through collaborative work with the Integrated Care Board (ICB), the hospice has supported the wider health and care system by contributing to a winter bed capacity initiative during peak seasonal pressures.

Admissions



469 Inpatient Admissions

9 Average days stay on Inpatient Unit

83% average occupancy

3 Days waiting time for admission

62% of Inpatients were from Hull

38% of Inpatients were from the East Riding



Claire

My mum's Story

“Caring for Mum had suddenly become very full on and unmanageable, so our Macmillan nurse managed to get her a place at Dove House Hospice. This was such a weight lifted as we knew they would give her the care she needed.

Everything was amazing at the hospice, they talked to Mum and us about how they would plan her care, pain management, and how they would support us as a family.

Receiving the support we got from Dove House honestly changed our story; from struggling, to being able to be Mum's daughters again. For our Dad to be her husband, and her friends to see her in such a loving and warm environment. Dove House became a home from home for us; we were able to use the kitchen facilities as much as we wanted to, and we were even given beds to stay with our mum in her room, but also able to stay in the Family Suites upstairs, which let us take time for ourselves and to recharge to spend time with Mum.

We only had 14 weeks with Mum from her diagnosis. The support and compassion given to our family and others families will stay with us forever. ”

Family Support and Child Bereavement Services

Family Support Services

The Family Support Team has continued to deliver compassionate, person-centred care to individuals and their families, providing emotional and psychological support throughout the pre-bereavement and bereavement journey. Support is offered across a range of settings and is tailored to individual needs through a combination of one-to-one sessions and group support. These interventions aim to promote emotional resilience, reduce isolation, and ensure that families feel supported during what is often a profoundly difficult time.

Due to workforce challenges, it was necessary to temporarily reduce our services for a period of three months last year. During this time, we remained committed to supporting carers and ensured continuity of care through effective signposting to other available services within the hospice. This included access to our Welcome Wednesday Bereavement Café, Carers' Wellbeing Clinic, as well as the provision of complementary therapies to support emotional and physical well-being while individuals awaited face-to-face services. These measures helped to maintain engagement and provide meaningful support during a period of service disruption.

We remain committed in developing bereavement services within the community and have actively participated in an Integrated Care Board (ICB) working group specifically focused on the development and alignment of bereavement services. This collaborative approach aims to ensure consistent, high-quality support for individuals and families across the wider health and care system.

Family Support Team	22/23	23/24	24/25
Referrals	347	339	248
Contacts	3216	3649	2834

132 People supported by Friday Friends

85 People attended Welcome Wednesdays

2834 Contacts to adults and children from the Family Support Team

248 People referred to the Family Support Team



Tommy
My Story

“ My mum died through suicide when she was 48 years old. My brother and I were only 17 and 14 years old. I was overwhelmed with shock and depression not knowing what would happen next.

I didn't feel like I could talk about my mum dying that much at the time, I just bottled everything up. I couldn't even bring myself to think about it, it was just too hard. It was hard to describe what I was feeling, and I didn't know how to put it into words. I didn't know anyone like me or who was going through anything like it. It felt really isolating.

The first time I came to see Jill from the Children's Bereavement Team I didn't know what to expect. In the back of my mind, I was a little nervous. But she allowed me time, in a safe space to share what was going on for me. I could open up and say what I needed to say. My brother and I have both had two sessions, and we both found them really beneficial. We both learnt the value of opening up and talking about feelings that we wouldn't usually share, making us both feel like we had taken a lot of weight of ourselves.

I have noticed a huge difference since accessing the support the hospice offers. It was challenging to even think about mum before, but I don't feel like that now. ”

Child Bereavement Service

Child Bereavement	22/23	23/24	24/25
Referrals	193	238	268
Groups	9	12	17

268 Referrals to the Children's Bereavement Groups

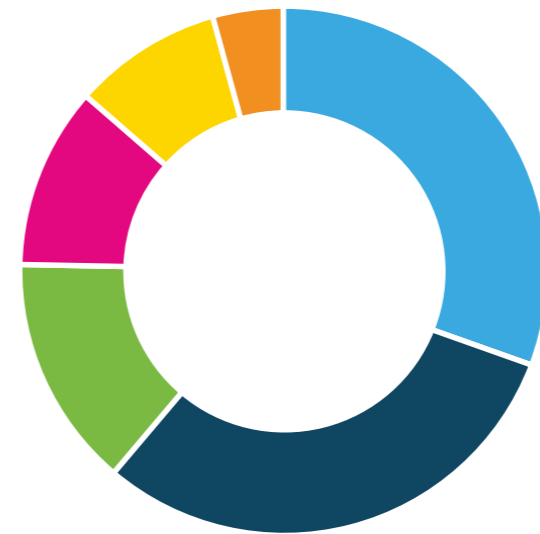
The Child Bereavement Team provide specialist care to bereaved children and young people across Hull and the East Riding of Yorkshire. Through one-to-one therapy, group sessions, and peer support, the service helps children to develop coping strategies, build emotional resilience, and process their grief in a safe, supportive environment. The service has built a strong reputation as a trusted, expert-led provider of bereavement care for young people.

