



**dovehouse
hospice**

caring for people with a life limiting illness



Quality Account

2022 - 2023

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Welcome

Our Quality Account is guided by the standards and domains stated by the Care Quality Commission, but we remain committed by our own high standards and expectations on quality across all our care services. The focus of this work is delivered through our Quality, Compliance and Improvement Group which provides the impetus and helps steer the narrative on quality throughout all areas of the organisation. The term quality is intrinsically linked with improvement and through reflection and learning we develop and enhance our services to ensure we remain safe, effective and responsive to the needs of all those accessing our services.

This report provides a comprehensive account of the work we have carried out throughout 2022/23, looking at the challenges and achievements over the past year but acknowledging areas and priorities for improvement in 2023/24. It highlights the importance of our stakeholder engagement work, listening to all our stakeholders, so we can shape and deliver the best possible care and services to the community we serve. The feedback from our stakeholders also provides the framework for our new strategic plan, and this report features some of the themes and ambitions we hope to achieve over the next 5 years.



Delivering high quality services should be our baseline position. I hope this report gives this reassurance and demonstrates our commitment to quality, from our Board of Trustees to our staff and volunteers that often work in a fluctuating and challenging environment. I would like to thank them all for their dedication and support in this area.

Chris Sadler
Chief Executive

“ You looked after her with professionalism, compassion and respect during her final weeks. You allowed her freedom, dignity and independence and took the time to get to know her, she wasn't just a patient to you. ”

Patient's Family

Board Commitment to Quality

Trustees of our complex organisation continually ask the question 'how do we measure quality?' and are grateful to all our clinical and support staff who continually learn and improve by collecting and reflecting on the hard and the soft, often anecdotal, data collected.

The Quality Improvement Group continue to concentrate on formulating and refining a systematic approach to collecting data thereby analysing patient and other stakeholders experience of the care and services Dove House provides. The work of the Clinical Focus Group is an important conduit to present and analyse what is happening day to day on the Inpatient Unit and ensure a rapid response and adaptation to clinical circumstances and occurrences. The clinical team continually learn from experience and the wider team collate patient and family narratives to quantify quality, responsive, compassionate and attentive care.

Funders focus on our 'CQC rating' but will be interested in quantitative and qualitative data that demonstrate a quality service which is 'value for money' meeting demand and responsive to patient needs.

The trustees are deeply concerned when there are patients waiting for beds and equally concerned about the wellbeing of our clinical and support staff who, as this Quality Account demonstrates, provide an unrivalled quality of care. Without question our team is the most important asset in the delivery of the highest standards of quality care.

Philip Daniels
Chair of the Board
of Trustees



Our Care In Numbers

We have been so pleased to almost be able to open our services back up fully after the Covid pandemic. This year we saw a 15% increase in referrals for our care services and admissions on our Inpatient Unit increased by 47%.



13% referrals were from patients themselves or by a family member or friend

84 People attended Welcome Wednesdays

72 Complementary Therapy assessments

40% of Inpatients were from East Riding

60% of Inpatients were from Hull

“ We were bowled over with the care you took... he was given so much respect and dignity. ”



The whole organisation

New roles in Support Services:

Head Caretaker/Facilities Manager was recruited in May and a Head Housekeeper in March. These roles are crucial ensuring the support service behind our care runs smoothly and provide a vital role in the quality of our care.

Executive Leadership Team (ELT) on Tour:

Annual ELT on Tours took place in June and July 2022 which gave staff the opportunity to ask questions about the hospice as well as being updated on what is happening at Dove House.

Wellbeing:

We reviewed our agreement with BHSF for our Employee Assistance Programme and decided to continue offering this support to staff. In addition to the counselling and support the EAP provides to all staff, in addition we also referred 17 staff to occupational health for support which guides and assists them, and the hospice, at work. Additionally we paid for 7 staff to receive private counselling.

Staff Survey:

As part of our Stakeholder Analysis project we undertook a survey of all hospice staff. This gave staff the opportunity to comment on the care we provide and what it's like to work at Dove House. 54% of the workforce took part.

Here are some of the findings:

99% are proud to work at Dove House Hospice

92% would recommend working at Dove House Hospice to a friend

89% Clinical staff feel they can often deliver outstanding care

86% feel that they are valued and appreciated

Looking Back: Goals for 2022 to 2023

In last year's Quality Account we set out some goals for 2022/23, here's an update on their progress:

Developing our workforce

2022/23 was a year where we needed to look at our workforce, and much work has taken place in this area:

Clinical

New roles on the Inpatient Unit:

To align our workforce to the external healthcare arena we have started to introduce new roles which give opportunities for development, are attractive for external candidates and promote better person centred care:

- Developmental Staff Nurse – appealing to newly qualified nurses or those wanting to specialise in palliative care.
- Clinical Nurse Educator – to support staff on an individual and group basis, ensuring our workforce feel confident and competent in their role.
- Patient Discharge Assistant, Clinical Rota Coordinator and increased admin support mean the nurses have more time to spend with patients.

