

Quality Account



LINDSEY LODGE HOSPICE AND
HEALTHCARE



2024 – 2025

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Clinical Overview

Lindsey Lodge Hospice and Healthcare offers specialist palliative care to adults in North Lincolnshire and East Riding who are living with a progressive, life-limiting illness. We operate independently of the NHS. Typically, patients are referred to us by a healthcare professional, though some of our services also accept self-referrals from patients or their relatives.

Our Services

We provide a range of services, including 24-hour inpatient care and outpatient services. Our inpatient unit is a 16-bed facility focused on specialist palliative care, assisting with symptom management, end-of-life care, or palliative rehabilitation. Outpatient support is available through clinics and day activities at our Wellbeing Centre.

Our Care Team and Holistic Approach

Care within our inpatient unit is led by our Medical Director, Dr. Lucy Adcock, supported by our Specialty Doctor, Advanced Clinical Practitioners, and an on-call medical team. We adopt a holistic approach to care, helping patients achieve their goals while a multidisciplinary team provides comprehensive support to both the patient and their family. This support encompasses bereavement and family support, counselling, complementary therapy, lymphoedema care, physiotherapy, occupational therapy, spiritual care, fatigue and breathlessness services, and our breathe easy enablement program.

Welcome



Welcome to the Lindsey Lodge Hospice and Healthcare Quality Account 2024/2025, in which we will outline and evidence how we deliver high-quality, specialist palliative care to patients with life-limiting conditions and support their family and carers during illness and into bereavement.

A Quality Account is a report about the quality of services offered by organisations that are commissioned by the NHS to provide healthcare services. Lindsey Lodge Hospice and Healthcare publish these reports annually and they are available to the public.

Quality Accounts are an important way for local care services to report on quality and show improvements in the services they deliver to local communities and stakeholders.

The quality of the services is measured by looking at patient safety, the effectiveness of treatments patients receive, and patient feedback about the care provided.

During 2024/2025, we have continued to embed Quality Governance and Quality Improvement processes, continuing to strengthen and embed ideas for change to be brought forward. A clinical strategy has been developed with our clinical staff, and we look forward to working towards this in the coming years.

The quarterly Quality Assurance Board Sub-Committee meetings continue to assure the hospice board that Lindsey Lodge Hospice and Healthcare is appropriately governed and well-managed across the full range of clinical activities. Externally, assurance and benchmarking evidence are sourced by participating in the Controlled Drugs Local Intelligence Network, Hospice UK Patient Safety Program, and Place-based commissioning meetings.

Statement of Assurance From The Board



Pat Webster

Chair Of The Quality Assurance Committee

The Board of Trustees of Lindsey Lodge Hospice is proud to present this Quality Account for 2024/25, which reflects our continued commitment to delivering outstanding, person-centred care for our patients and their aligned families. As a Board, we are fully assured that the information presented in this report is accurate and represents a fair and balanced view of the quality of the services provided.

Throughout the year, the Board has continued to provide robust scrutiny, governance, and oversight of the organisation's clinical and operational performance. We have received regular quality reports, incident reviews, and audit outcomes through the Quality and Performance Committee. This enables us to hold the executive team to account and support continuous improvement across all services.

We remain committed to ensuring that safety, effectiveness, and compassionate care remain at the heart of everything we do. Our clinical teams have worked tirelessly to meet increasing demand while adapting to changing patient needs, demonstrating professionalism, resilience, and innovation.

The Board strongly supports the organisation's focus on quality improvement, staff development, and collaborative working across the local health and social care system. This Quality Account highlights areas of achievement as well as opportunities for learning and future development, all underpinned by our values and our commitment to provide the best possible experience for those we serve.

We would like to extend our sincere thanks to all our staff, volunteers, supporters, and partners whose dedication and compassion make Lindsey Lodge a truly special place.

2024 – 2025 Quality Priorities

03



QUALITY ACCOUNT 2024/2025



1

To explore the expansion of research activity



2

To continue to embed and strengthen quality improvement



3

To engage with our workforce to develop a clinical strategy



4

To embed clinical supervision

LINDSEY LODGE HOSPICE AND HEALTHCARE



1

To explore the expansion of research activity

This year has seen the hospice continue with recruitment to the University of Surrey's CHELsea-II trial, looking into the use of parenteral fluids at the end of life. The study is now closed, and we await the results that will hopefully better inform clinical practice.