Demand for the service continues to grow, with a steady year-on-year increase in referrals. This rise reflects both the growing awareness of our work and the escalating need for specialist support. Many referrals involve complex and sensitive situations, including bereavement by suicide, traumatic and unexpected deaths, and an increasing number of neurodiverse children and those living in challenging home environments.

In response, we have expanded our capacity, now running four bereavement support groups per week. These groups, delivered in schools across Hull and East Yorkshire, have received overwhelmingly positive feedback from both students and staff. Attendance remains consistently high, underscoring the essential role of school-based support in helping young people navigate grief in familiar, accessible settings.

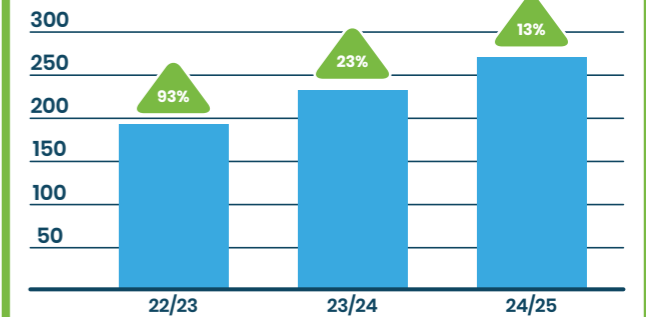
This year we recognised a need to provide support to younger children, we are proud to have been able to extend our reach to include three additional primary schools, marking a key step in supporting younger children at earlier stages of grief. Additionally, our team participated in Dying Matters Awareness Week, engaging with the public in hospital foyers to encourage open, compassionate conversations around death and bereavement.

Child Bereavement Referral Types

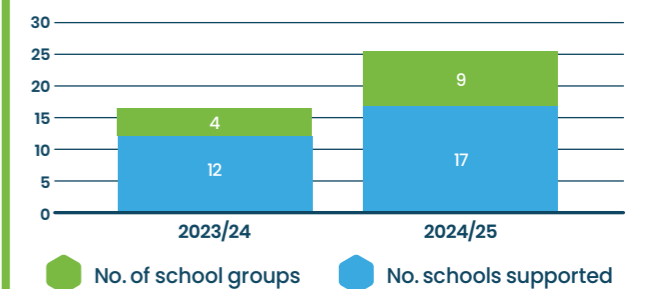


■ Palliative ■ Traumatic ■ Other
■ Sudden ■ Suicide ■ Expected

Child Bereavement Referrals by Year



Schools Supported



Therapies and Wellbeing

The Therapy team have actively embraced, promoted, and championed a culture of patient safety, consistently seeking strategies to minimise the risk of patient harm. There has been a strong focus on introducing new equipment and resources tailored to enhance patient safety and wellbeing.

The service continues to see an increase in the number of referrals and has demonstrated resilience and agility in delivering the increase in demand.

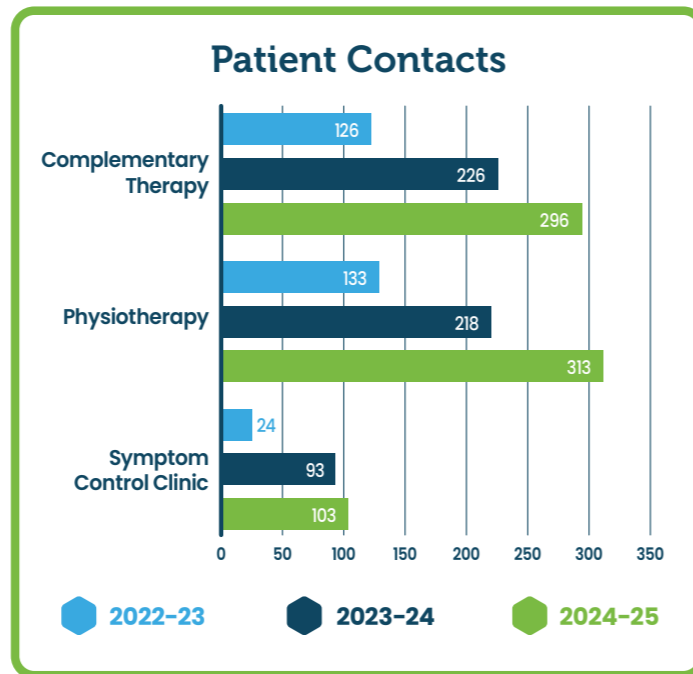
Our Complementary Therapists have expanded their reach, offering relaxation and mindfulness opportunities not only within our in-patient services but also in outpatient clinics ensuring that both patients and carers have time to relax and recharge.