Nursing Establishment Review:

We have started the process of reviewing the Nursing Establishment to enable a structured and planned approach to staff planning, ensuring time is included for staff training, and planned staff absence (such as annual leave). We've reviewed the tools available to us in order to meet the specific needs of our organisation, to ensure the dependency and acuity of our patients is measured accurately.

Time to reflect sessions:

These sessions have been introduced to promote opportunities for reflection and currently focus on what's gone well, what we could strengthen and any concerns before the staff leave their shift and go home. Staff have reported these have benefited their wellbeing and they appreciate this support, it promotes a better work/life balance.

Inductions:

We have introduced a structured approach to inductions which includes setting out SMART objectives for several clinical roles to increase support for staff, consistency and identify opportunities for learning. We hope to expand this approach to other roles in the coming year.

Ward Climate survey:

The Clinical Workforce Development Group created a survey which was completed by 81% of clinical staff and identified strengths and areas for improvement within nursing. Some key feedback which will be addressed in 2023/24 was:

- 12-hour shift/permanent nights should be offered
- Admin and Discharge planning support needed

The survey highlighted the importance of team work to deliver excellent person centred care, some comments were:

“ Colleagues provide each other with emotional support. ”

“ We can count on each other. ”

“ We put in extra effort to improve the quality of care. ”

Shift pattern survey:

100% of the nursing staff participated in a survey around shift patterns which identified individual preferences which we believe is key to staff retention. We are now looking at introducing longer shifts in order to ensure our team are as happy with their work/life balance as possible.

Diversity

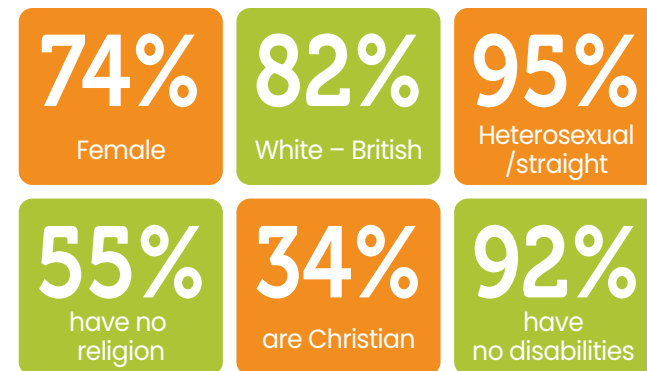
At Dove House we are committed to advancing equality and opportunity in every area of our work, including care, recruitment, volunteering and governance.

In September 2022, the Director of People and Development and Director of Clinical Services did a presentation to the Board about Equality, Diversity and Inclusion. This presentation included the legal position around equality and best practice for promoting a diverse and inclusive workforce. The Board and Executive Leadership Team committed to increasing our inclusivity by:

- Continuing to comply with legislation to demonstrate commitment to equality.
- Planning:
 - Equality Impact Assessments
 - Further line manager training in Equality and Diversity
 - Analysis on recruitment data for trends
 - Unconscious bias training
 - Benchmarking 2021 census with internal diversity data
 - Promoting mindful employer status

Immediately we added a module to our e-recruitment software to record and report on applicants' data (e.g. age, gender, marital status, ethnicity, sexual orientation, religion or belief, disability).

Since October our applicants are:



The next stage will be to explore ways of how we can ensure there are no barriers for anyone when applying for our roles.

Shaping our services

Children's Bereavement Groups:

17 groups were run (6 younger groups and 11 older groups) and we also started a successful bespoke programme with Withernsea High School. The school requested support as they had a significant amount of children who had experienced loss, 31 children have been helped through this programme.

Stakeholder Engagement Project:

In 2022/23 we completed our Stakeholder Engagement and Analysis, further from the public perceptions survey which took place the year before the final elements of the project included surveying hospice supporters, volunteers and also interviewing local healthcare professionals and patient's families.

From the survey of volunteers and supporters:



