Moya Cole HOSPICE

Quality Account 2025/26

A report detailing the quality of the healthcare services provided by Moya Cole Hospice, Greater Manchester

www.moyacole.org.uk

Registered charity number 258085

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Part One: Chief Executive's statement

On behalf of everyone at Moya Cole Hospice, I'm delighted to present our Quality Account for 2025–2026. Our Board of Directors has reviewed this report and is satisfied that it offers a fair and accurate view of our quality and performance across the year.

Over the past 12 months, our teams have continued to deliver outstanding care in the face of ongoing financial pressures that are being felt across the hospice sector and beyond. I am hugely grateful for the skill, compassion and determination shown every day to ensure patients and families receive the support they need. Alongside this, we have worked proactively with partners and peers, including our fellow Greater Manchester hospices, to strengthen the case for long-term, sustainable hospice funding, and we have used every opportunity to ensure decision-makers hear the realities of delivering end-of-life care.

This year has also marked a significant step forward for us as we became Moya Cole Hospice. While our name has changed from St Ann's Hospice, our commitment to outstanding care for our patients and our loved ones remains the same. Our change in name honours our founder Dr Moya Cole who was tenacious in her commitment to hospice care and we are inspired by her every day.

This year we move closer to completing our new hospice in Heald Green. Seeing the building take shape has brought years of planning into sharp focus, helping us picture the spaces where patients and loved ones will be cared for in the future. When it opens, this facility will be a defining milestone for our hospice. It will enhance the environment in which our expert staff already provide exceptional care, creating new opportunities to improve how we support people living with life-limiting illness.

As you read this Quality Account, I hope what stands out is how much progress has been achieved through teamwork and collaboration. At Moya Cole Hospice we believe we are stronger together. Across our inpatient units, community teams, support services and business development teams, and alongside NHS colleagues and community partners. These relationships, and the shared commitment that sits behind them, enable us to keep improving the care we provide and the experience we offer to everyone who relies on us.

This report can only capture a snapshot of the commitment and hard work taking place across the hospice, but it reflects the momentum we have built and the standards we set ourselves. We will not stand still. We will continue to learn, to innovate and to focus relentlessly on what matters most. That is to provide the high-quality palliative and end-of-life care we would want for ourselves and for those we love.

Rachel McMillan
Chief Executive, Moya Cole Hospice

About Moya Cole Hospice and how we service Greater Manchester

In the course of a year, Moya Cole Hospice provides care to numerous individuals and their families and carers who are affected by life-limiting illnesses and are over the age of 18. Our services are delivered in collaboration with acute hospitals, community services, local authority social care providers and voluntary organisations to provide tailored care that is special and unique to each individual.

We support patients, their families and loved ones throughout their illness journey, from diagnosis to treatment and beyond. Our range of services is provided from our Heald Green and Little Hulton sites, as well as various community and outreach services. Approximately one-third of our patients are discharged after treatment.

Moya Cole Hospice Purpose and Core values

Purpose

Moya Cole Hospice is committed to providing excellent, patient-centred care and support to those affected by life-limiting illnesses. Our purpose is the driving force behind our clinical care, and informs the development and delivery of our services.

Core values

Our core values guide our actions and interactions with patients, families, carers, and colleagues, and are essential in creating a positive and compassionate environment. Our values and associated behaviours are embraced by all members of our organisation, regardless of their role or position. We recognise the significance of these values in achieving our mission and vision, and strive to practice them in everything we do. Our core values are:

People matter

People are at the centre of everything we do. We treat each other, and ourselves, with kindness and compassion. We value and celebrate diversity; recognising everyone as an individual.

Brave and bold

We want to grow for the future, not settle. We're not afraid to do things differently, get creative, challenge ourselves and the status quo. We're ambitious in our aims, accountable for our actions and learn from our experiences and successes.

Lead and learn

We're experts in what we do, and we don't stop there. We're always learning; informing and shaping the sectors we're in through education, training and research. We lead by example; sharing best practice, advancing in our fields and pioneering new approaches.

Together we are stronger

Together, we're stronger and have a bigger impact than we could have alone. As a charity, we work in collaboration with supporters, partners and the communities around us. We think beyond traditional boundaries to make sure we're here for our communities for years to come.

In order to ensure that our core values remain central to our work and are practiced by all staff, we have implemented various measures. One of these measures is the Performance Development Review (PDR) programme, which requires staff to provide evidence of the behaviours that align with our values. Additionally, we use values-based interviewing when recruiting new staff to ensure that their values align with our own. These measures help us to maintain a strong culture that is guided by our core values.

Summary of the quality of services provided

Moya Cole Hospice is one of the oldest and largest hospices in the UK, providing care and support to the diverse and growing population of Greater Manchester and parts of Cheshire each year.

Our services include inpatient care, outpatient care, community care, rehabilitative care, and bereavement support. Our core purpose is to provide excellent care and support to people living with, or impacted by, life-limiting illnesses.

We are proud to present an overview of the quality of our clinical services over the past year.

During 2025/26, Moya Cole has provided the following services:

- Inpatient units
- Interventional outpatient services
- Medical outpatient services
- Hospice@Home services (Salford and Trafford only)
- Community specialist palliative care (Salford only)
- Rehabilitation services
- Patient and family support services
- 24-hour advice line
- Homeless palliative care service
- Lymphoedema service
- A joint MND clinic with Salford Royal NHS
- Foundation Trust
- Education, research involvement, and student placements

Our clinical services are provided by a multidisciplinary team comprising of:

- Doctors, including palliative medicine consultants
- Clinical nurse specialists, registered nurses, advanced practitioners, trainee advanced practitioner, assistant practitioners, and healthcare assistants
- Pharmacists and pharmacy technicians
- Therapists to support independence, including physiotherapy, occupational therapy and complementary therapy
- Social workers
- Chaplain
- Counsellors
- Clinical administrators
- Homeless palliative care co-ordinator
- Support services providing cleaning, catering and laundry services for patients

Our services remain open to individuals impacted by life-limiting illnesses, regardless of race, religion, gender, sexual orientation, or diagnosis. We offer care to those managing various conditions such as cancer, neurological disorders, and end-stage organ disease.

Our strategy

In April 2025, we launched our new Clinical Strategy 2025–2030. Shaped through a comprehensive consultation with patients, carers, staff, volunteers, partners, commissioners and local communities, this strategy sets out how we will continue to evolve our clinical services in response to rising demand, workforce pressures, demographic changes and the shifting landscape of palliative and end-of-life care locally and nationally. It is grounded in national frameworks including the National Ambitions for Palliative and End-of-Life Care (2021–2026), the Greater Manchester Palliative and End-of-Life Care Commitments (2019) and the National Adult Specialist Palliative and End-of-Life Care Service Specification (2023), ensuring alignment with broader NHS and system priorities.

The new strategy emphasises personalised, equitable, digitally enabled care and sets out five strategic priorities for the next five years:

1. **Empower individuals impacted by life-limiting illness to live well, identify what matters most and plan for the future,** including expanding holistic rehabilitation and widening the use of patient-reported outcome measures such as IPOS.
2. **Improve equity of access to hospice services,** so that underserved and diverse communities in Greater Manchester can benefit from specialist hospice support, including targeted outreach, enhanced cultural competency and more community-based service delivery.
3. **Enhance the delivery of care and support across our new Heald Green hospice and refurbished Little Hulton sites,** using modern, purpose-built facilities and our Digital Strategy 2025–2030 to drive innovation, improve efficiency and support the best possible patient experience.
4. **Ensure sustainability and future-proof hospice services,** supported by strong partnerships, a thriving, values-based culture, effective workforce planning and robust financial stewardship.
5. **Foster research, innovation, quality improvement and professional development in clinical services,** ensuring we remain at the forefront of specialist palliative care through evidence-based practice, education and collaborative research activity.

This ambitious strategy will guide clinical development during a period of major organisational transformation including the opening of our state-of-the-art Heald Green hospice and future redevelopment of Little Hulton. These facilities, combined with digital innovation, will enable us to modernise care delivery, improve access, enhance patient outcomes and ensure long-term sustainability.