The Carers Wellbeing Service continues to grow, receiving overwhelmingly positive feedback for its evolving support offerings. Additionally, the Living Well Group has become a cornerstone of our service, helping individuals navigate life's challenges through interactive and meaningful activities that promote wellbeing and resilience.

292
Physiotherapy
assessments
provided

23
Living Well
Group
sessions

83 Complementary
Therapy Assessments



Kathryn My Story

I was receiving treatment for breast cancer when I found out about the Living Well Group at Dove House and wondered if it would help me.

The first time I went, I was very nervous and apprehensive, but I needn't have worried. The staff were very warm and welcoming, and I very quickly felt comfortable and part of the group. I loved the skills and tools we were, week by week, being given under the guidance of the staff - relaxation, meditation, exercise, and mindfulness through craft. Each session I left feeling better than when I arrived.

I believe that attending the Living Well Group has better equipped me to deal with the more unpleasant side effects of the medication/my condition and has helped build my confidence again. The hospice has helped me become more like 'me' again and improved my quality of life.



Medical Teams

We have continued to invest in the future of palliative care by providing education, mentorship, and clinical supervision to GP specialist trainees. Our team remains committed to supporting medical students on observational placements, helping to build confidence, competence, and understanding of palliative care within the wider healthcare workforce.

We also benefit from strong cross-organisational clinical collaboration. Our Consultant Teams work across both the community and the Acute Trust, ensuring consistency of care, shared learning, and a more integrated approach to specialist palliative care delivery.

Motor Neurone Specialist Nurse

201 Home visits by
the MND nurse

With an increasing number of referrals for people with complex neurological conditions such as Motor Neurone Disease (MND), the hospice is working to strengthen tailored support for these patients and their families. Dove House already provides coordinated care through a dedicated MND Community Support Nurse, who supports more than 50 patients across Hull and East Yorkshire.



Volunteers

770 people volunteer
for Dove House Hospice

285 volunteers recruited
in 2024/25

Volunteers continue to play a vital role in supporting the delivery of safe, effective, and compassionate care across our clinical services. As an integral part of the healthcare team, volunteers enhance the patient experience, contribute to improved clinical outcomes, and enable staff to focus on direct clinical care by providing essential non-clinical support.

Volunteers have supported clinical teams by providing practical assistance such as guiding patients and relatives around the hospice, assisting with mealtimes, and offering comfort to patients and their loved ones during periods of anxiety and distress.

In addition, our volunteers are central to the success of our Friday Friends and Welcome Wednesday groups, where they support the coordination and running of the sessions, offering a warm, welcoming presence that helps foster a strong sense of community and connection.

Feedback from both patients and staff consistently highlights the positive impact of volunteer involvement. Patients report feeling more supported and reassured, while staff recognise volunteers as valued members of the multidisciplinary team.

This year has also seen a new initiative, with one of our IPU Sisters taking a more active role in overseeing the Clinical Service Volunteers, leading recruitment, training, and providing regular supervision. This approach has been well received by the volunteers, who report feeling more supported and connected to the wider clinical team as a result.

“ I have had lots of lovely moments at the hospice and I am proud to be able to make someone's day a little brighter with a cup of tea, a smile, or a soothing word or two. Volunteering is a wonderful opportunity, and I get to be part of it. With every cuppa I bring a little comfort into someone's hardest days. It's not just bringing the tea, it's so much more than that. ”

– Bernard
Inpatient Unit Volunteer

Part Three: Our Strategy

Achievements against Clinical Objectives 2024-25

Objective 1: We said we would continue to Deliver Safe, High-Quality Care

Over the past year, we have implemented a range of improvements aimed at strengthening patient safety, enhancing clinical effectiveness, and maintaining consistently high standards across our services. Key achievements include:

- Introduced consistent quality measures and agreed KPIs with commissioners.
- Implemented electronic prescribing.
- Enhanced feedback mechanisms, including in-patient and bereavement surveys.
- Developed BI reporting tools for service data analysis.