Lindsey Lodge Hospice has expressed interest in being a site for a further multi-centre study, DAMPen-D II, looking at improving the detection, assessment, management, and prevention of delirium in palliative care units. We await the outcome of that expression of interest.

The organisation has increased its research networking, with team members attending two palliative research networking events over the year in Sheffield and York, presenting posters at the event in Sheffield. Our clinical team have also presented posters at the annual Hospice UK Conference in Glasgow in November 2024. Following networking events, we have taken some useful ideas to inform our research strategy. The first step has been to conduct a baseline SORT assessment (Self-assessment of Organisational Readiness Tool) to assess capacity and capability for participating in research activity within the organisation.

Our Advanced Clinical Practitioner Occupational Therapist, Sarah Hodge, has received university and NHS ethical approval for her PhD study, and hopes to begin recruitment of hospice patients during 2025/26.

Planning for 2025/26, the team are due to launch a Clinical Impact Group, bringing the clinical staff, our quality improvement work, and the evidence-base together into a refreshed version of a journal club.





Patient and Public Involvement

Patient and Public Involvement (PPI) is an embedded action within research to help improve the quality, relevance, and usefulness of research. PPI means involving patients and the public – this can include health and social care staff – to ensure their perspectives are considered throughout the research process. For example, this applies from thinking about what research to do right through to how a study is conducted.

As part of our Advanced Clinical Practitioner Occupational Therapist working through the NHS ethics process, patients within the inpatient unit and wellbeing centre, and both clinical and non-clinical staff, have been involved in the PPI aspect of ethics. As part of this, they reviewed and provided feedback to ensure the documents to be submitted are user-friendly.

PPI is designed to be collaborative. It can be completed on a formal or informal basis and can help to build perspectives around research, which is essential for ensuring research is accessible and engaging for all.

One patient involved in this process commented

'I was involved with research during my cancer treatment, but I didn't realise research was part of this stage of your life. It's nice to think you're leaving something behind.'



2 To continue to embed and strengthen quality improvement

At Lindsey Lodge, quality improvement (QI) remains at the heart of our commitment to delivering outstanding, patient-centred care. Over the past year, we have continued to embed and strengthen a culture of continuous improvement across all clinical areas of the organisation.

A key priority has been empowering staff at all levels to take an active role in shaping and improving the services we deliver. We have started to provide targeted QI training for clinical teams, introducing practical tools such as PDCA (Plan-Do-Study-Act) cycles and root cause analysis to support structured, evidence-based change. These sessions have helped to develop staff confidence and capability in identifying opportunities for improvement, testing ideas, and evaluating impact. The aim over the next year is to continue with this training across clinical and non-clinical areas.

We have also created more space for innovation and learning through team meetings and clinical governance sessions, where staff are actively encouraged to bring forward their ideas and share learning from audits, incidents, and patient feedback. We are encouraging an approach where staff are supported to lead on small-scale improvement projects that align with our strategic priorities, contributing to improvements in patient safety, experience, and outcomes. This needs to be further developed over the coming year so that staff feel involved and included.

Importantly, our leadership team has continued to champion QI by recognising and celebrating successes, fostering an open and inclusive environment where all voices are valued.

This commitment to embedding QI has not only enhanced our services but also contributed to a stronger, more engaged workforce. As we look to the future, we remain focused on developing a sustainable improvement culture, where learning and quality go hand in hand with compassion and excellence in care.



Quality Improvement Statistics



Total number of patient falls per month has reduced by **93%**



Falls incident reporting via the appropriate channel has improved from 71% to 100%

“The most useful training we’ve had to keep patients safe”

The impact of embedding a multi-faceted approach to falls management through use of quality improvement techniques.

The impact of falls within patient care is multi-faceted and can have a significant impact on a person’s physical, psychological, social and financial wellbeing. Within hospices, falls are a concern with statistics indicating that patients receiving palliative and end of life care face a higher risk of injury from falls compared to other adult populations. What we know is that many falls can be prevented through early identification, multifactorial assessment and early intervention.