Our strategic direction remains firmly rooted in collaboration. We continue our strong involvement in the Greater Manchester Hospices Collaborative, working collectively to address system pressures, share best practice, reduce inequalities and strengthen the resilience of hospice services across the region. This partnership, alongside our relationships with NHS providers, community services, Integrated Care Boards, local authorities and voluntary organisations supports strategic resource planning and ensures our services are aligned with population needs and integrated care priorities.

As we deliver the Clinical Strategy 2025–2030, our focus will remain on providing outstanding, person-centred care, supporting our workforce, modernising our services and ensuring financial sustainability. This strategy represents a bold and forward-looking vision for the future of hospice care in Greater Manchester one that enables us to continue meeting the needs of patients, families and communities with compassion, expertise and innovation for many years to come.

Progress against our clinical strategic priorities:

Strategic Priority 1: Empower individuals impacted by life-limiting illness to live well, identify what matters most and plan for the future

Over the past year, Moya Cole Hospice has continued to strengthen its commitment to person centred care by embedding approaches that help people identify what matters most to them and plan for their future care. Teams across inpatient, outpatient and community services have increasingly integrated these conversations into routine practice, supported by improved templates, staff education and quality improvement work. Symptom focused care has also been enhanced through more consistent use of recognised outcome measures, helping teams better understand patients' experiences and tailor care accordingly. Support for carers has been further developed with the introduction of new tools and training, ensuring families are recognised as key partners in care.

Strategic Priority 2: Improve equity of access to hospice services

Throughout the last 12 months, the hospice has deepened its focus on ensuring services are accessible and inclusive for all communities. Work to broaden access for people with non cancer conditions continued across clinical teams, supported by strengthened referral pathways and more flexible service models. New initiatives, such as the dementia café at Little Hulton, have created welcoming spaces for people living with dementia and their carers, while partnerships with local organisations have extended the hospice's reach into underserved areas. Cultural competence has been embedded into staff development, helping ensure that every person is treated with dignity, respect and sensitivity to their individual priorities and backgrounds.

Strategic Priority 3: Enhance the delivery of care and support in the new Heald Green hospice and refurbished Little Hulton sites

The hospice has made substantial progress in preparing for the transition to the new Heald Green site and the refurbishment of Little Hulton. Detailed planning, staff engagement and structured readiness work have ensured that clinical teams are well prepared for the changes ahead. Equipment needs have been reviewed and agreed, departmental processes updated and staff orientation plans developed to ensure a smooth transition. Alongside the physical estate work, digital improvements - such as electronic whiteboards and enhanced scheduling tools have supported more efficient communication and service coordination.

Strategic Priority 4: Ensure sustainability and future-proof hospice services

We have strengthened the long term sustainability of hospice services by fostering a positive, values driven culture that supports staff to thrive and deliver high quality care. Workforce sustainability has been enhanced through strong engagement in performance processes, ongoing professional development and targeted workforce planning to improve recruitment and retention. We have ensured that the organisation and our workforce remain fully informed about the developments related to the Terminally Ill Bill for Adults. Staff have also been provided with safe and supportive spaces to ask questions and explore potential implications, enabling proactive preparation for any future legal, ethical or clinical changes. Active clinical link groups and participation in sector wide professional forums have strengthened shared learning and collaboration, ensuring our services remain responsive, resilient and future ready.

Finally, operational sustainability has progressed, including ongoing efforts to reduce medicine waste, improvements in stock management, more streamlined internal processes and increased use of digital systems to enhance efficiency.

Strategic Priority 5: Foster research, innovation, quality improvement and professional development in clinical services

Over the course of the year, Moya Cole Hospice has continued to cultivate a culture of innovation and continuous improvement. Multiple quality improvement projects progressed across clinical areas, focusing on enhancing safety, communication and the digital experience for both patients and staff. The hospice has also contributed to wider sector learning, with staff presenting at national conferences and actively engaging in shared learning networks. Professional development has been strengthened through active clinical link groups, increased access to education and ongoing work to embed user feedback in service development - particularly through projects involving carers. These efforts support the hospice's ongoing role as a leader in specialist palliative care innovation and best practice.

Progress against our organisational strategic aims:

Strategic Aim 1: To provide outstanding person-centred care that is innovative and evidence-based.

Over the past year, Moya Cole Hospice has strengthened its delivery of personalised, compassionate, and holistic care. Teams across inpatient, outpatient, and community services have become increasingly confident and consistent in supporting patients to explore what matters most to them and to participate actively in planning their future care. Improvements were driven by revised documentation templates, targeted staff education and focused quality improvement initiatives, which together enhanced both the quality and visibility of these conversations across clinical pathways.

Symptom focused care has also progressed. There has been more consistent use of recognised outcome measures, with clinical teams embedding these tools into routine assessment, review and discharge planning. This has supported the delivery of care that is responsive, evidence-based and aligned with each individual's needs and goals. Rehabilitation, community and outpatient teams have particularly strengthened their use of these measures, helping ensure that interventions remain purposeful and person centred. Carer support has been further improved through the rollout of the Carer Support Needs Assessment Tool (CSNAT), creating a more structured, holistic approach to understanding and addressing family wellbeing.

In addition to improvements in direct clinical care, we have continued to invest in the development, engagement and capability of our workforce. Staff across all disciplines have participated in a wide range of internal and external education programmes covering advanced communication skills, symptom management, frailty, safeguarding, psychological safety and evidence based palliative rehabilitation approaches. These opportunities have strengthened clinical confidence and ensured that our teams remain up to date with best practice and emerging developments in palliative and end of life care.

Active participation in clinical audit and service evaluation has supported continuous learning and improvement. Multidisciplinary staff have contributed to local audit cycles focused on documentation quality, outcome measure use, infection prevention and prescribing safety. Findings from these audits have directly informed updates to practice, strengthened governance and helped refine clinical pathways further demonstrating this aim.

Strategic Aim 2: To lead the sector in education, research and innovation.

Throughout the past 12 months, the hospice continued to build its reputation as a national leader in specialist palliative care education, research and innovation. Multiple clinical teams progressed meaningful quality improvement projects that enhanced safety, communication and digital working. Staff across professions contributed to national conferences, webinars and professional forums, sharing learning and showcasing innovations in areas such as digital handover, symptom management and service development. Engagement in research and innovation has also grown. Several members of staff have taken part in regional and national research activity, including participant recruitment and data collection.

Professional development was enriched through the continued growth of clinical link groups, improved access to training and the rollout of structured supervision approaches. The launch of a refreshed preceptorship framework provided new nurses with additional support and clinical guidance, helping to embed a culture of continuous learning. The hospice also began embedding user experiences into service development - particularly through work with carers - ensuring improvements are informed by real lived experience.

We have strengthened our leadership development offer and expanded our contribution to sector-wide learning. Our Inspire Leadership Development Programme secured a further five years of Quality CPD accreditation from the University of Salford, reinforcing its academic rigour. We opened attendance to external delegates, supported 12 colleagues to complete the programme and continued to develop future leaders through our Aspire pathway, with two colleagues successfully completing the course.

We continued to deliver high quality education and training, including two three day Palliative Care Courses in April and August 2025, attended by internal and external participants. Our Leadership Exchange Network (LEN) and LEN Bitesize sessions provided ongoing support for leaders across the hospice, covering topics such as effective feedback, emotional intelligence, recruitment best practice, compassion fatigue and bereavement and grief. Alongside this, we maintained a broad training offer supported by external partners and continued to support apprentices at Levels 5 and 7.

Clinical education and workforce development have remained key priorities. The Inpatient Unit Induction Programme supported new Healthcare Assistants and Registered Nurses throughout 2025, enhanced by direct input from the Clinical Education team from day one.

The team also introduced a new clinical skills booklet, including an in house preceptorship option, significantly improving support for newly qualified nurses.

We continued to contribute to the development of the future health and care workforce by hosting students from a wide range of clinical degree programmes, including Nursing, Medicine, Graduate Entry Medicine (GEM), Pharmacy, Physiotherapy, Counselling and Paramedicine, ensuring we play an active role in shaping the next generation of professionals in the sector.