These initiatives demonstrate our ongoing commitment to delivering safe, responsive, and person-centred care. They also provide a strong foundation for further quality improvements in the year ahead.

Objective 2: We said we would Optimise the Hospice Environment

Creating a safe, welcoming, and therapeutic environment remains central to our approach to high-quality care. Over the past year, we have made significant investments in our facilities and resources to ensure they meet the needs of patients, families, and staff, while aligning with best practice in infection prevention and control (IPC), accessibility, and patient comfort. Key achievements include:

- Refurbished the Inpatient Unit for a brighter, IPC-compliant, and more peaceful care setting.
- Invested in initiatives to enhance the experience of patients and their families.
- Increased counselling rooms to support our bereavement services.
- Increased the number of specialist equipment including falls prevention beds and pressure-relieving mattresses.

Objective 3: We said we would Increasing Capacity and Reach

In response to rising demand and the needs of our local health and care system, we have expanded our service capacity and strengthened our ability to provide timely, high-quality care to more people across Hull and the East Riding of Yorkshire. Our efforts this year have focused on both increasing inpatient availability and supporting system-wide pressures. Key achievements include:

- Achieved an 18% increase in bed occupancy and 22% increase in available beds in 2024-25.
- Realised an 8% increase in admissions.
- Saved an additional 240 acute hospital bed days during winter through a system-supporting winter capacity model.

These outcomes demonstrate our continued commitment to providing accessible, responsive care and playing an active role in supporting the broader health and care landscape.

Quality Priorities for 2025/26

We have completed our annual review of the principles of our strategy, the foundational assumptions remain unchanged, however we have developed key objectives which are contained in our operational plan that are relevant, adaptable and aligned to emerging needs.

Clinical Goals 2025/26:

1. Deliver excellent care and support that is responsive to the needs of patients and their families in their preferred place.

- Foster a culture of learning, reflection, and accountability.
- Establish key performance indicators to monitor clinical outcomes, patient experience and the effectiveness of our service.

2. Improve Access and Reach

- Develop outreach / In reach models and referral campaigns in partnership with local services
- Use data to analyse demand profiles and service provision, directing our attention to address any shortcomings.

3. Excellence in Care and Training

- Establish the hospice as a recognised Centre of Excellence for End-of-Life Education, delivering evidence-based training that enhances skills and builds confidence and capability across health and community care settings.

4. Engagement and Partnership

- Build integrated, collaborative partnerships with health, care, and community services.
- Support the wider Health care system in reducing hospital admissions by developing support to partners and the community,

5. Digital Innovation

- Develop a clinical strategy which embeds digital technologies into everything we do, supporting decision making and enhancing patient outcomes.
- Use technology to enhance clinical decision-making, patient engagement and service coordination






We held a wedding in the York Room.



Part Four: Quality of Services

Quality, Audit, and Improvement



“ From the moment we arrived, we felt welcomed, not frightened or worried, we knew our dad was in the best place for the right care he needed. ”



We are committed to delivering high-quality, safe, and effective care, underpinned by continuous quality improvement and robust clinical governance. The care we provide is monitored through key quality indicators, including the review of patient records, incident analysis, and the identification of trends. This approach ensures we are proactive in identifying areas for improvement and responsive to the needs of patients, families, and staff.

Over the past two years, we have worked closely with the Improvement Academy to support a focus on teamwork and safety within our Inpatient Unit. This collaboration was revisited in October 2024, following the implementation of the MDT safety huddles, and produced measurable improvements:

“ My life has been chaos, now I am feeling calm for the first time in a long time. ”


Doctor brought their dog in for a dog loving patient to cuddle.



Throughout this year, we have actively listened to patients and staff and learned from clinical incidents, using these insights to shape our educational programme and improve practice. A monthly Clinical Incident and Quality Report, produced by the Clinical Team, highlights emerging themes, lessons learned, and actions taken to enhance patient care and safety. Additionally, a Quality Service Report is presented at each bi-monthly Board of Trustees meeting, ensuring strategic oversight and accountability.

- Patient Falls: The average number of days between inpatient falls increased from 5.7 days to 13.1 days, with a notable achievement of 63 consecutive days without a fall
- Safety Culture: Post-huddle staff surveys (August–October 2024) showed improvement in 24 out of 32 safety culture questions compared to the baseline survey conducted in May 2023.
- Staff Morale: There was a marked increase in job satisfaction, with 100% of staff reporting they are “proud to be part of the team” and that it “feels like being part of a large family.”
- Perception of Safety: 91% of respondents rated patient safety in the hospice as ‘very good’ or ‘excellent’, compared to 71% in the pre-huddle survey.