In 2022, Lindsey Lodge Hospice and Healthcare piloted a new falls audit tool based on Hospice UK benchmarking data. It was evident that whilst post-falls intervention was well established, improvements were required within pre-fall care, recording of falls history, appropriate use of risk management devices and staff confidence with incident reporting – including the recognition of near miss incidents as a tool for prevention.

Through exploring drivers for change and including both staff and patient perspectives within process mapping, stakeholder analysis and a post-audit Plan, Do, Study, Act (PDSA) cycle, a series of intensive mandatory falls training sessions have been completed across the organisation throughout 2024 including both clinical and non-clinical services with a view to falls becoming ‘everyone’s business.’

The total number of patient falls per month has reduced by 93%. Falls incident reporting via the appropriate channel has improved from 71% to 100%, with consideration around prevention and inclusion of near miss incidents, and staff have reported feeling more confident in relation to falls management. In parallel, patients have expressed a feeling of independence and empowerment being involved in falls discussions.

Use of the quality improvement tools have provided a clearer focus and guidance into the content and delivery of falls training within the hospice. Additionally, capturing the information in a more robust manner has helped with training and disseminating information to both patients and the hospice team – an approach that can be sustained.



3

To engage with our workforce to develop a clinical strategy



A key quality priority for 2023/24 was to develop a Clinical Strategy that would provide a clear direction for our services over the next three years. This strategy was designed with an acute awareness of the current financial climate, the cost of delivering high-quality care, and the need to ensure long-term sustainability.

The final strategy sets out a realistic and structured approach to meeting the needs of our patients and the wider community. It places strong emphasis on integrated working with system partners, recognising that collaboration is essential to improving access, efficiency, and continuity of care. It also outlines our intention to explore new opportunities for increasing our community footprint, ensuring that our services remain responsive and accessible to those who need them most.

Workforce development is a key pillar, with a focus on retaining and supporting staff, building future capability, and fostering a culture of continuous learning. The strategy also commits to embedding research and innovation into our practice, enabling us to contribute to evidence-based care and adopt new models that support excellence.

Understanding the cost of care and aligning service delivery with financial planning has been central to the strategy's design. This ensures that our clinical aspirations are underpinned by a sustainable model that reflects both our current position and future ambitions.

Finally, the strategy embeds a continuous quality improvement approach, informed by patient, family, and staff feedback. By setting out clear priorities, governance processes, and measurable outcomes, it provides a strong foundation for delivering safe, effective, and compassionate care — now and into the future.

Strategic Priorities

1. Understanding the Costs of Care and Sustainability of Delivery

Objective: Develop a comprehensive understanding of the costs of hospice care to optimise fundraising and ensure financial sustainability.

2. Integrated Working with Partners

Objective: Develop integrated care pathways with local healthcare and voluntary sector organisations.

3. Explore Opportunities to have a Community Footprint

Objective: Explore and model opportunities to increase hospice care presence in the community through a dual care approach.

4. Workforce Development

Objective: Lay the foundation for clinical workforce development in line with the workforce strategy.

5. Research & Innovation

Objective: Establish Lindsey Lodge as a research-active hospice to improve patient outcomes through evidence-based practice.

6. Feedback Integration and Continuous Quality Improvement

Objective: Fully integrate patient and workforce feedback into decision-making, ensuring services are co-designed with patients, families, and staff.

4 To embed clinical supervision

Staff wellbeing is of paramount importance, as the emotional impact of caring for people and their families in palliative and end-of-life care can be significant. Clinical supervision forms part of the support on offer to our clinical staff. We have chosen to focus on the restorative element as this is best suited for the hospice environment. This allows staff to reflect upon their emotional response to clinical work and is a safe, confidential space to explore learning and consider new strategies.

We strengthened our offer to staff during 2024/2025 by training additional staff who could provide restorative clinical supervision sessions. We developed a programme offering 1:1 sessions twice a month, as well as ad hoc sessions as needed. Uptake at the end of 2024/25 was 55%, which was below our expectations; however, our Quality and Education Lead joined a Hospice UK and Foundation of Nursing Development Programme, which demonstrated that this is not unique to Lindsey Lodge Hospice. This ongoing work continues to be a quality priority for 2025/26 as we embed it into practice and strengthen a learning culture. We aim to undertake a staff survey in 2025/26 to find some targeted pieces of work to support staff wellbeing and strengthen clinical supervision uptake.