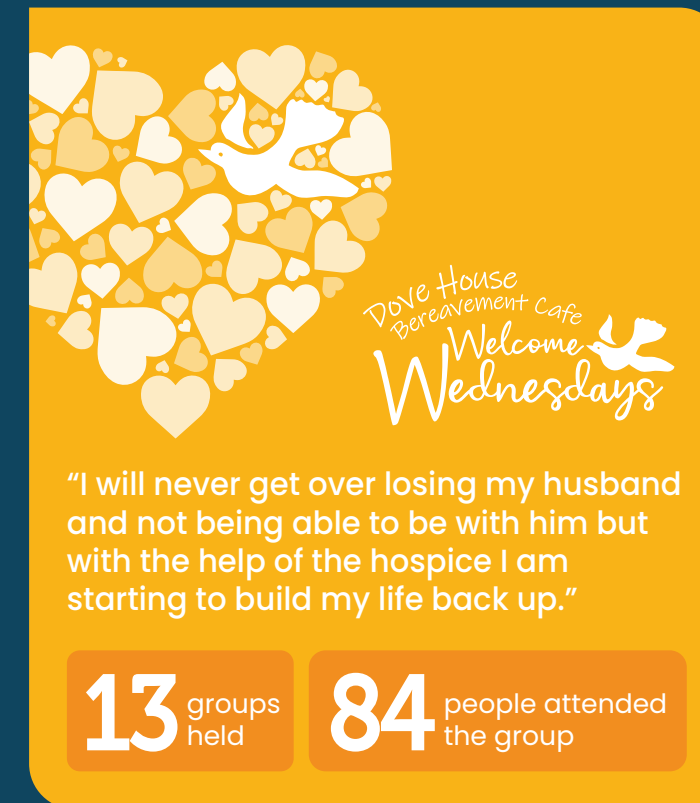
The interviews included speaking to 28 health stakeholders, 12 GPs/ practices, 7 care homes and 26 family and friends. The key findings were:

- The Dove House clinical experience is exemplary
- The quality of care that patients receive in other settings does not always match the quality of care they receive at the hospice
- The experience (and perception) of referrals into the hospice is too varied across clinicians
- There is an emerging evidence base to support additional clinical responses
- The focus, except for outreach, should be on communicating "what else the hospice does beyond EoLC"
- The palliative and end of life care marketplace is a confusing one
- Dove House is considered on the periphery of the whole system conversation
- There is an appetite for the hospice to consider "new" models of care

Increasing Awareness and Widening Our Reach

This year we recruited a Community Engagement and Service User Lead who was integral in starting to widen our reach and therefore increase awareness. The main focus of this was setting up new groups which reach beyond the patients using our services – Welcome Wednesdays and Friday Friends. Both of these groups are also open to people who have never accessed any other Dove House service before.

We also set up a new Carer's Group and Living Well Group to increase the support are given patients and their families:



Living Well Group

"The Living Well Group really helped, we did mindfulness and tai chi which was wonderful, and I really liked doing the crafts. I think what I found most useful was being able to talk openly, especially to the other lady who attended."



Dove House Carers Group

"The Carer's group has helped me more than they know. I have met people in the same boat as me, some worse off and I have been able to share my thoughts no matter what they are. The group is a safe space, caring for my husband was hard and I needed to be able to say how I was feeling to other people who knew how hard it was. I look forward to going and feel refreshed after having been."

FRIDAY Friends

"I can't recommend Friday Friends enough, they are friendly, sympathetic and you come away feeling uplifted. We play games, make things and catch up with everyone. I have made lovely relationships with some of the others that also attend which is really nice."



New building design

Last year we appointed architects to begin working on plans for our new site developments. During 2022/23 we consulted with patients, staff, volunteers and the local community to finalise the designs ready to submit to planning.

The plans take in to consideration comments from the consultation and also feedback from the Stakeholder Engagement project in terms of how people would like care delivered. As such the designs that have been submitted to planning keep the patient's journey at the centre of development.

Update nurse call system

A new nurse call system was successfully implemented. The new system can be wireless which we have found to be a useful safety mechanism, especially to more at-risk patients. We are now looking to extend the options available, and access other supporting equipment which could provide additional benefits such as being able to be moved to the garden or outside space and be adaptable for patient's with poor hand mobility.

Patient and Carer involvement - Reviewing the Patient Feedback System

Community Engagement and Service User Lead role was recruited and part of their role is to develop a more robust and structured system for feedback. Work has begun on a reviewing of current mechanisms in order to improve the systems next year.

Measuring Impact

Benchmarking

Over this year we have prepared and submitted data to Hospice UK for benchmarking, this includes information on bed numbers, falls, medication errors and pressure ulcers. The quarterly reports are shared with the Quality, Compliance and Improvement Group and reviewed.

	Dove House Hospice Avg	Adult Medium Size Hospice Avg
Falls	8.18	8.87
Medication Incidents	4.3	11.5
Pressure Ulcers on admission	13.8	18.57
Pressure Ulcers Acquired at hospice	9.3	9.71

*per 1000 occupied bed days

Integrated Palliative Care Outcome Scale (IPOS)

IPOS is a national tool for measuring patient outcomes and impact, and demonstrates the difference we are making. In order for the tool to work effectively two scores are needed, first scores are usually completed upon admission and the second scores normally take place if the patient has a change in condition or is discharged.

IPOS First scores have remained consistent at **99%** for the last 3 financial years.

IPOS Second scores have increased from **58%** in 2020/21, to **80%** in 2021/22, and **82%** in 2022/23.

94% of patients with **moderate, severe or overwhelming scores in:** Pain, Breathlessness, Nausea, Vomiting or At peace categories changed to **absent or mild** at the end of 1st phase.