“ She absolutely loved all of you and how you treated her still keeping her spirits high and laughing with her every day. ”



Our Clinical Quality and Improvement Group has gone from strength to strength this year, successfully completing and presenting 29 clinical audits. These audits have supported service evaluation, highlighted areas of good practice, and informed changes to improve patient outcomes.

These achievements reflect the positive impact of embedding structured quality improvement practices and fostering a culture of shared learning and collaboration. As we look ahead, we remain dedicated to building on this progress to ensure our patients receive the highest standard of care in a safe, compassionate, and supportive environment.



“ I know it is your job to help people who are grieving but you saved me I think. ”


Opera singers visited the Inpatient Unit.



Research

We continue to remain a research active Unit having close links with the Wolfson Palliative Care Research Centre at Hull University contributing to both the SUPPORTED study and providing comparative data and benchmarking for IPOS over the last year.

IPOS

Outcome Measurement provides information that support us in assessing and monitoring changes in the wellbeing of our patients. The outcome measures we use in the palliative setting include the following:

- Palliative Phase of Illness, a measure which describes the urgency of care needs for a person receiving palliative care. It considers the care needs of both patient and family.
- Australia-modified Karnofsky Performance Scale (AKPS), a measure of the patient's functional status or ability to perform their activities of daily living.
- Integrated Palliative care Outcome Scale (IPOS), a family of tools to measure the symptoms and other concerns which patients affected by advanced illness most often report.

We have continued to improve our use of the outcome measures to identify and address individual patient's symptoms control needs as well as monitor symptoms changes and treatment over time. This year we have recorded 100% of the first and second outcome measurements for every patient admitted to the Inpatient Unit.

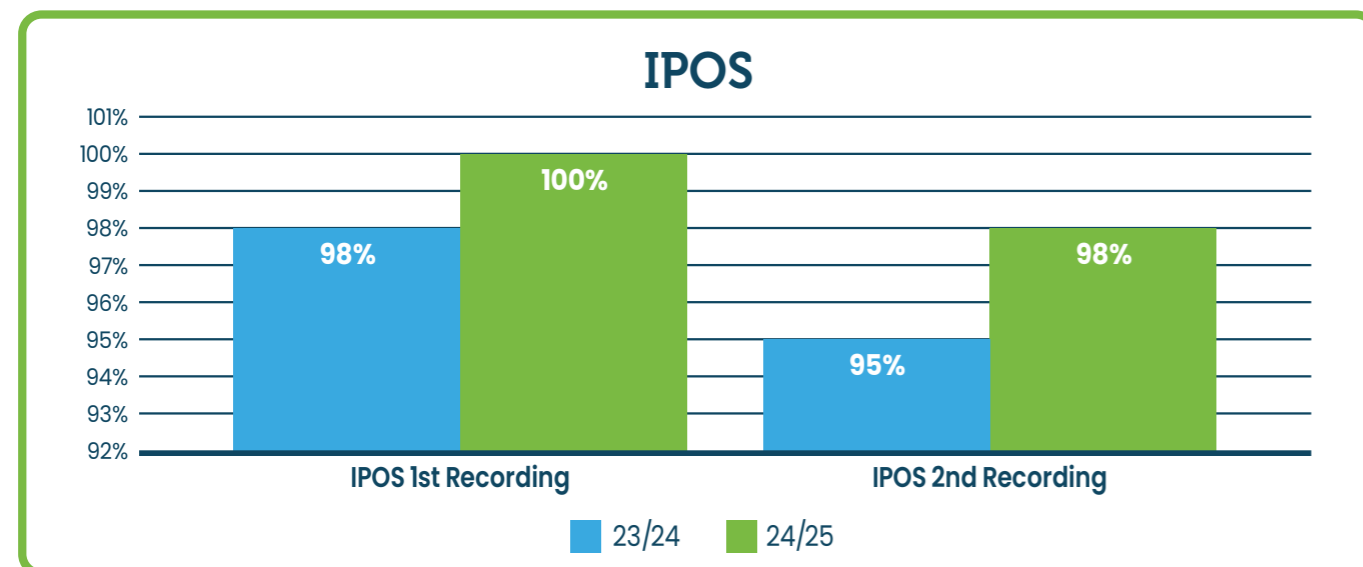
Looking forward we will focus on how this information can support us to gain a better understanding of the needs and complexities of our caseloads. We have collaborated closely with Professor Fliss Murtagh at the Wolfson Palliative Care Research Centre (Hull York Medical School) and will continue to be guided by the research to further develop the care we provide.