Strategic Aim 3: To be an organisation of choice for all.

Over the course of the year, the hospice has continued to improve access to services and ensure that care is inclusive, culturally sensitive and accessible to all who need it. Services worked proactively to support more people with non cancer conditions, reflecting changing community needs and strengthening alignment with national palliative care priorities. Establishing a dementia café at Little Hulton created a new point of support for people living with dementia and their families, strengthening partnerships and widening access.

Equity and inclusion were strengthened across clinical teams through the integration of culturally competent practice into staff development and performance reviews. This focus on values based, person centred communication helped ensure staff feel confident exploring personal priorities, cultural needs and individual preferences with every patient. These achievements reflect the hospice's commitment to ensuring that all communities feel welcomed, respected and supported.

Throughout the last year, we have continued to strengthen our culture and commitment to our people. We celebrated 25 years of continuous Investors in People (IIP) accreditation, completed an interim IIP questionnaire, and introduced the Freedom to Speak Up Guardian role to further support openness and psychological safety. We also gathered staff feedback through an Employee Check In survey and facilitated Schwartz Rounds to support reflective practice and emotional wellbeing.

We focused on attracting and retaining talent by reviewing our remuneration framework, implementing workforce plans ahead of our move to the new building and launching a Registered Nurse Employee Value Proposition. Our annual Celebration Event and a dedicated Wellbeing Week further reinforced our commitment to recognising and supporting staff and volunteers.

To improve the systems that enable colleagues to work effectively, we implemented a new integrated People, Payroll and Learning Management system, provided training to maximise its use and transitioned paper-based records into a secure digital format. Together, these developments demonstrate our ongoing progress towards being an organisation where people feel valued, supported and proud to work.

Strategic Aim 4: To sustain and further develop a values-based culture within which there are high-performing people and teams.

Over the past year, the hospice has continued to nurture a positive, values-driven culture that supports its workforce to thrive. We have continued to invest in our people, ensuring that staff feel valued, supported and able to deliver high quality care. Strong engagement with performance and development conversations, access to supervision and training opportunities has supported staff growth, wellbeing and career aspirations. Recruitment and retention remained stable across clinical teams, supported by targeted workforce planning, the launch of a structured preceptorship programme and better access to training.

Collaboration and shared learning were promoted through active clinical link groups, which brought together staff to address key clinical themes and share best practice. These efforts have helped strengthen a positive, values driven culture where people feel empowered and supported to deliver outstanding care.

We have further strengthened our values based culture by preparing our workforce for the transition to the new building through 32 Workforce Orientation Tours and our ongoing comprehensive Training Needs Analysis to ensure colleagues are fully equipped for the move to our new site. We also delivered New Build and You workshops, using the William Bridges transitions model to support staff through change.

We ensured strong foundations for high performing teams by maintaining full compliance with mandatory training and updating our framework in line with the Core Skills Framework following statutory changes. Career Pathways within the Community Specialist Palliative Care team were further promoted to strengthen development opportunities and the People Managers Toolkit was evaluated to ensure it remains accessible and effective for leaders.

To enhance performance and team culture, we continued to develop our new People Database to improve sickness recording and departmental insights. We also relaunched our recognition programme as Mark the Moment, creating a more visible and engaging platform for colleagues to celebrate one another's contributions through peer to peer recognition.

Strategic Aim 5: To ensure our buildings, estate and facilities are fit for the future to enable the delivery of outstanding person-centred care.

Throughout the last 12 months, we have made significant progress in modernising our estate to support outstanding patient centred care. Most notably, we completed the construction of a new, purpose built hospice at the Heald Green site, designed to the highest specification with bespoke, patient focused spaces. The new environment includes single en-suite rooms with private courtyards, sanctuary gardens, multi bed bays and shared social spaces that offer a calm, dignified and welcoming experience for patients, families and visitors. A new café with an open kitchen, garden views, artistic features and banquette seating has also been created to serve both the hospice community and the wider public. We have also installed EV charging points and sourced premium new goods ranges to create an inviting reception space.

Alongside these major developments, we have continued to invest in the resilience and sustainability of our existing estate. A full review of the Little Hulton site has been completed to assess the performance of critical plant and equipment to plan for future infrastructure replacement. We have also explored opportunities to decarbonise the site through air source heat pump technology powered by renewables and we used the charity grant process to support the design of a new electronic nurse call bell system.

We have delivered significant digital innovation to strengthen safety, governance and organisational resilience. We launched our first Digital Strategy, setting a clear direction for how technology will enable high quality, patient centred care. To ensure safe and responsible adoption of emerging technologies, we introduced our inaugural Artificial Intelligence (AI) Policy, supporting staff to use AI tools ethically and effectively. New electronic whiteboards have been implemented across clinical areas, improving visibility of patient information and enhancing real time decision making and oversight.

Digital platforms have been utilised to improve data capture and reporting, increasing efficiency across facilities management processes. We have also installed electronic sign in devices at both hospice sites, improving security, compliance and the accuracy of workforce and visitor monitoring. Alongside these initiatives, substantial upgrades to our digital infrastructure have strengthened system reliability and resilience, ensuring staff can depend on secure, modern technology to deliver safe and efficient care.

Finally, we have completed external decoration of our charity shops and Distribution Centre, ensuring all public facing elements of the organisation reflect the quality, care and professionalism that underpin our values. Together, these improvements demonstrate our continued commitment to creating safe, modern and sustainable environment.

Strategic Aim 6: To be financially viable and develop growth in our business for future sustainability

Over the past 12 months, we have strengthened the commercial performance of our Trading operations, creating a more recognisable and modern retail offer through the full rebrand of our charity shops, distribution centre and collections vehicle. We expanded our product range by launching an exclusive Moya Cole candle line and introducing a premium new goods offer across retail shops, online platforms and hospice receptions. Strong engagement with the community delivered excellent results: our Romiley shop won the North West Favourite Charity Shop Award, we completed 21 house clearances generating over £32,000, ran successful distribution centre clearance sales and increased corporate stock donors to eight national suppliers. Seasonal activity also performed strongly, with the sale of more than 9,000 Christmas cards raising £24,575. We further enhanced income streams by becoming the official partner of the National Wedding Show in Manchester.

Our lottery and raffle programmes continued to perform well and support long term financial sustainability. We secured agreements to promote the lottery in two major supermarkets, resulting in over 1,600 new entries and delivered successful Summer and Winter raffles generating more than £43,800 in sales and £13,000 in donations. We also implemented targeted campaigns to increase income from existing players, expected to generate an additional £12,000 annually. Wider communication efforts - including weekly results emails, Friends magazine features and social media campaigns - helped increase engagement, while the lottery was successfully rebranded in line with the wider hospice identity.
In Finance we made targeted improvements to strengthen resilience and future growth. We invested in a digital Accounts Payable system, improved month end efficiency through role redesign and strengthened financial controls to ensure more accurate and timely reporting.

In Fundraising we increased income across corporate, trusts, foundations and individual giving streams (non-capital). Key achievements included partnering with the Manchester Half Marathon, where over 200 runners raised more than £70,000, launching a new Altrincham Fundraising Group who raised over £7000 at their first community event and hosted a flagship lunch event that raised £40,000 with Emma Neville. In addition, we delivered our first successful Gifts in Wills event leading to new legacy pledges and promoted our monthly donation sign ups and volunteering offers. Most significantly, we completed the £2 million capital campaign for the new Heald Green hospice, securing essential funds for long term sustainability and growth.

Our Marketing and Communications team has supported both the Trading and Fundraising teams to promote their income generating activities. This is through direct mail campaigns to supporters and our community, targeted social media advertising and email communication with our supporters.