“ To every single member of staff who gave us peace of mind we are eternally grateful that you took care of dad's welfare during his last days. The atmosphere of calm and compassion under such circumstances is remarkable. You took the weight off our shoulders and allowed us some much-needed time with him. ”

Patient's Family

Other Achievements in 2022/23

Aside from the Goals which were set last year more has been achieved which adds to the quality of the service we provide to local people:

People & Development:

Hospice School

Delivered in person during the summer of 2022 to 6 participants and allowed the opportunity to develop essential care and communication skills that are transferable to any health and care environment.

Virtual Work Experience

This consisted of four tiers which ranged from introducing values and soft care skills, applying knowledge to real life care examples, developing care plans and meeting the professional they are aspiring to become (e.g. students applying to be medics met one of the Dove House Doctors). St Mary's College students gained 1,500 work experience hours from undertaking the virtual work experience programme and 250 students completed Tier 1. The pilot was very successful and we were given the opportunity to showcase this at a national webinar for NHS England.

Volunteering:

A multi-departmental plan was created to help recruit volunteer roles, through increased promotion of volunteer opportunities and community facing roles publicizing this way of supporting Dove House. This plan meant each area of hospice has more influence on their volunteer recruitment activities, however as we go in to 2023/24 there is more work to do in this area.

Digital:

We are committed to looking at digital alternative ways of working to streamline processes, increase efficiencies and ensure data security. This year we have:

- **Completed a Digital Strategy Project** – the Senior Leadership looked at digital across the organisation and have made recommendations for the Executive Leadership team and Board.
- **Invested in Vantage Software** – this software will work across departments to improve processes. Initially it will record clinical incidents, maintenance reporting and a maintenance helpdesk, before being further developed in more areas.
- **Microsoft Teams** – the organisation is moving across to Teams for file storage which has made collaboration easier, improved departmental efficiencies and aided offsite access in a secure manner.
- **Department reviews** – departments are reviewing their processes to reduce paper usage and become more digital in their approaches.

Audits and Research:

Research:

- **DAMPen-D: Improving the Detection, Assessment, Management, and Prevention of Delirium in Specialist Palliative Care units** – research completed and the publication is being written up, feedback is due in July 2023.
- **RAMBO (Research Assessment Outcome Measures for Malignant Bowel Obstruction)**: completed and publication being written.
- **RESOLVE** – project still ongoing, we are participating in the development of the registry by providing patients outcome data.
- Exploring pathways to optimise care in malignant bowel obstruction (EPOC), a qualitative study. So far, we have had 1 patient interview and 2 staff interviews.

Audits:

We continue to participate in clinical audits at Dove House with the Audit Group meeting regularly to discuss outcomes which lead to changes and improvement in practice. In 2022/23 23 of 33 (69%) of planned audits were either completed or in progress. Audits have taken place within nursing, therapies, the Family Support Team, the Doctors team, clinical data coordination and Support Services (health and safety). We continually review the audits in which we undertake and their value in providing quality care. We are particularly pleased that our audit work on **EPaCCs recording on SystmOne showed an increase from 0% to 77% this year.**

Support Services:

Audits and reviews have taken place across the following areas this year and action plans implemented to ensure the hospice is up to date and compliant from a health and safety perspective:

- **Water Hygiene** – new Risk Assessment created and periodic inspections planned
- **Fire Safety** – review of all safety arrangements and refresher training delivered.
- **Electrical Safety** – electrical installations in all properties assessed and a continuous/rolling review implemented. All issues identified were prioritised and actioned.
- **Medical Gases** – Refreshed training for whole Maintenance team and an external audit undertaken.
- **Maintenance** – a review of the process of recording and acting on planned and reactive needs (buildings and vehicles)

5 Star Food Hygiene Rating: ★★★★★

We were pleased to receive the top rating of 5 – Very Good after our Food Safety and Hygiene Inspection for the fourth year running.

The Food Hygiene Rating scheme is a joint initiative by the Food Standards Agency and Local Authority providing consumers with information about the standard of food hygiene in catering premises.



Nigel – Our Story

“ My name is Sue and I am Nigel’s Auntie and carer. Nigel has terminal cancer and at just 39 years old he is unlikely to see his next birthday. This news was hard to process for our family but slowly we are learning to come to terms with it and live every day we have together to the fullest. Nigel also has learning difficulties and needs around-the-clock care, so ensuring all his additional care needs would be looked after was very important.

We came to look around Dove House to see what it was like and show Nigel what to expect from his stay. Apart from hospital stays Nigel has been at home with me and his mum, Linda, so the thought of going somewhere new and unknown was daunting. When we come through the hospice doors for the first time I was so surprised by the calmness that greeted us. It feels so peaceful. Nigel was able to ask as many questions as he needed and was armed with all the information to ensure he felt comfortable at the thought of being away from his family and support network at home. This eased so much anxiety for us.