Supervision in Numbers



55%

Of clinical staff accessed 1:1
restorative clinical supervision



60%

Increased number of trained
clinical supervisors

Feedback

All sessions are held in confidence which is an essential component for success. However, some sessions identified common learning themes which helped shape the training calendar during 2024/2025 such as symptom management and falls awareness.

Staff feedback

“Your open door and listening ear has been invaluable and has allowed me to feel refreshed and ready to care”

“Thank you for helping me realise that I did do my best for this person and their family”

“The opportunity to talk about how I react to things and what I might do differently next time has been really helpful”

Patient Stories

Gladys' Story



Gladys came into our In-patient unit last year originally for end of life care. She can't remember much from that time, but what she does remember is the heart breaking moment of when her daughter had to feed her small amounts of soup because she could no longer feed herself.

However, after several days under our care, our team recognised a spark of resilience within Gladys. With the combined efforts of our therapy team and Gladys' unwavering determination, we devised a plan to rebuild her strength, aiming to return her home.

"As soon as I arrived at Lindsey Lodge I remember thinking, I am going to be alright now."

Our therapy team, led by Occupational Therapist Sarah Hodge, initiated the process of mobilising Gladys, focusing on getting her out of bed and walking. Gradually, Gladys regained her ability to stand and walk. Sarah Hodge recounted,

"I remember Gladys telling us that she thought that 'they' had given up on her, and we told her, we're not going to do that! Working with Gladys has been incredibly enriching for me as a therapist. Her unwavering determination to return home to her family was the driving force behind her progress. She simply wouldn't stop until she achieved her goal. I'm immensely proud of what we accomplished together for Gladys"

For Gladys, coming to Lindsey Lodge has given her life back. Thanks to the care she received from us she was able to spend last Christmas at home with her family, which was something she hadn't expected.



**Watch Gladys' full story on our
YouTube Channel**



SCAN ME

Patient Stories

Alan's Story

Vicky had been receiving wonderful care at home from Macmillan nurses, but as her needs grew more complex, it became clear a different kind of support was needed.

On May 22nd, 2024, she moved to Lindsey Lodge, and something truly remarkable happened. It was as if a weight had been lifted. The extra care and kindness made all the difference, and Vicky experienced a newfound peace there.



This sense of comfort was so profound that Vicky made a heartfelt decision: she wanted to stay at Lindsey Lodge for her end-of-life care. Once that choice was made, a noticeable change came over her. She became more relaxed, more at ease. As Alan shared,

"Although she knew she was going to die, she was happy."

The team at Lindsey Lodge went above and beyond to make Vicky's final weeks special. Knowing how much family meant to her, they transformed the summer house into a beautiful, private space for everyone to gather. It was a truly lovely day, full of shared laughter and precious moments, creating a memory Alan will always treasure.

Vicky passed away on June 16th, but her passing wasn't filled with fear. Alan's words offer such comfort:

"If there is such a thing as a lovely death, that was it. She wasn't afraid of dying, not at Lindsey Lodge. She was happy here."

It's clear that Lindsey Lodge provided not just care, but a loving environment where Vicky could find peace and happiness in her final days.

This powerful statement underscores that Lindsey Lodge provided not just exceptional medical and personal care, but a loving, supportive environment where Vicky could find true peace and even happiness in her final journey. It offered her and her family an invaluable gift: a beautiful, dignified farewell.



SCAN ME

**Watch Alan's full story on our
YouTube Channel**

Performance Data

Year totals activity	2021/22	2022/23	2023/24	2024/25
Inpatient Unit				
Admissions	264	371	402	373
Bed Days Occupied	2,790	4,092	4,654	4,400
Occupancy*	78%	81%	80%	76%
Average Length of Stay	10	11	12.3	9
Deaths	146	206	202	244
Went Home	72	99	122	73
Other Discharges	20	36	43	11
Butterfly Line total Calls		904	563	496
Hospital admission avoidance		139	138	144
Wellbeing Centre				
New Assessments	90	92	138	59
Attendance	2,189	2,179	3,002	2,979
Lymphoedema Service				
New Assessments	83	103	98	138
Follow Up Appointments	639	657	1,040	1,088
Lymph Flow AA**		513	532	372
Fatigue and Breathlessness Service				
New Assessments	70	96	103	92
Follow Up Appointments	217	281	273	361
Occupational Therapy				
New Assessments	197	189	247	258
Follow Up Appointments	648	797	426	515
Follow Up Appointments AA**		759	800	370
Counselling and Support				
Face to Face	294	431	409	592
Virtual	656	392	244	257
Complementary Therapy				
Appointments			2,012	1,364