Our future plans

Clinical Services:

- As we move into the second year of our Clinical Strategy 2025–2030, Moya Cole Hospice is entering a pivotal phase of transformation, growth and renewed ambition. Building on the momentum from the successful first year of delivery, our future direction is shaped by three core drivers: the transition into our new, purpose-built hospice in Heald Green; the continued evolution of clinical services across Greater Manchester; and our active role in influencing future models of palliative and end-of-life care at both regional and national levels.
- The year ahead will focus on ensuring a smooth and well-supported transition into the new Heald Green site, a once-in-a-generation opportunity to redesign the way specialist hospice care is delivered. This move represents far more than a change of building it marks a step-change in how we integrate digital innovation, therapeutic design and modern clinical practice to enhance the patient, family and staff experience.
- Over the coming year, we will prioritise maintaining uninterrupted, high-quality care during the transition and embedding new ways of working that make full use of our improved physical environment and digital infrastructure. Alongside this, we will continue progressing our redevelopment plans for the Little Hulton site, ensuring that staff based there remain fully informed, engaged and supported throughout the process and that the digital innovations, environmental improvements and enhanced models of care introduced at Heald Green are replicated and adapted for the Little Hulton site.
- Throughout 2026/27, we will also maintain a strong focus on equity of access. We aim to adapt our service model so that individuals from all backgrounds including those living with dementia, people with non-cancer diagnoses and communities historically underrepresented in hospice care are better supported.
- Our digital transformation journey will further enhance this ambition, improving data insight, real-time clinical information and the efficiency of workforce and operational processes.
- Workforce development will remain a central priority, particularly as we prepare for service expansion and new models of care delivery.
- We will continue to embed a value-driven culture, support staff through professional development and leadership opportunities and strengthen recruitment and retention. The new hospice environment gives us the opportunity to design future workforce models that are modern, flexible and sustainable.

People and Culture:

- We will continue to invest in developing our people and strengthening our culture to ensure we remain an organisation where colleagues can thrive. A key priority is the launch of our new Mentorship Programme for leaders in April 2026, providing structured support to help leaders grow capability and confidence. We will also continue embedding our in house Nursing Preceptorship Programme and delivering our three-day Palliative Care Course at least twice a year, extending participation to external delegates to generate income and enhance sector learning. Alongside this, we will expand career pathways across additional roles to strengthen succession planning and support the retention of our talented workforce.
- As we transition into the new Heald Green building, we will focus on ensuring the workforce is supported to embed new processes and ways of working. Becoming a Level 3 Disability Confident Leader Employer is a key ambition, demonstrating our commitment to accessibility and inclusion.
- We will also continue to strengthen psychological safety and trust across the organisation - fostering open communication, empowering decision making and supporting

wellbeing. Further initiatives to enhance equality, diversity and inclusion will remain central to our culture building work.

- To ensure our systems evolve in line with organisational needs, we will continue to explore opportunities to maximise efficiency within the People Database as the platform becomes fully established.
- We will also review opportunities to develop and expand the hospice's external education offer, supporting our reputation as a centre of excellence while creating additional income opportunities.
- Ongoing review of flexible and agile working practices will help ensure we remain responsive to workforce needs and positioned as an employer of choice for the future.

Facilities:

- We will focus on maximising the opportunities presented by our new Heald Green hospice. A key priority will be opening the new café to the public, creating a welcoming community space that also supports income generation. We will deliver a strong corporate offer by utilising our high quality training and meeting rooms alongside a premium hospitality service, helping to position the hospice as a venue of choice for external partners. As part of the transition, we will manage the move into the new building using 'soft landing' principles to ensure a smooth, supportive and well coordinated process for all teams, while also planning and executing the decommissioning of the existing Heald Green site.
- Beyond the move, we will continue to invest in the long term sustainability of our estate. This includes developing a phased plan for the further redevelopment of the Little Hulton site and expanding the use of SMART technologies to enhance monitoring, efficiency and overall estate performance. These developments will support a modern, resilient and future ready environment for patients, staff and the wider community.

Digital:

- We will focus on delivering Year 2 of our Digital Strategy and ensuring technology plays a central role in supporting the transition into the new hospice build. We

will continue to strengthen digital foundations by further modernising core systems, expanding the use of data to inform decision making and enhancing clinical technologies that directly support patient safety and care coordination. Alongside this, we will continue embedding digital skills across the workforce and progressing information governance and cyber security improvements, ensuring the organisation is well prepared for a digitally enabled environment that supports the highest standards of care.

Trading Company:

- We plan to strengthen income generation by developing our distribution centre to support future online sales growth and expanding our Moya Cole Hospice branded new goods range. We will introduce digital Gift Aid sign up in shops, alongside AI powered listing and donation valuing tools to improve efficiency. Our lottery will continue to grow through increased face to face and telephone promotion across local venues, supported by system improvements to handle rising membership. We will also review the 2025/26 social media campaign to shape more effective, targeted campaigns going forward.

Finance:

- We will focus on strengthening financial consistency, efficiency and capability across the organisation. We will align coding structures and financial processes across the hospice and Trading accounts to ensure greater accuracy, transparency and comparability in reporting. Alongside this, we will continue to build deeper expertise in our digital systems and organisational platforms to streamline processes and produce more insightful management information. We will also invest in developing the skills of the Finance team, enhancing efficiency and effectiveness while supporting ongoing professional growth.

Fundraising:

- We will build on the visibility gained through the capital appeal to attract new donors across all fundraising streams, while strengthening our corporate fundraising capacity and launching a refreshed corporate offer. We will also use AI to enhance donor stewardship and develop the new site's café into a welcoming community destination. Alongside this, we will explore and implement wider business development opportunities to maximise the site's income-generating potential.

Marketing and Communications

- We will continue to build awareness of the hospice sector and promote our services to our community. We will strive for a digital first approach to all of our patient communications whilst ensuring accessibility is met for all. Social media and in particular video content will play an important role in our communications and we will use strong patient, staff, volunteer and supporter stories to bring our services to life and illustrate our work through their experiences. The Marketing and Communications team will launch a Comms Champions initiative with staff and volunteers to support with finding these stories and increase engagement with our news sharing. Our expert voice section of our website will be developed to share more of our colleagues expertise and develop this initiative to gain more media coverage.

Our aspirations and forward direction

Our aspirations for the year ahead extend beyond our organisational boundaries. Moya Cole Hospice is working collaboratively with NHS partners, Greater Manchester Hospice Collaborative colleagues and system leaders to shape the Modern Service Framework for Palliative and End-of-Life Care. This work is vital in ensuring that future national and regional frameworks reflect the realities, complexities and strengths of hospice care. Through shared intelligence, joint innovation and collective leadership, we aim to influence models that support integrated, responsive and equitable care for all who need it.

Overall, our forward direction is characterised by ambition, partnership and a commitment to delivering outstanding care in a rapidly changing landscape. The opening of the new Heald Green hospice, coupled with the continued implementation of our five-year clinical strategy, positions us to grow, innovate and respond to the needs of our communities with compassion, expertise and confidence. The year ahead will be one of transition, collaboration and progress strengthening our role as a leading provider of specialist palliative and end-of-life care in Greater Manchester.

Part Two:

Our services

Moya Cole Hospice delivers specialist palliative and end-of-life care in partnership with commissioners across Greater Manchester. Our services are commissioned by six localities within the Greater Manchester Integrated Care Board, with four of these operating as part of a consortium led by Stockport and including Manchester, Salford, Trafford and the neighbouring Cheshire and Merseyside Integrated Care Board. This collaborative commissioning model, combined with our cross-site service delivery, strengthens patient choice and enables us to provide consistent, high-quality care that achieves the best possible outcomes for people regardless of diagnosis, background or place of care. Our services are delivered across two hospice sites Heald Green and Little Hulton allowing us to support a population of more than two million people across Greater Manchester and Cheshire.

Statutory Requirements

Services

During 2025/26, Moya Cole Hospice provided eleven relevant health services. Moya Cole Hospice has reviewed all the data available to them on the quality of care in all eleven of these relevant health services. This information can be found within part three of this Quality Account.

Income

The income generated by the relevant health services reviewed in 2025/26 represents 38% per cent of the total income generated from the provision of relevant health services by Moya Cole Hospice for 2025/26.

National clinical audits, local clinical audits and national confidential enquiries

During 2025/26, the number of national clinical audits and national confidential enquiries which covered the relevant health services that Moya Cole Hospice provides was NIL.