Caring for your loved one is tireless work but I wouldn’t have it any other way. However, at some point, you do need a break. Being able to rely on Dove House for respite care has been such a relief. I don’t sleep when Nigel is at home, I think when you are a carer or a loved one you just don’t switch off as you know you might be needed. As a family we can relax at Dove House, we can ‘let go’ and know that Nigel and the rest of us are looked after. It’s hard to say ‘I might not be able to do this on my own’ but everyone at the hospice is continually there for us as a family and gave us the support we desperately needed.

Everyone at Dove House made Nigel feel settled, overcame barriers with his learning difficulties, and truly understood him. The nurses and doctors are fantastic with him, they have done all sorts of crafts and painting together, made him feel completely relaxed, and even took him to the Car Boot Sale behind the hospice, which is something he loves to do! We felt reassured leaving him at the hospice so that we could have a break and recharge our batteries, but it also gave Nigel a break from us and our home.



The positive attitude shines through in everyone that works and volunteers at the hospice, it really lifts you up and brightens your day.

One thing that worried Linda when we came to look at the hospice was how much it was going to cost. It was a shock but a big relief to be told it was all free!

When the time comes we know Nigel is happy at Dove House, he is safe there and we leave our carer role at the door which is the biggest relief for us.

We don’t know how long we have left so we are filling it full of fun trips and we know that Dove House is there waiting for us when we need them. It is hard to talk about the end but we know that the hospice will ensure Nigel has a dignified death and that is all we could wish for. ”



Promoting Patient Safety

Falls

38	23	No Harm	49	21	No injury
Total number of Falls	14	Low Harm	Total number of Injuries	10	Pain
	1	Moderate		18	Other injury

Learning from Falls in 2022/23

Although most slips, trips and falls resulted in no injury the total number increased from 18 during 2021/2022 to 38 during 2022/2023. In addition this year, one person sustained a moderate harm from a fall where in the previous year we had no moderate or severe falls. This was reported to the and other regulatory bodies as required. The dependency and acuity of our patients may have contributed to this increase however, we have reviewed our systems and processes to ensure we are doing all we can to reduce the risk of slips, trips and falls. We are:

- strengthening our approach to Safety Huddles by working with the national **Improvement Academy**. Falls will become our **identified priority** within our newly adapted Safety Huddles from May 2023.
- giving all patients identified as being at risk of falls a yellow bracelet to ensure all staff can easily identify those most at risk. Yellow magnets will also be placed on the name board in the nurse’s office.

- exploring mechanisms within the nurse call system which will trigger an alarm if a patient tries to mobilise as 79% of falls were unwitnessed by staff. We do not believe the falls are associated with staffing as the majority happened during daytime when there is the most staff on the Inpatient Unit.
- reviewing the reporting system to:
 - identify whether it is a patient’s choice to not inform relatives, as 39% of relatives were not informed and it is not clear on the system if this was the patient’s choice.
 - ensure whether a patient has capacity at the time of the fall is recorded.
- working with staff to find out why care plans and risk assessments were not reviewed in every case and checking training needs with staff to ensure they know how to complete the falls reports accurately.

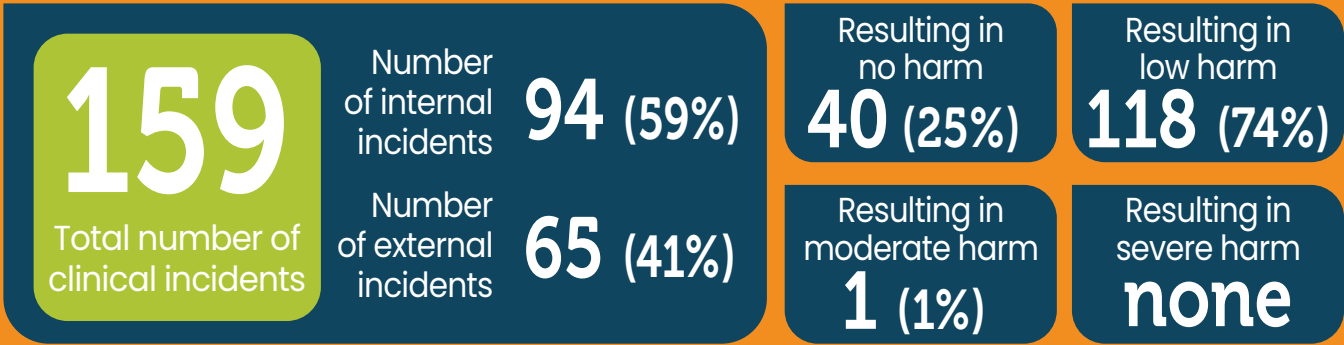
Complaints

We have received two formal complaints in this year – both were fully investigated, and formal written responses given. Learning was identified and action plans developed which were shared with the clinical teams.

The first complaint was surrounding inconsistencies with communicating with a patient’s primary and secondary contacts as circumstances changed in the family. Action plan included the valuables policy being amended and nursing documentation reviewed.

The second complaint came from a family who felt our approach to discharge planning was inappropriate. They also referred to the availability of a single room and bereavement care for the family. The complaint was partially upheld.