CHELsea II Study Participation Summary

We have continued working with Surrey University clinical trials unit as a site for the CHELsea II study. We were one of 88 sites who collected data looking at the impact of subcutaneous fluid on patients who were expected to be in their last week of life and the main outcome assessed was the presence or absence of delirium. It compared the usual end of life care such as giving the patients regular mouth care and management of symptoms (Group A) with giving fluid by a drip in addition to the usual care given in group A (Group B). We were assigned to Group B and one of only 6 sites to recruit 30 patients.

Through our participation in the CHELsea II study, we have achieved the following:

- Developed shared learning on the setup and delivery of a clinical trial, particularly regarding patient recruitment in a hospice setting.
- Provided opportunities for patients and their families to contribute to important research.
- Gained confidence in our ability to participate in and conduct clinical trials within our hospice.
- Helped foster and promote a positive research culture across our organisation.



Incident Reporting and Learning

All events that result in or have the potential to result in harm are recorded using our electronic risk management system (Vantage). This system supports real-time reporting, enabling prompt review and early intervention where necessary.

Each incident is assessed and rated according to the level of actual or potential harm. Any incidents rated as moderate or severe are subject to a detailed review and are reported to the Care Quality Commission (CQC) in line with regulatory requirements.

Learning from incidents is shared across the organisation through a range of communication channels, including daily safety huddles, team meetings, and clinical forums, ensuring that key messages are cascaded effectively and embedded into practice to support continuous learning and improvement.

We reported 318 clinical incidents during 2024/25. 94 of these incidents related to events that occurred externally to the hospice demonstrating our shared responsibility across the wider healthcare system and our commitment to transparency and patient safety.

Incident Category	2022/23	2023/24	2024/25
Notifiable Patient safety Incidents	1	0	1
Medicine Incidents Moderate +	0	1	0
Falls	38	24	15
Inherited Pressure Ulcers	65	44	94
Newly Acquired Pressure Ulcers Moderate + harm	46	42	75
Overall Incidents	159	185	318



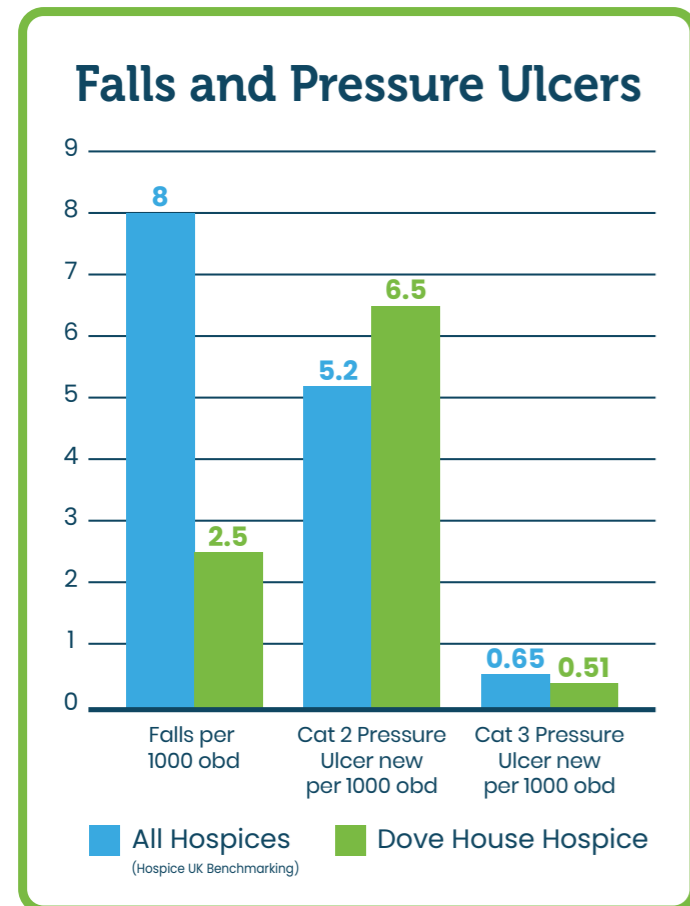
Reducing Patient Falls

We are committed to our ongoing efforts to reduce the number of patients falls wherever possible, as part of our wider patient safety strategy. During 2024/25, we have seen a further reduction in the total number of falls which is suggestive of the positive impact of the ongoing quality improvement work, none of the patients falls have resulted in moderate or severe harm. We are proud that our results compare very favourably with those of other hospices.