The number of national clinical audits and national confidential enquiries that Moya Cole Hospice was eligible to participate in during 2025/26 was NIL.

The reports of 18 local clinical audits were reviewed by the provider in 2025/26 and Moya Cole Hospice intends to take the following actions to improve the quality of healthcare provided:

- Standardise the discharge letter template across both hospice sites and ensure it includes a dedicated section to record and where appropriate, provide further detail on the patient's resuscitation status.
- Enhance clinical decision-making and escalation processes for hyperglycaemia by revising the Moya Cole Hospice policy.
- Strengthen the safety and quality of blood transfusion practice through improved nursing and medical documentation, including explicit recording of clinical rationale and observations.
- Promote accurate recording of patient weight to support safe clinical decision-making by requiring both medics and nurses to document a current weight on admission, or where weighing is not clinically appropriate - to obtain a recent recorded weight or agree an estimated weight based on clinical assessment.
- Facilitate targeted teaching sessions to improve documentation quality by training staff on how to manage and standardise abbreviations within our patient record system, ensuring only appropriate and widely recognised abbreviations are used.

Research

The number of patients receiving relevant health services provided or sub-contracted by Moya Cole Hospice in 2025/26 that were recruited during that period to participate in research approved by a research ethics committee was NIL.

Quality improvement and innovation goals

Moya Cole Hospice's income in 2025/26 was not conditional on achieving quality improvement and innovation goals through the Commissioning for Quality and Innovation payment framework.

Regulatory information

Moya Cole Hospice is required to register with the Care Quality Commission and its current registration status is registered without conditions.

The Care Quality Commission has not taken enforcement action against Moya Cole Hospice during 2025/26.

Moya Cole Hospice has not participated in any special reviews or investigations by the Care Quality Commission during the reporting period.

Information Governance

Moya Cole Hospice did not submit records during 2025/26 to the Secondary Uses service for inclusion in the Hospital Episode Statistics which were included in the latest published data.

Moya Cole Hospice submitted the Data Security and Protection (DSP) toolkit by the deadline of 30th June 2025 and all of the mandatory requirements were met.

Moya Cole Hospice was not subject to the Payment by Results clinical coding audit during 2025/26 by the relevant authority.

Moya Cole Hospice has taken the following action during 2025/26 to improve information governance and data quality:

- Strengthened organisational governance by embedding Information Governance within the wider Digital Strategy, ensuring clear focus on digital innovation, data management, cyber security and service delivery.
- Improved information and cyber security significantly through a full IT network upgrade, now managed by an ISO27001-accredited specialist, supported by upgraded Microsoft licences and 24/7 Security Operations Centre monitoring.
- Modernised information governance compliance by updating key policies and procedures, including the introduction of a new Artificial Intelligence Policy.
- Conducted a comprehensive physical information security audit to ensure that robust security measures are fully integrated into the design, layout and furnishings of the new build.
- Undertook a comprehensive review of all paper records held by the hospice to ensure that retention practices fully comply with the NHS Records Management Code of Practice and that no records are kept longer than necessary.
- Enhanced the effectiveness of our Information Assurance Board by refining its structure and processes to support more meaningful discussion, scrutiny and engagement.

Areas for Improvement

Priorities for improvement 2025/2026

Area	Aim	How we will measure ourselves	How we will report back on improvements
Clinical	Broaden how we gather patient, family and carer feedback moving beyond traditional surveys and introducing richer, more inclusive engagement methods, including listening events, focus groups, real-time experience conversations and tools for those who cannot complete written surveys.	Increased use of varied engagement methods across all service areas Evidence of participation from a wider and more diverse group of service users Clear examples of how engagement has influenced pathway redesign or service improvements	Governance reporting/ meetings Internal and external communication channels
Clinical	Deliver a safe, well-coordinated transition of all clinical services to the new Heald Green hospice ensuring continuity of care and maintaining high-quality patient and family experience throughout the move.	Zero avoidable harm events attributable to the relocation Maintenance of core service activity throughout the transition period with no unplanned closures or interruptions Staff and service user feedback	Governance reporting/ meetings New Build Transition meetings Internal communication channels
Clinical	Support patients and families to plan and manage their digital legacy and ensure our staff have the skills, confidence and resources to provide safe, sensitive and person-centred guidance.	Implementation of a Digital Legacy Policy, supported by updated patient information materials. Inclusion of digital legacy considerations within “what matters most” conversations, with evidence that these discussions are offered sensitively and consistently.	Governance reporting/ meetings Internal communication channels
Organisational	Promote and embed our newly launched Freedom to Speak Up programme to ensure every colleague feels safe, supported and empowered to raise concerns.	Monitor reporting activity through regular analysis of themes, volumes and trends Feedback from internal stake-holders	Governance meetings Internal communication channels
Facilities	Develop the catering and wider hospitality offer to involve the public and local businesses.	Increase in bookings, visitor footfall, income and progress reports	Governance meetings

Improvements in 2025/26

Area	Our aim was to	We achieved
Clinical	Complete the implementation of the Patient Safety Incident Response Framework and transition to our new electronic incident management system	We have successfully completed both the implementation of PSIRF and the transition to our new electronic incident management system across the organisation.
Clinical	Complete the tissue viability service improvement plan to ensure that clinical staff have had the right training, patients have access to the right equipment/resources and systems are in place to support consistent, effective practice	We have successfully strengthened our approach to tissue viability by delivering targeted training for clinical teams, embedding key principles into induction and ongoing learning and improving equipment and processes to support timely, appropriate care. Enhanced communication, stronger clinical oversight, and consistent practice across inpatient, outpatient and community services have improved patient safety and supported a more proactive approach.
Clinical	To achieve a smooth transition of clinical services to the new Heald Green site with clinical services being maintained throughout	We have made strong progress in preparing for the move to the new Heald Green hospice. Clinical teams contributed to service-readiness planning, pathway reviews and orientation materials, while equipment needs and key processes have been finalised to ensure smooth operation from day one. Digital improvements and updated workflows have been introduced to support better coordination. Although the transition is ongoing, teams are well positioned to deliver a safe and patient-centred move.
Organisational	Implement a new learning management system to support the learner journey and experience	We successfully implemented the Ciphr Learning Management System (LMS) in June 2025, delivering a more modern, accessible, user-friendly platform with reduced administration time and improved reporting capabilities.
Facilities	Develop an electronic building management system for our Heald Green new build to control all operating parameters for temperature and water control and electricity usage. The overall aim is to reduce our carbon footprint per square meter of building footprint	We successfully developed and implemented an electronic building management system for the new Heald Green hospice, enabling centralised control and real-time monitoring of temperature, water systems and electricity usage. This integrated approach enhances energy efficiency, supports quicker identification of maintenance issues and contributes to reduced carbon emissions in line with our sustainability aspirations.

Part Three:

Collaborative working

Over the past year, Moya Cole Hospice is actively engaged in a wide range of clinical, community, system and specialist networks that support high-quality, integrated care for patients and families. The hospice works closely with The Christie NHS Foundation Trust, hosting both Systemic Anti-Cancer Therapy (SACT) clinics and phlebotomy clinics across its sites. These partnerships ensure patients receiving cancer treatment can access essential therapies and monitoring locally, delivered through well-established Christie governance and clinical pathways. Alongside this, the hospice collaborates with Salford Royal (Northern Care Alliance) to deliver a joint Motor Neurone Disease (MND) clinic, providing coordinated multidisciplinary support to people living with MND and their families.

In addition, Moya Cole Hospice holds formal Service-Level Agreements with Manchester Foundation Trust (MFT), enabling specialist oversight and direct access to Infection Prevention and Control, Dietetics, and Speech and Language Therapy services. The hospice also hosts a number of specialist NHS clinics, providing clinical space and support so that external NHS teams can deliver services from hospice sites, improving accessibility and continuity for patients with complex or long-term conditions.

Moya Cole Hospice is strongly rooted in local community networks. Through our partnership with Citizens Advice, patients and carers receive direct access to welfare and benefits advice, helping reduce financial stress and ensuring people are supported holistically. The hospice also hosts and participates in Dementia Cafés, contributing to peer-support opportunities and helping connect families with memory-support services in the community.