Clinical Incidents (including Tissue Viability)

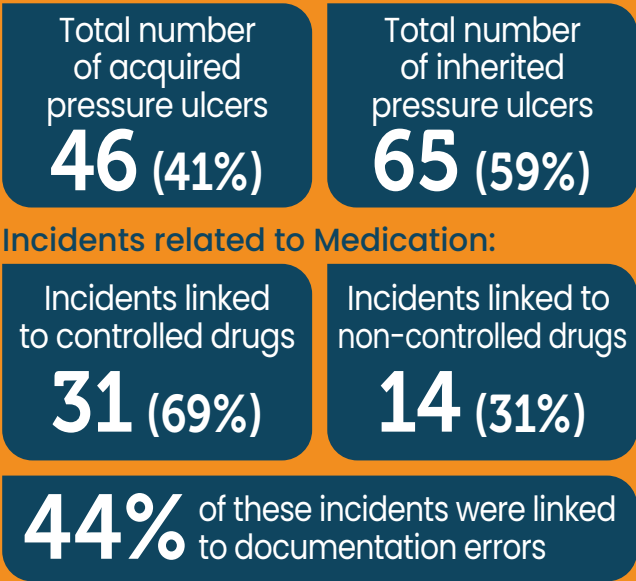


Types of incident:

	Number of Incidents	Percentage
Inherited Pressure Ulcer	65	59%
Acquired Pressure Ulcer	46	29%
Medication	45	28%
Other*	3	2%

* Other included: one fall that was also recorded as a Clinical Incident, damaged stock which was identified and removed, preventing risk of injury and a patient was discharged home, no copy of ReSPECT form in medical notes and therefore not saved onto SystmOne.

Incidents related to Pressure Ulcers:



Learning from Clinical Incidents in 2022/23:

Following a review of all the incidents in the year and referring back to the previous year's action plans, the following plan has been made:

Pressure Ulcers

- Wound Care Champions to review all acquired pressure ulcers from the previous month identifying what went well and what could be improved, reporting back to the wider clinical team.
- Senior Nurses to attend the Humber Strategic Pressure Ulcer Meeting, to ensure practice is aligned to the external landscape and evidence based.
- Clinical Nurse Educator to review current wound care training package, ensuring all qualified nurses feel competent and confident in this area. They will also develop training for unqualified staff, including wound care competency assessment for all.

Medication:

- Annual summary of incidents to be shared with the clinical team.
- Clinical Nurse Educator to develop a record keeping training package for all staff to access and complete.
- External trainer to attend Team Days to present on the importance of accurate documentation.

As the total number of recorded incidents has increased by 80% (from 88 to 159) since 2021/22 we will continue to closely monitor and review incidents as they happen. This increase may be due to improved reporting, transparency and a culture where there is a greater willingness to report incidents.

Incidents reported to the Care Quality Commission:

60 incidents were reported in 2022/23, 59 were related to pressure ulcers (30 inherited / 29 acquired) and one was related to a patient fall resulting in a possible fracture.

Risk Register

The review of the Risk Register was completed in 22/23 and is now reviewed every quarter or sooner if a new risk identified or the status of a current one changes. Risks from across the organisation are brought together and ranked in terms of severity. For every risk an assessment is done on how we can reduce or eliminate the risk.

From a clinical perspective the top identified risks are mainly surrounding maintaining staffing levels and difficulties in recruiting qualified staff. With staffing a recurring theme, recruitment and workforce development are key themes in our plans for 2023/24.

Clinical risks are also discussed at the Clinical Workforce Development Group meetings.

Safeguarding

In 2022/23 we moved our Safeguarding training from online back to face to face for our clinical staff because of the sensitive nature of these sessions and to ensure that there is time for proper discussion and learning around the topic.

Safeguarding concerns reports or escalated to the Care Quality Commission (CQC):



Kimberley's Story

“My name is Kimberley, and my mum is being cared for by the Family Support Team at Dove House. She was diagnosed with incurable lung cancer at just 45 years old.

We first heard of Dove House after receiving the devastating news that she has cancer. No one thinks they will get cancer so to hear that my mum had it turned my world upside down, I am so afraid of losing my mum and my son losing his grandma. **I am so glad Mum was referred to the hospice, their help has been invaluable. Dove House have been amazing, the support they have shown our family is incredible. Beth from the Family Support Team has been our rock, I don't know what Mum would do without her.**

Mum and her partner Les reconnected after growing up near each other and have wanted to get married for some time. With Mum's illness they decided to move the wedding forward because, quite honestly, we don't know how long she has left. Money is tight as it is for so many of us right now, but they desperately wanted to get married and share precious memories with the rest of our family. When Mum mentioned this to Beth and shared how she worried they wouldn't be able to afford the wedding due to the time pressure, Beth kindly asked what was left that they needed. From then it was a whirlwind and suddenly the wedding was upon us and the hospice had helped us with a stunning car, a photographer, flowers, a hairstylist, and someone to come and do Mum's makeup and make her feel a million dollars like she deserved. A singer came forward and offered to perform at our reception, a DJ came and helped us celebrate and a local pub sent us a delicious buffet. **Everyone deserves to feel special on their wedding day and Dove House helped Mum forget about her terminal illness for the day and enjoy their magical day together.**

To see her truly happy like that is something I will never forget. Thanks to Dove House we have such lovely professional photos that we can keep forever.