A key initiative supporting this improvement has been the continued use of the Falls Risk Assessment Tool (FRAT), which helps to accurately identify patients at an elevated risk of falling and enables timely intervention. Our physiotherapy team has played a vital role in assessing patients' mobility and equipment needs, ensuring the right support is provided promptly.

In addition, we have continued to submit funding applications, which has enabled the purchase of three further specialist falls beds. These beds provide enhanced safety features that help to reduce the risk of injury from falls, particularly among our most vulnerable patients.

We remain focused on sustaining and building on this progress in the coming year.



Pressure Ulcers

This year, we have seen an increase in reported pressure ulcers, some of which were present on admission due to pre-existing skin damage. We complete investigations for all pressure ulcers acquired in our care and lessons learned are shared with the clinical teams.

We have continued to deliver on our improvement plan, which has included the purchase of five acute mattresses for patients identified as being at high risk of developing skin damage. In addition, new documentation based on the aSSKING framework has been introduced to support the prevention and management of pressure ulcers.

Further improvement work is planned for 2025/2026, including the implementation of the Purpose T risk assessment tool and the development of an education programme. This will feature tailored bedside assessments and training resources aligned with recommendations from the NHS Wound Care Strategy to support safer, evidence-based practice.

Medication Management

To ensure safe working practices, we continue to conduct regular medicines audits throughout the year, including the Self-Assessment Audit for Controlled Drug Accountable Officers (CDAO). The CQC Controlled Drug assessment tool has been used to identify any gaps in medicines management, with action plans developed, closely monitored, and shared with relevant teams.

This year, we observed an increase in reported medication incidents. Reassuringly, 80% of these resulted in no harm, and 20% caused only low-level harm. A thematic review of these incidents has been completed, leading to an improvement programme. This includes reinforcing safe medicine practices, developing a medicines incident management policy, providing one-to-one training delivered by the Clinical Education Lead, and implementing environmental changes to support safe medication storage.

To support the review and implementation of our medicine's procedures and processes, we have collaborated closely with the acute trust to secure a contract that increases pharmacist cover and includes the addition of a pharmacy assistant and technician.

Safeguarding

We remain fully committed to safeguarding the welfare of all individuals in our services. Safeguarding continues to be a priority across the hospice with clear governance structures and processes in place to identify and respond to concerns promptly and appropriately. During 2024/2025, all staff received safeguarding training appropriate to their role with compliance monitored regularly. Our safeguarding training, policies and procedures were reviewed and updated in line with national guidance. We continue to work closely with partner agencies and local safeguarding boards to ensure our practices reflect the current best practice.

Infection Prevention and Control

Infection Prevention and Control (IPC) remains a critical priority for the hospice in ensuring the safety and wellbeing of patients, families, staff, and visitors at our hospice. We are committed to maintaining high standards of hygiene and infection control across all areas of our service.

During 2024/2025:

- We continued to implement and monitor compliance with our IPC policies, in line with national guidance and best practice.
- Regular IPC audits were carried out, including hand hygiene audits, cleaning audits, and environmental checks, with action plans developed and monitored where needed.
- We revised our policy and process in the management of respiratory infections to support early identification and management of infection risks, including isolation and testing protocols in line with UK Health Security Agency.
- Worked closely with local health protection teams and the Integrated Care Board (ICB) to ensure coordination and responsiveness to a seasonal outbreak.
- Visitors were supported to follow IPC protocols to reduce the risk of transmission while maintaining a compassionate and welcoming environment.



Patient and Service User Experience

We remain committed to continuously improving our services, guided not only by the identification of needs but also by the invaluable insights we receive from our patients, families, and service users.

To understand and respond to the experiences of those we care for, we have developed multiple platforms for gathering feedback. These include:

- Patient and Family Surveys: Tailored questionnaires are offered during and after care to capture thoughts on symptom management, communication, emotional support, and overall satisfaction.
- Informal Conversations: Staff are encouraged to engage in open and compassionate dialogue with patients and families to understand their needs and expectations in real time.
- Bereavement Follow-up Feedback: After the loss of a loved one, families are invited to share reflections on the care provided and the support they received.
- Professional Feedback; Feedback gathering from teachers following group child bereavement sessions.
- Bespoke Surveys; adapted to support and analyse specific services to inform service delivery.
- Compliments, Concerns and Complaints Process: We promote a transparent culture where all types of feedback are welcomed and used as learning opportunities.