At a regional and national level, Moya Cole Hospice is an active member of the Greater Manchester Hospice Collaborative, working alongside other hospices to share expertise, develop collective workforce initiatives, improve system resilience and align service standards across the region. Nationally, the hospice is part of Hospice UK, accessing sector-wide learning, benchmarking, policy development, leadership programmes and national quality initiatives.

Over the past year, our digital team has collaborated extensively with regional and national partners to strengthen data sharing, digital integration and patient care. This includes contributing hospice data to Hospice UK's annual Demographic and Activity submission, feeding activity and capacity information into Greater Manchester's Secure Data Environment, GM Palliative and End of Life Care and OPEL dashboards and actively using the Greater Manchester Care Record to support coordinated care. The team has also supported the C Change research study with Professor Fliss Murtagh at the University of Hull, worked with North West Ambulance Service to provide COPD self management plans and collaborated with NHS Manchester Foundation Trust to enhance shared community care handovers.

The hospice works closely with system partners, including regular engagement with Integrated Care Board contract, commissioning, quality and performance networks. These meetings support early identification of risks, promote shared learning and help ensure hospice services remain aligned with system priorities. At a national level, engagement with NHS England Palliative & End of Life Care networks provide additional opportunities for shared improvement, sector guidance and participation in wider programmes affecting hospice and palliative care provision.

Finally, the organisation participates in a range of additional networks such as local Safeguarding Adults and Children partnerships and academic collaborations supporting education, student placements and research. These partnerships collectively strengthen the hospice's integration with the wider health and social care landscape and ensure continuous improvement across all areas of service delivery.

Patient facing services

Clinical Teams

At Moya Cole Hospice, our clinical services operate under the leadership of the Director of Clinical and Digital Services, who also serves as the Senior Information Risk Owner (SIRO). The Director is supported by the Head of Clinical Services and CQC Registered Manager, as well as the Deputy Head of Clinical Services, who also holds the role of Controlled Drug Accountable Officer (CDAO).

Our clinical teams comprise the following services and professional groups:

- **Inpatient Unit (IPU):** Ward managers, ward sisters, advanced practitioners, registered nurses and healthcare assistants.
- **Being You Centres:** Team lead, assistant practitioners, registered nurses and therapists.
- **Hospice@Home:** Team lead, registered nurses and healthcare assistants.
- **Community Specialist Palliative Care team:** Specialist nurses delivering community-based palliative care.
- **Rehabilitation Services:** A multidisciplinary team of Allied Health Professionals and therapists, including physiotherapists, occupational therapists, lymphoedema practitioners, assistant practitioners and complementary therapists.
- **Pharmacy Services:** Specialist palliative care pharmacists and pharmacy technicians.
- **Clinical Educators:** who support ongoing professional development across clinical teams.
- **Homeless Palliative Care Coordinators:** providing specialist support for individuals experiencing homelessness.
- **Patient and Family Support Team:** Team lead, chaplain, counsellors, social workers and psychological assistant practitioners.
- **Clinical Administration:** Team leaders, inpatient, outpatient and community secretaries, along with ward clerks. Clinical Volunteers who contribute to the delivery of high-quality care across our services.

Over the past year, our teams have worked with dedication to deliver high-quality services to patients, their families and their loved ones. We have demonstrated flexibility and continually adapted our practices to ensure the safety of patients, visitors, staff and volunteers remained paramount.

Alongside maintaining a strong focus on safety, our teams have remained committed to addressing the individual needs of each patient in our care. Through sustained communication and close collaboration with patients and their families, we have sought to provide personalised care and support that meets their physical, emotional and spiritual needs.

Inpatient units

Throughout 2025/26, our inpatient units continued to operate at full capacity, delivering comprehensive, round-the-clock care. Our commitment to maintaining seven-day access ensured that patients could be admitted on weekends and bank holidays, enabling seamless continuity of care.

Our dedicated teams have worked tirelessly to support patients and their families, providing clear and timely information to enable informed decision-making regarding all aspects of care, including preferred priorities, nutrition and hydration, medication management and visiting arrangements.

Being You Centres

Over the past year, our Being You Centres have continued to deliver personalised care through both face-to-face and virtual appointments, ensuring patients receive tailored medical, rehabilitation and wellbeing support.

Community Specialist Palliative Care Team

In 2025/26, our Community Specialist Palliative Care team continued to deliver a comprehensive range of services, effectively meeting the growing demand for specialist palliative care. The team provided expert clinical guidance and support to patients and families, as well as to community-based providers and acute hospital staff.

Homeless Palliative Care Service

During 2025/26 our Homeless Palliative Care Coordinator has continued to play a vital role in ensuring that individuals from vulnerable and marginalised communities receive the support they need at the end of life. They have provided expert case management, advocated for patients' voices to be heard and worked collaboratively with a wide range of partner agencies to facilitate high-quality, person-centred care.

Hospice@Home

Our Hospice@Home team has continued to serve as a cornerstone of community-based care throughout 2025/26, with timely responses to all referrals. The team has consistently undertaken thorough assessments of individual patient needs at each visit and provided compassionate emotional and psychological support to patients and their families.

Rehabilitation

Throughout 2025/26, our Rehabilitation team has continued to promote a rehabilitative approach to hospice care, ensuring patients receive high-quality, individually tailored support. The team has sustained delivery of the specialist lymphoedema service across Greater Manchester and Cheshire, providing personalised treatment plans that include lymphatic drainage, compression bandaging and self-care education.

In addition, our complementary therapy services, supported by trained volunteers, have enabled more patients to benefit from holistic therapeutic treatments.

Patient and Family Support

Over the past year, our Patient and Family Support team have continued to provide essential services to patients, carers and staff. The team has remained flexible and responsive in its approach, addressing the spiritual, psychological and social needs of those we support.

Pharmacy

Our Pharmacy team has remained integral to the delivery of patient care throughout 2025/26, operating under a service level agreement with Salford and Wythenshawe Hospitals. Working collaboratively with our advanced practitioners and medical team, they have ensured the safe and effective management of pain and symptoms, supported appropriate medication administration, and contributed to robust discharge planning.

Clinical Administration

Throughout 2025/26, our Clinical Administration team has continued to provide vital support to both clinical and support service teams, ensuring efficient data management and seamless service coordination. The team has worked collaboratively and demonstrated innovation in adapting to the evolving needs of the hospice, while consistently maintaining high standards of administrative practice.

Clinical Volunteers

Our clinical volunteers have continued to make an invaluable contribution to patient care and to the support of our clinical teams. Their dedication and commitment have played a significant role in upholding the high standards of care delivered across the hospice.

Medical team

Our medical services are led by the Medical Director, who also serves as the Caldicott Guardian, supported by the Associate Medical Director. Our medical teams comprise:

- Palliative Medicine Consultants
- Associate Specialists
- Specialty Doctors
- Rotational Resident Doctors

Throughout 2025/26, our consultant-led medical teams have delivered high-quality, round-the-clock care across our inpatient units and within the wider communities we serve. In addition, the medical teams have continued to provide essential clinical support to our 24-hour Advice Line during this period.

24-hour Advice Line

Our 24-hour Advice Line is staffed by a registered nurse, with additional support from our Medical team and pharmacists, and operates continuously - 24 hours a day, seven days a week.

The service has been maintained throughout the past 12 months and provides telephone support to healthcare professionals, as well as to patients, families and carers across Greater Manchester (Salford, Trafford, Manchester and Stockport).

The table below presents the number of calls received by the Advice Line during the current reporting period, alongside data from the previous two years.

Moya Cole Hospice 24-Hour Advice Line

Descriptor	2023/24	2024/25	2025/26
Total number of calls	530	511	566
Healthcare professionals	254	265	269
Patients and carers	272	225	199
Pain control	165	101	87
Symptom control	162	131	110
Service and referral information	69	32	40
Non-clinical	12	4	6
Other*	117	75	79

*Includes carer support, (e.g. advice and reassurance) and information regarding external healthcare professionals and equipment loans.