*Based on 16 beds from 1 August 2022 from data perspective
** Appointments followed up by Advanced Assistants

Key Performance Indicators

Bed Data

	2023/24	2024/25
Total Admissions	402	373
Bed Occupancy Rate	80%	76%
Average Length of Stay	12 days	9 days
Total Discharges	42%	22%
Patients Who Died At Lindsey Lodge Hospice	52%	65%

Patient Slips, Trips and Falls

	2023/24	2024/25
Patient Falls Reported	49	31
No Harm Reported	49%	48%
Low Harm Reported	49%	48%
Moderate Harm Reported	2%	3%
Severe Harm Reported	0%	0%
Death Resulting From Incident	0%	0%

Skin Damage

	2023/24	2024/25
Total Number Reported	228	265
Skin damage reported on admission to hospice care	68%	82%
Newly acquired skin damage during hospice care	32%	18%

Medication Incidents

	2023/24	2024/25
Total Number Reported	32	35
No harm reported	50%	91%
low harm reported	47%	0%
Moderate harm reported	3%	9%
Severe harm reported	0%	0%
Death resulting from incident	0%	0%

Quality Reporting

Year totals activity	2021/22	2022/23	2023/24	2024/25
Quality				
Complaints	3	5	1	1
Compliments	146	219	223	216

Patient and Staff Safety

All harm or risk to person	133	125	209	255
Medication incidents originating at Lindsey Lodge	10 (3 controlled drugs)	12 (5 controlled drugs)	32 (4 controlled drugs)	35 (15 controlled drugs)
Slips, trips or falls	25	28	49	31
Harm or risk to care delivery	10	5	10	9
Safeguarding referrals	1	1	0	0
Winterbourne referrals	1	0	0	0
Number of patients who acquired a healthcare infection during admission	0	0	0	0
Number of staff who acquired a healthcare infection	0	0	0	0
Never events	0	0	0	0
Harm or risk to property or equipment	2	5	10	12
Admin	2	0	0	0
Information governance incidents	5	6	4	7
Financial or business risk	5	1	2	0
Risk to reputation	0	0	0	0
Security Issue	11	3	6	1
Data security awareness training (target 95%)	99%	97%	98.5%	91%
Mandatory training compliance (target 90%)	98.25%	96.75%	98%	97%

Patient safety incidents have increased as we continue to embed a learning culture, encouraging reporting and learning from incidents. With over 95% of all incidents being no or low harm.

Quality Reporting

Year totals activity	2021/22	2022/23	2023/24	2024/25
Skin Damage Incidents				
Total number of pressure ulcers on admission (POA)	96	135	154	220
Total number of new pressure ulcers	33	40	74	49
Numbers of category 2 present on admission (POA)	30	61	44	68
Numbers of category 2 new	11	13	39	29
Numbers of category 3 POA	31	16	8	13
Numbers of category 3 new	3	3	4	2
Numbers of category 4 POA	3	3	2	7
Numbers of category 4 new	0	0	0	0
Numbers of suspected deep tissue injury POA	24	24	37	67
Numbers of suspected deep tissue injury new		19	10	12
Numbers of moisture associated skin damaged lesions on admission (MASD)	2	13	8	18
Numbers of moisture associated skin damaged lesions new (MASD)	0	1	4	2
Number of unstageable pressure damage incidents POA	4	10	27	33
Number of unstageable pressure damage incidents new	1	1	5	3
Medical Device related skin damage POA	2	0	0	0
Medical Device related skin damage new	0	0	2	0

Therapies & Support

Breathe Easy Enablement Programme

This year, we've seen a change within the Fatigue and Breathlessness (FAB) service, transitioning from offering 1:1 intervention to group sessions. The primary focus was to continue to build on and develop our much-loved Breathe Easy Enablement Programme (BEEP).