It means the absolute most that she could have this experience, I know in our hearts we don't know what comes next but at least we had this day, and what a day it was!

I know Mum is struggling and everyone at Dove House has been so supportive, helping her get through each day knowing she has the hospice to keep her up when she is too weak is such a relief. My mum means everything to me so knowing that she is being cared for like this is comforting.

I am thankful for everything that the hospice has done and I know that the support going forward will be just as amazing.”



Strategy Development

During 2022/23 a huge piece of work was the development of a new five year Strategy. We reviewed the previous Dove House strategy and analysed where the hospice currently is to create the new Strategy.

This strategy will be implemented in 2023/24 and will guide decision making developments for the next five years.

“*Whilst this strategy sets out a direction of travel, we will remain a listening organisation and through our governance framework and annual reviews, adapt our plans to reflect the ever changing external environment. Whatever the future may hold, we are determined and ambitious in our plans.*”

Chris Sadler, Chief Executive

Strategy process: how did we get to this point?

Our strategic plan has been developed, not just through our own endeavours and insights, but from all those affected by the decisions we make. Through a robust programme of stakeholder engagement and the support of professional analysts, we have provided a platform to help people shape what Dove House should look like in the future. This involved talking to all our stakeholders; from patients and families to those that commission our services, staff and volunteers and the community that sustains us, health care professionals and the wider healthcare sector. Our 5-year strategic plan has been produced by the Trustees and Executive Leadership Team but guided and directed by the narrative in our stakeholder feedback.

Themes that came out of this research:



patients and families consider our care as excellent



we don't reach everyone in our community



the layout of our building and site constricts us and can deter referrals



we don't offer services in a patient's home if that is their preference



we are well known but not for all of the services we provide



the need for hospice care is greater than ever



we must remain financially resilient and stable

Strategic Ambitions

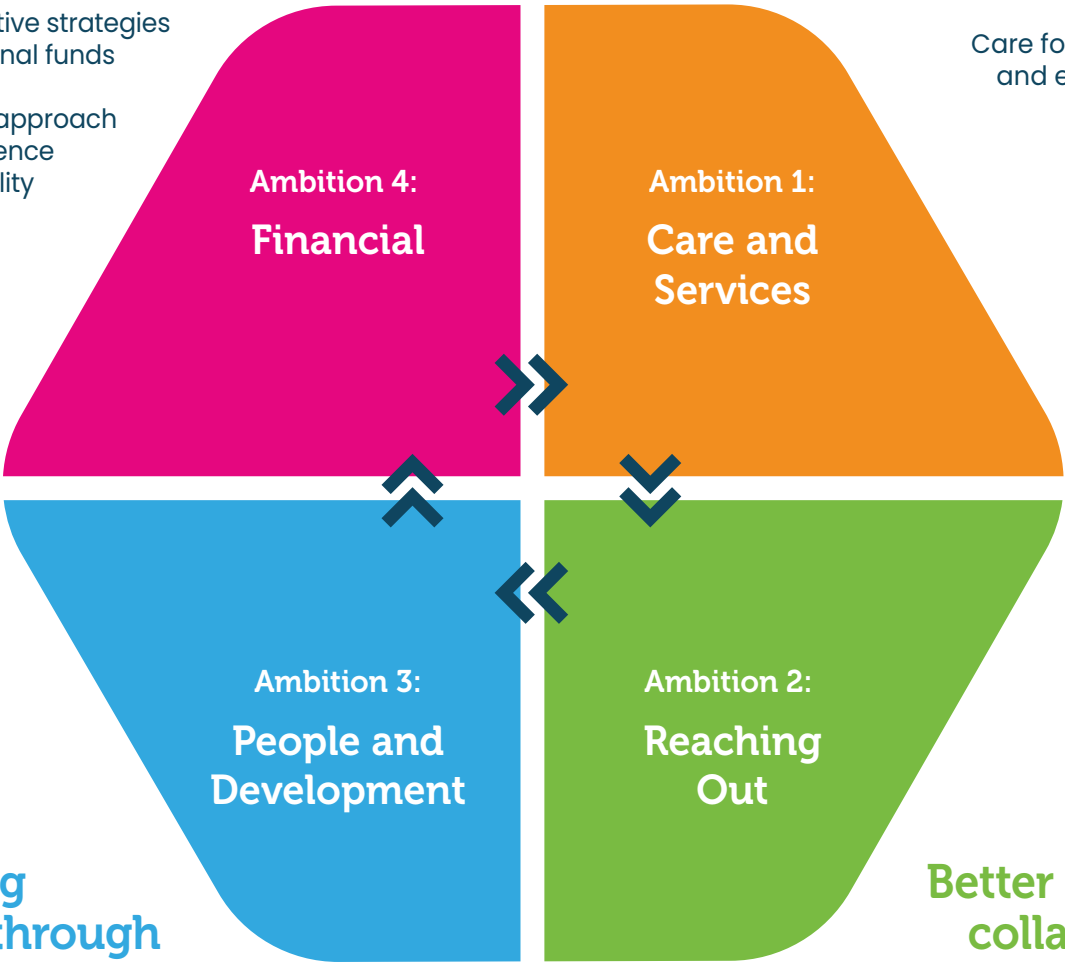
From the results of our stakeholder engagement and analysis we have created four Strategic Ambitions:

A coherent financial plan to achieve our strategic ambitions

- Sound financial model to underpin existing services
- Develop proactive strategies to raise additional funds
- Prudent in our approach to ensure resilience and sustainability

Excellent care, excellent support, excellent outcomes

- Exceed expectations
- Be innovative in our approach
- Care for more patients and expand services



Achieving success through our people

- Ensure workforce is appreciated and motivated
- Become an employer of choice
- Leadership will be values led, compassionate and inclusive

Better together: collaborate to succeed

- Strengthen our place in local healthcare system
- Collaborate to provide seamless care
- Raise our profile and dispel myths

Priorities for Improvement:

Goals for April 2023 – March 2024

As the new five year strategy has been developed this year, many goals were already in place after what had been learnt from 2022/23, we have therefore categorised these the Strategic Ambitions outlined on the previous page. From this year onwards our accomplishments will be measured against these Ambitions to ensure we are making developments towards achieving our Strategic Vision.

Care and Services:

Measuring our impact

We will review what data we are collecting, what methods we are using and whose responsibility it is, identifying gaps in data collection and implementing systems to capture this.

Feedback

Implement a structured approach to gathering feedback from all service users, particular families and friends, which includes a multi-method approach.

Continuous learning and reflection

Review what we do, and how we do it by exploring a quality improvement approach and how we measure effectiveness.

Increase our community presence

Develop well-being services and therapy out patients particularly in the East Riding of Yorkshire.

Reaching Out:

Improve partnerships

Working closely with community colleagues particularly with regards to specific conditions such as frailty, develop action plans to strengthen our place for caring for these patients.

Promote our care and services

Develop a marketing plan which sees increased content released about our services and ensures we have relevant resources for everyone in the health care community explaining what we do.

People & Development:

Recruitment

Build a recruitment and retention plan which:

- Interests students, and supports new disciplines, such as paramedics
- Strengthens links with education providers to encourage interest in health and social care.
- Continues to look at new roles, ensuring we are a competitive, flexible employer
- Reviews volunteer roles and investigates how these support our services

Workforce planning:

We will continue to review our nurse establishment with a view to ensuring a systematic and structured approach which meets the needs of the patients in a responsive manner. The review will also consider the needs of the Inpatient Unit and how these can be best met.

Increase training and development:

Plan to have more Team Days, introduce new competencies with the new Clinical Nurse Educator role, and provide more opportunities for observed practice.

The implementation of a new HR system, Staffology, will ensure recording training and identifying needs will be quicker and more responsive.

Promote staff wellbeing:

This year we are keen to put in procedures which will further support our staff with the emotional impact of their role. We will maintain the Employee Assistance Programme and review our Mindful Employer charter in November ready for re-accreditation.

Special Moments and Words of Thanks:

An 18th birthday celebration was brought forward so the patient could be part of it



“Nothing was too much trouble. Dove House has such an air of peace and tranquillity and it was a great relief to see him so comfortable at last”



Patient's family cat visited and spent time snuggled on the bed

Worry Monsters were knitted by a volunteer to children's designs to help with their anxieties



The whole hospice team worked together to create the dream wedding for a patient and her partner



“I was so grateful that you called me so I was able to spend the night with my husband and was with him when he died. Your care was outstanding”



A patient who hadn't been outside for 5 months could enjoy the gardens

Sleepover for a whole family



“We will never be able to thank you enough for all the wonderful care you gave”

A staff member brought in their dog to help a patient who missed having animals around.



Afternoon Tea to celebrate a special occasion



“Every hug, kind word, toast and hot choc meant so much... What you all do changes lives, it matters and you are stars!”



A beer lolly pop was made for a patient who was nil-by-mouth but fancied a pint!

Helped a Ukranian refugee make plans for after her loved one's death when traditions are so different.





“ The term quality is intrinsically linked with improvement and through reflection and learning we develop and enhance our services to ensure we remain safe, effective and responsive to the needs of all those accessing our services. ”

Chris Sadler
Chief Executive



Get in touch



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**dovehouse
hospice**
caring for people with a life limiting illness



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