Patient safety

Infection prevention control

Infection prevention and control remained a key priority for our clinical services throughout 2025/26. Teams across the hospice have worked diligently to maintain a safe environment for patients, families, visitors, volunteers and staff.

Our commitment to high standards of safety is demonstrated through our audit programme and our schedule of internal and external inspections, supported by colleagues from the Infection Prevention and Control team at Manchester University NHS Foundation Trust.

We have collected surveillance data in accordance with the requirements of Public Health England, NHS England and our lead Integrated Care Board. The table below presents the surveillance data for the 2025/26 reporting period.

Surveillance Data 2025/26

Hospice acquired CDI	1
MRSA	0
Hospice acquired HCAI including CPC's	0

Safeguarding

Moya Cole Hospice is committed to embedding safeguarding as a fundamental element of its core business. We recognise that safeguarding children, young people and adults at risk is a shared responsibility, requiring effective collaboration between partner agencies and other professionals. We uphold our duty to protect individual human rights, promote dignity and respect and safeguard people from abuse, neglect and discrimination.

Our Safeguarding Leads and Social Work team work proactively to ensure that all staff are knowledgeable, confident and equipped to follow the appropriate processes and procedures when safeguarding or patient safety concerns arise. This commitment is demonstrated through our comprehensive policies, electronic incident management system, audit processes and training programmes.

During 2025/26, we have taken the following action to improve safeguarding practice across the organisation:

- Enhanced our incident system to ensure safeguarding concerns are considered and captured in every incident

- Designed and delivered in-house Mental Capacity and Best Interests training, led by our Social Work team, to strengthen staff confidence in assessing and documenting patient capacity and consent

- Established a multidisciplinary team Keeping People Safe Link Group to embed safeguarding as everyone's responsibility, supported by awareness raising activities and organisation-wide communications including posters and engagement initiatives.

Incident management

During 2025/26, we completed the full implementation of the Patient Safety Incident Response Framework (PSIRF) across the hospice. All incidents, accidents and near misses are now recorded through our new electronic incident management system, which is fully aligned with PSIRF. This system was successfully launched in October 2025. Staff are supported by a comprehensive suite of organisational policies, training, procedures and guidance to ensure effective and consistent reporting.

Incidents and the learning arising from them are reviewed at the appropriate team, departmental and committee meetings. In 2025/26, we also introduced a weekly Patient Safety Incident Response Group and a monthly Patient Safety Meeting, in line with PSIRF requirements. Combined with our existing incident management framework, this strengthened approach has provided significantly greater oversight and understanding of our patient safety profile, leading to more meaningful learning, more targeted actions and improved incident management.

We continue to promote openness and honesty in accordance with both the professional and statutory Duty of Candour. Our culture supports candour, transparency and open communication across all departments, and guides how we communicate with patients and families when incidents occur. We have also ensured that the expectation to be open when things go wrong is clearly embedded within our complaints, incident management and whistleblowing policies.

During the latter part of 2025/26, we launched our Freedom to Speak Up initiative, which included the successful recruitment and training of two Freedom to Speak Up Guardians, the introduction of a new electronic reporting system, and the implementation of a Freedom to Speak Up policy. Together

with our existing policies and processes, this will further strengthen our open and transparent culture, enabling us to learn from feedback, address concerns early, and continue improving the quality and safety of our services.

The table below presents the number of incidents, accidents and near misses reported during this reporting period, alongside data from the previous two years. It also includes details of any incidents that required notification to external bodies.

Descriptor	2023/24	2024/25	2025/26
Total	761	1286	1467
Clinical	642	1099	1316
Non-clinical	119	187	151
Notifiable safety incidents (RIDDOR)	1	1	1
Notifiable safety incidents (CQC)	2	3	0
Statutory duty of candour discharged	2	3	1

Examples of actions taken by Moya Cole Hospice during 2025/26, as a result of incidents, accidents and near misses include:

- Purchased two electronic wristband printers to support the accurate and consistent identification of patients across all services.
- Developed and implemented several new procedures and policies to enhance staff practice and promote safer delivery of care, including a procedure for admitting patients to the inpatient unit and a policy for the insertion and management of nasogastric tubes.
- Procured additional catering equipment to ensure that meals for patients with specific nutritional requirements are prepared in accordance with best-practice standards.
- Embedded a robust discharge checklist into routine practice to strengthen multidisciplinary communication during handovers and enhance patient safety.
- Enhanced our Medicines Management Update training programme to incorporate recurring themes and trends identified through our monthly Patient Safety Meetings.

Staffing

Ensuring safe and effective staffing has remained central to the delivery of high-quality care across Moya Cole Hospice during 2025/26. Throughout the year, we continued to strengthen our workforce planning processes, using Establishment Genie to guide safe staffing decisions and ensure our clinical teams are supported by the right skill mix at all times. We have maintained a flexible approach through effective use of our nurse bank and ongoing partnerships with nursing agencies, enabling us to respond to fluctuations in demand and uphold safe staffing levels.

Our medical staffing model has also remained robust, with the consultant weekend on-call rota and first-on-call medical cover continuing to provide reliable, specialist medical support across both hospice sites, despite the wider national workforce challenges.

Building a sustainable and future ready clinical workforce has remained a priority as we prepare to move into the new Heald Green hospice. Collaborative partnerships with neighbouring NHS trusts have continued to provide access to specialist clinical expertise, supporting holistic care for patients with complex needs. Together, these efforts have helped ensure the hospice is well positioned to deliver safe, person centred and resilient care as we transition into the next phase of our organisational development.

The table presents the staffing data during this reporting period, alongside data from the previous two years.

Sickness, absence and staff turnover	2023/24	2024/25	2025/26
Sickness and absence	4.9%	5.9%	5%
Staff turnover	25%	25.1%	16.9%

Wound care

All patients admitted to Moya Cole Hospice receive a comprehensive assessment of their risk of skin damage on admission, and appropriate preventative measures are implemented promptly. Managing skin integrity and wounds within a palliative care setting presents specific challenges, as many patients experience deterioration associated with the progression of their condition and existing co-morbidities. Our focus is to stabilise existing wounds, prevent new wounds wherever possible, and manage related symptoms to enhance patient comfort, wellbeing and overall quality of life.

The table below presents the data collected for the current reporting period, alongside figures from the previous two years.

	2023/24		2024/25		2025/26	
	On admission	Hospice acquired	On admission	Hospice acquired	On admission	Hospice acquired
Number of pressure ulcers	90	38	138	79	206	141
Hospice acquired grade 2 or above	25		61		79	

Quality

Quality assurance

Moya Cole Hospice evaluates the quality of its services using a range of methods to ensure that the care provided is safe, effective and delivered to the highest possible standard, in alignment with our strategic aims, organisational policies, legislative requirements and recognised best-practice guidance.

The quality assurance methods and tools utilised during the 2025/26 reporting period are outlined in the table below. This information formed part of the data reviewed to meet the statutory requirements referenced in Part Two of this report.