Throughout 2024, we have supported five cohorts of patients, and their families, to help them live well with their breathlessness. Our 'drop-in' gym sessions are now well established in the week, with ex-BEEPers attending to continue their exercise and rehabilitation more autonomously.

feedback ★★★★★ feedback

"Fully informative, has certainly made me think about how I will apply different techniques throughout my daily life, as well as how to try adapt my breathing to different activities"

"Really informative and full of knowledge, answered a lot of questions I had in my mind, I think the BEEP is amazing and all the staff are amazing."

"Taught me not to be so frightened about breathlessness and feel better about myself in everyday life."

Lymphoedema Clinic

To better support our Lymphoedema patients, many of whom lack local assistance and can feel isolated by this chronic condition, we identified a need for a physical space where they could access both peer support and specialist advice. We recently held an engagement session, which was a great opportunity to gauge interest in setting up a dedicated Lymphoedema Support Group.

'After having treatment for lymphoedema in my legs I was invited to an engagement session. I have always been very conscious of my legs so coming to the session, I realised I was not alone. I met a lady next to me, exchanged phone numbers and stories. We kept in contact and we met again at the first support group meeting. It was so interesting and to know there are so many people like myself and very much suffering more than myself. It was informative and being told things I wasn't aware of. Very much looking forward to the next meeting'.

Our engagement session was a great success, with over 40 patients attending. This positive turnout led us to establish bimonthly Support Group Meetings to provide ongoing, regular support.



138 New Patients Seen



41% Increase

Family Support

Our Family Support and Palliative Counselling Service has continued to provide high-quality care to patients, carers, and bereaved family members at some of the most difficult times in their lives. We work alongside other clinical services in the hospice to provide support through counselling (both face-to-face and remote) and emotional support. We also continue to offer our bereavement group on a once-a-month basis, which remains a valuable resource for the communities we serve.

We are always striving to further enhance and strengthen our service. We are looking to forge deeper links and partnerships with other providers in the local area – for the very best care and outcomes for all who access our service. We are passionate about what we do and the care we provide – we aim for everyone who accesses our service to feel truly heard, supported, and valued.



849 Appointments and contacts



30% Increase

Carers Together Group

The 'Carers Together Support Group' is a partnership initiative with North Lincolnshire Carers Support Centre. The group runs monthly and is available for adult carers of people with life-limiting conditions, not only those known to the hospice, but also within the wider community. Every meeting, the group members are individually given the opportunity to share their experiences, access information, and receive a complementary therapy.

Within four months, the group evolved from five members to twelve. Based on the nature and content of the group, the hospice has received multiple direct referrals for individuals across North Lincolnshire into hospice services, including the wellbeing centre, respite, complementary therapies, and counselling.

feedback



feedback

The carers group is my lifeline, we are all friends together. We come from adversity and we leave with hope



We support an average of **12** carers per session

Clinical Compliance and Regulation – Care Quality Commission (CQC)

Lindsey Lodge Hospice is registered with the Care Quality Commission (CQC), the independent regulator of health and adult social care in England. The CQC monitors, inspects, and regulates services to ensure they meet fundamental standards of quality and safety.

Our most recent CQC inspection took place between 23rd March and 10th April 2024, during which inspectors reviewed key aspects of care delivery across our services, including safety, effectiveness, caring, responsiveness, and leadership. We were proud to maintain our rating of "Good," reflecting the high standards of care and professionalism demonstrated by our teams.

The inspection highlighted that they had assessed six quality statements from the "safe," "effective," "responsive," and "well-led" key questions. They found areas of good practice and combined the scores for these areas with scores from the last inspection. At this assessment, they found there was a strong focus on safety and noted that managers investigated concerns appropriately. Staff involved people in decisions about their care and treatment and supported them to ask questions. Lindsey Lodge was found to have clear and effective governance systems, which staff regularly reviewed.

The CQC reported that patient satisfaction with the service was high, with 531 compliments received in 2023/24 and one complaint received during this time. The complaint was not related to the care and treatment of the patients.

As part of our ongoing commitment to quality, we welcomed the feedback provided by the inspection team and have used it to drive further improvements. The CQC's feedback aligns with our values and our aim to continually improve. As a learning organisation, we remain open, reflective, and responsive to both external scrutiny and internal evaluation. We continue to monitor compliance against regulatory standards and strive for excellence in everything we do.