This multi-faceted approach ensures that we capture the voices of everyone who access our services, including those who may face barriers to traditional feedback methods. Insights gathered are reviewed regularly and used to shape staff training, improve communication, and enhance the quality of care across our hospice services.

In collaboration with the marketing team, we have a structured process for sharing patient stories to highlight loved one's experiences, celebrating good practice and promoting learning. We are committed to further developing how we capture and act on experiences; our priorities for the coming year include:

- Further developing our Patient Experience Survey
- Expanding our use of real time feedback

Complaints

During 2024/25, clinical services received two formal complaints.

One of the concerns was anonymous and raised externally regarding the alleged use of inappropriate terminology by a member of staff. The hospice responded promptly and proportionately.

While complaint volumes remain low, the hospice continues to prioritise quality improvement and a culture of openness. Complaints, regardless of scale, are viewed as a critical tool for enhancing patient and family experience.

Compliments and Positive Feedback

The hospice has received 198 compliments from patients, families, and service users this year reflecting the dedication, compassion, and professionalism of our staff and volunteers



“ From the moment we arrived, we felt welcomed, not frightened or worried, we knew our dad was in the best place for the right care he needed. ”

Family member

Part Five: Governance and Compliance

Care Quality Commission

Regulated by



Dove House Hospice is regulated by the Care Quality Commission (CQC). We work closely with the CQC to ensure that our services consistently provide safe, effective, compassionate, and high-quality care, underpinned by a commitment to continuous improvement.

We had our last inspection by the CQC in 2023 and maintained a Good overall rating, the report published and provided the following result:

Is the service safe
Good

Is the service caring
Outstanding

Is the service responsive
Good

Is the service effective
Good

Is the service well-led
Good

Highlights of the summary report include:

- The service had enough staff to care for patients and keep them safe. Staff had training in key skills, understood how to protect patients from abuse and managed well. The service managed infection risk well. Staff assessed risks to patients, acted on them and kept good care records. They managed medicines well. The service managed safety incidents well and learned lessons from them.
- Staff provided good care and treatment, gave patients enough to eat and drink, and gave them pain relief when they needed it. Managers monitored the effectiveness of the service and made sure staff were competent. Staff worked well together for the benefit of patients, supported them to make decisions about their care and had access to good information. Key services were available seven days a week.
- Staff treated patients with compassion and kindness, respected their privacy and dignity, took account of their individual needs, and helped them understand their conditions. They provided emotional support to patients, families, and carers.
- The service planned care to meet the needs of local people, took account of patients' individual needs, and made it easy for people to give feedback. People could access the service when they needed it.
- Leaders ran services well using reliable information systems and supported staff to develop their skills. Staff understood the service's vision and values, and how to apply them in their work. Staff felt respected, supported and valued. They were focused on the needs of patients.

The last full inspection for the hospice is available at

 dovehouse.org.uk/resources

Duty of Candour

We are committed to being open and transparent in all aspects of care, and we foster a culture that encourages incident reporting and honesty when things go wrong. Staff understand the importance of reporting incidents as a key driver for learning and service improvement.

This year, we delivered face-to-face training to all staff within the Inpatient Unit (IPU), reinforcing our revised guidance on incident reporting and Duty of Candour requirements. We are pleased to report that there have been no formal Duty of Candour cases in 2024/25.

GDPR Compliance

We remain committed to maintaining strong compliance with UK GDPR requirements and data protection standards. This year, we successfully submitted our NHS Data Security and Protection Toolkit, demonstrating our continued focus on safeguarding personal and sensitive information.

Freedom to Speak Up

Dove House Hospice encourages all staff to raise concerns about risks, malpractice, or wrongdoing that could impact the safety or quality of the care we provide. We are committed to fostering a culture of openness, transparency, and psychological safety.

This year, we appointed a further Freedom to Speak Up Guardian to increase the accessibility for staff and provide a confidential route to voice their concerns. We continue to promote awareness of the Freedom to Speak Up role through internal communications, staff training and with our Freedom to Speak Up Guardian presenting at our Hospice induction days, reinforcing our commitment to listening, learning, and continuous improvement.





We hope this Quality Account provides assurance to our patients, families, partners, and stakeholders of our ongoing commitment to safe, compassionate, and high-quality hospice care.

Over the past year, we have faced challenges with resilience, responded with compassion, and continued to place the needs and dignity of those we care for at the centre of everything we do. We are incredibly proud of the dedication shown by our staff and volunteers, whose wholehearted commitment has allowed us to continue delivering meaningful, compassionate care.

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