Lindsey Lodge Hospice is committed to working transparently with regulators, service users, and partners to ensure we deliver safe, effective, and compassionate care at all times.

Inspected and rated

Good



**Care Quality
Commission**

Bringing Electronic Prescribing into the Hospice Inpatient Unit

1

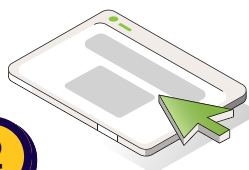


Background

During 2021, Lindsey Lodge Hospice and Healthcare (LLH) made a move to electronic prescribing. Our main drivers:

- Enhanced safety and quality from electronic prescribing
- Desire to become paper-light, in line with NHS initiatives
- Ability to prescribe remotely, linked to discussions at the time about alternative out-of-hours medical cover

2



Methods

There were a number of steps in the roll-out plan:

EPMA system

LLH was already using SystmOne for clinical record keeping. SystmOne is used widely in the locality with community and primary care services. After initial scoping, it was decided that we would use the SystmOne prescribing option. This required LLH to migrate to 'Palliative Hospital' Module first. F2F training with TPP was arranged for medical director, hospice IT lead and 2 senior nurses.

IT equipment and framework

A number of factors needed to be resolved ahead of the main roll out

- Enhance Wi-Fi coverage across the whole inpatient unit
- Purchase of suitable Workstation on Wheels (WOWs) – LLH uses laptops that are fixed to the WOW. 3 different WOWs were trialled before settling on the final choice – tested for functionality and stability (particularly across doorway thresholds).
- Ensuring enough power points in the location the WOWs would be stored when not in use.
- Purchase of laptops for WOWs and on-call doctors.
- Installation of Listener Client Unit (Stand-alone PC used for Business Continuity purposes only). This unit backs-up all medication charts every 15 minutes, which can then be printed in the event of power, internet or server loss. Both this unit and the printer are connected to the hospice generator.

Other steps

- The population of hospice 'formulary' within the EPMA system. Within SystmOne these are pre-populated prescribing templates. We created these for all stock items.
- Setting up the system with agreed rules for the functionality within our unit
- Training for staff – prescribing and administration
- F2F Roll Out support to staff on change of shift – this was planned for the first week, but was only needed for 2 days then staff felt confident to cascade train colleagues. A step-by-step Word document was shared with all clinical staff

3



Results

The system went live February 2022.

Staff have fed back that they much prefer this way of administering medication than paper form.

Patient safety and quality of care has been enhanced – prescribing errors reduced by 15% in the first year (table 1), timely prescriptions out of hours (including CDs). The hospice has reduced paper usage to assist in environmental sustainability, albeit increased use of electronic devices.

	HUK Av	LLH	Administration %	Bed Base	Admissions	Error Per Patient	Incident rate per drug admin %
2021/22	10.4	10	60%	10	264	0.037	0.05
2022/23	9.3	12	75%	16	374	0.032	0.021

4



Complications

The main issues we have had relate to loss of internet, power or server. We were initially advised by our IT provider (external) that we did not need a Listener Client facility. After two incidents within the organisation of interruption to our internet provision (both out of hours), the Listener Client was installed and would be seen as a vital step for all organisations in the business continuity plan for electronic prescribing.

For our system, there are alerts flash on the screen when prescribing/administering medication that notify if the Listener Client has not been able to complete the back up. Staff are aware this requires them to contact our IT provider to investigate and rectify the issue.

5



Scan the QR code for a 30 minute video demonstrating the EPMA system

Next Steps

Data intelligence – The SystmOne reporting tools have provided data to assist with more intelligent stock supply and figures on number of administrations allows a percentage error rate for monitoring through Quality Governance. Discharge documentation is auto-populated from the medication chart to reduce errors and omissions in the transfer of information to GPs.

We are working on how we can integrate pharmacy order forms into the system to support more automated medication ordering with our new pharmacy provision.

Training and Education

Training our Team

Mandatory training (e-learning, workbooks, face-to-face) continues to include: fire safety, infection prevention and control, deprivation of liberty safeguards, record keeping, health and safety, safeguarding adults and children, moving and handling, and basic life support. This year, we have achieved a mandatory training completion rate of 98% across both clinical and non-clinical teams.

Mandatory training has been refreshed to include new learning, such as falls awareness. The need for this training was identified through clinical audit and incident analysis of themes and trends. The training included safe moving and handling techniques post-falls and documentation. We adopted a new approach to the sessions by focusing them over a specified week, which proved highly successful as it focused discussions. The training was incredibly well received by staff, and we have seen clear evidence of the training in practice through audit and record keeping.

We recognised that we needed to improve our equality, diversity, and inclusion training, and we rolled out unconscious bias training to almost 100 staff members. Feedback from the learning has been good and generated greater discussion and reflection.

Our in-house learning and development programme for staff included over 50 different sessions, including statement and report writing, palliative care courses for Registered Nurses, duty of candour, controlled drugs, tissue viability, MS Teams, and Dementia Friends.

We continued to support staff learning through the apprenticeship scheme, including fundraising staff, Level 5 operational management, Level 7 advanced clinical practice, Level 2 health and social care, and Level 7 strategic leadership.

Priorities for 2025/26 include strengthening our induction process for all new starters, leadership, and quality improvement training.



98% Mandatory training compliance



61 In house training and education events

Training in Partnership

Working in partnership with The University of Hull, and Hull and York Medical School we have continued to offer placements for learning and clinical practice to a wide range of student health care professionals including Medical students, student nurses, paramedic students and student counsellors.



During 2024/2025 we entered into a new partnership with The University of Lincoln to offer practice placements for student pharmacists undertaking the Masters programme. This new initiative meant that we worked with the university in support of the programme accreditation, which included work with the General Pharmaceutical Council.

We have offered in excess of 75 insight days to a wide range of health and social care professionals so that they may experience what specialist palliative and end of life care is. We have also offered longer term clinical placements for students undertaking health and social care courses at local colleges as well as for those aspiring for future careers in healthcare. These days and placements are always popular and offer an opportunity to showcase our care and spread understanding of palliative and end of life care.



78 Multi professional insight days provided

"I learnt not only about the pharmacological management of patients in palliative care but also had the opportunity to learn and see the importance of the non-pharmacological approaches to care which is something which I would not have experienced in other setting" - 4th year pharmacy student

"I was made to feel very welcome and found the opportunity to gain understanding of your clinical provision. The whole team on the shift were so accommodating and demonstrated their clinical skills and knowledge to assist my understanding of hospice care"

"Everyone provided a calm and safe learning environment which I appreciated very much" - College Learning Facilitator

2025 – 2026 Quality Priorities



- **1** To become a research ready organisation
- **2** To strengthen leadership across the organisation, in line with the values and behaviours
- **3** To develop and strengthen our patient and carer feedback and the way this is captured and shared
- **4** To continue to strengthen Quality Improvement

Message from our Director of Clinical Services



Helen Turner

Director of Clinical Services
& CQC Registered Manager

As we close this year's Quality Account for Lindsey Lodge Hospice and Healthcare, I would like to extend my sincere thanks to every member of the Lindsey Lodge team for your unwavering commitment and hard work.

This Quality Account demonstrates the improvements achieved across all our clinical services.

This year we welcomed the Care Quality Commission for a routine inspection, and I'm incredibly proud that we maintained our 'Good' rating. This is a testament to the high standards of care, compassion, and professionalism you demonstrate every day. I would like to extend my heartfelt gratitude to each and every one of our clinical and non-clinical staff and our dedicated volunteers.

We also made significant strides in delivering against our quality priorities, including the development of our Clinical Strategy. This strategy reflects our shared vision for the future—balancing quality, sustainability, and innovation—while staying rooted in the needs of our patients and their families. While the final strategy had to take into account the financial and operational challenges we face, it was built on a shared ambition for the future—one that puts patients first and ensures we continue to deliver safe, sustainable, and meaningful care. Thank you to everyone who contributed their insights and energy to this vital piece of work.

Your dedication continues to drive improvements, and together, we are creating a service that is resilient, responsive, and reflective of best practice. I am incredibly proud to work alongside you all.

Thank you for everything you do.



Thank You

Thank you for all your support in our 2024/25 year.



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