Quality Assurance Measures

Name	Type	Purpose	Frequency	Governance
Blood Transfusion and TACO	Audit	Compliance with policy, best practice guidance and patient safety alert	Annual	Clinical Quality and Performance Committee
Clinical Quality and Performance Committee reports	Report	Quality assurance, compliance and review	Quarterly	Clinical Quality and Performance Committee
Clinical record keeping	Audit	Compliance with policy and best practice guidance	Quarterly	Clinical Quality and Performance Committee, Information Assurance Board
Cold room access	Audit	Compliance with policy and recommendations from Fuller report	Quarterly	Clinical Quality and Performance Committee
Complaints compliance	Audit	Compliance with policy	Quarterly	Direct reporting to Executive Leadership Team
Cardio-Pulmonary Resuscitation and Do not Attempt Cardio-Pulmonary Resuscitation	Audit	Compliance with policy and best practice guidance	Biennial	Clinical Quality and Performance Committee
Data sets	Report	Key performance indicators measurement (KPIs)	Reported quarterly, reviewed monthly	All Integrated Care Boards, Clinical Quality and Performance Committee
Data sets	Report	Key performance indica-tors measurement (KPIs)	Reported quarterly, reviewed monthly	All Integrated Care Boards, Clinical Quality and Performance Committee
Data quality audit	Audit	Compliance with minimum data sets	Quarterly	Clinical Quality and Performance Committee, Information Assurance Board
Departmental Information Governance audit	Audit	Assurance and compliance with policy, best practice guidance and legislation	Monthly	Information Assurance Board
Emergency Resuscitation Checklist	Audit	Compliance with policy	Annually	Clinical Quality and Performance Committee

Hand hygiene and bare below elbow audit	Audit	Assurance and compliance with policy and best practice guidance.	Quarterly	Clinical Quality and Performance Committee
Incident management compliance	Audit	Compliance with policy	Quarterly	Clinical Quality and Performance Committee
Incident reporting	Reports	Thematic trend analysis to identify opportunities for improvement/learning and examples of good practice	Weekly/ Monthly / Quarterly	All relevant meetings
Infection Prevention Control walk arounds	Inspection	Assurance and compliance with best practice guidance and legislation	Quarterly	Safety Assurance Group, Infection Prevention Control Committee
Learning from deaths presentations	Presentation	Discussion forum to learn, reflect and share best practice	Bi-monthly	Consultants meeting
Local Intelligence Network (LIN) reports	Report	Safe use of controlled drugs in line with legislation	Quarterly	Local Intelligence Network, Clinical Quality and Performance Committee
Lone worker audit	Audit	Compliance with policy and device requirements	Quarterly	By exception
Loved one surveys	Reports	Assurance and highlight opportunities for improvement / learning and examples of good practice	Bi-annual	Clinical Quality and Performance Committee, Directors Support Services Meeting (reports)
Medicines - Antimicrobial	Audit	Compliance with policy, legislation and best practice best guidance	Quarterly	Pharmacy meeting, Clinical Quality and Performance Committee
Medicines - Controlled Drugs	Audit	Assurance and compliance with policy and legislation	Quarterly	Pharmacy meeting, Clinical Quality and Performance Committee
Medicines – prescribing injectable medicines in anticipation of need	Audit	Compliance with policy and best practice guidance	Bi-annual	Clinical Quality and Performance Committee
Medicines - Safe and secure storage and handling	Audit	Compliance with policy, legislation and best practice guidance	Quarterly	Pharmacy meeting, Clinical Quality and Performance Committee
Medicines - Single nurse administration documentation	Audit	Compliance with policy, legislation and best practice guidance	Bi-annual	Clinical Quality and Performance Committee
Nutritional Risk Screening	Audit	Compliance with best practice guidance	Quarterly	Clinical Quality and Performance Committee

Patient experience interviews	Reports Newsletters	Assurance and highlight opportunities for improvement / learning and examples of good practice	Bi-annual	Clinical Quality and Performance Committee, Directors Support Services Meeting
Quality Account	Published report	Legislative requirement	Annual	Lead Integrated Care Board, Executive Leadership Team, Healthwatch, Board of Trustees
Risk register compliance	Audit	Compliance with policy	Quarterly	Direct reporting to Executive Leadership Team
Safeguarding contractual standards	Report	Assurance and compliance with legislation and statutory guidance	Annual	Lead Integrated Care Board (Safeguarding)
Safe management of patients on oxygen therapy	Audit	Compliance with policy and best practice guidance	Bi-annual	Clinical Quality and Performance Committee
Safe management of patients with an altered airway	Audit	Compliance with policy and best practice guidance	Bi-annual	Clinical Quality and Performance Committee
Safe use of non-invasive ventilation and cough assist	Audit	Compliance with policy and best practice guidance	Bi-annual	Clinical Quality and Performance Committee
Weight	Audit	Compliance with best practice guidance	Quarterly	Clinical Quality and Performance Committee

The measures outlined above provide assurance regarding the quality of our services, and this information is reviewed through the relevant governance meetings. Our reporting and governance structure enable effective information sharing, recognition of good practice, constructive challenge and the identification of opportunities for improvement. This ensures that our services continue to align with best-practice standards.

Governance meetings held during 2025/26 are listed below:

- Audit Committee (Trustee attendance)
- Board of Trustees
- Clinical Leaders meetings
- Clinical Practice meetings
- Clinical Quality and Performance Committee
- (Trustee attendance)
- Consultants' meetings
- Executive Leadership Team meetings
- Finance Committee (Trustee attendance)
- Heads of Departments meetings
- Infection Prevention and Control Committee (external attendance)
- Information Assurance Board
- NHS Greater Manchester Contract Review Meeting (external attendance)
- People and Culture Committee (Trustee attendance)
- Pharmacy meeting (external attendance)
- Quality Improvement Group
- Safe, Associate Specialist and Speciality meetings
- Safeguarding Assurance (external attendance)

- Safety Assurance Group
- Senior Clinical Leaders meetings
- Patient Safety meetings
- Patient Safety Incident Response Group meetings
- Team meetings

We obtain further assurance regarding the quality of our services through a range of additional mechanisms, including clinical dashboards, governance management system dashboards, service user feedback, risk registers and benchmarking against national standards, such as those provided by Hospice UK.

Quality improvement

Moya Cole Hospice has maintained a strong focus on quality improvement within our clinical services throughout 2025/26. Our Quality Improvement Group provides oversight and governance by approving, monitoring and supporting all quality improvement initiatives across clinical services.

During 2025/26, we have undertaken or commenced the following quality and service improvement projects:

- Advance Care Planning on the inpatient unit project
- Audit to evaluate and optimise oxygen prescribing, monitoring and review
- Blood sugar monitoring at Moya Cole Hospice
- Digital legacies project
- Enhancing person-centred care in a hospice inpatient setting through SMART goal implementation
- Evaluation of a Joint Palliative Care and Heart
- Failure Clinic in the hospice setting
- Evaluating the introduction of discussion topics at multidisciplinary team meetings
- Hospice@Home Carer Support Assessment Tool (CSNAT) project
- Improving steroid monitoring and management; audit of practice
- Improving access to hospice services for patients living with dementia
- Outpatient Services: art psychotherapy project
- Outpatient Services: one stop multidisciplinary team project
- Reducing toilet-related falls through the introduction of decaffeinated beverages
- Research: evaluating staff training online for resilience

Over the past year, our Medical team has continued to lead the hospice journal club, which has increased in frequency from bi-monthly to monthly. Attendance has remained strong and feedback has been consistently positive. Looking ahead, we plan to introduce a dedicated journal club for Allied Health Professionals, reflecting our commitment to involving the wider multidisciplinary team in ongoing learning and professional development.

Training and education

Throughout 2025/26, learning and education have remained a key priority for the workforce. During this period, an 85% completion rate for mandatory training has been consistently maintained. Mandatory training covers core areas including safeguarding, information governance, incident reporting and health and safety.

Our Education and Development Manager, working in collaboration with subject matter experts, completed a review of the mandatory training framework. This review ensured that any identified training gaps were addressed, strengthening support for both staff and volunteers. As of January 2026, a number of new modules were added to the mandatory eLearning programme, including ACT Awareness, Freedom to Speak Up and the Mental Capacity Act (MCA). In addition, an assessment linked to the Oliver McGowan eLearning was introduced to provide a mid-cycle knowledge check, as the full eLearning is completed every three years,

Clinical training and education are coordinated and facilitated by the Education and Development team. Our rolling clinical education programme has continued throughout the year and covers a range of essential topics, including moving and handling, medicines management, basic life support, tracheostomy care, catheterisation, and intravenous skills. In addition, during 2025, conflict resolution training was introduced for clinical staff and made available online via the eLfH platform.

Over the past year, we have continued to strengthen our clinical education and training through effective collaboration with external partners. This has included specialist input from Change Grow Live on street drugs within our three-day palliative care courses, working closely with Practice Education Facilitator (PEF) teams in Stockport and Salford to support nurse supervision and assessment (alongside ongoing PARE training) and tissue viability training delivered by Manchester University NHS Foundation Trust, which has enabled our Clinical Educators to now deliver this training in-house. The Ruth Strauss Foundation also returned to deliver No Conversation Too Tough training to 20 staff members and our Clinical Education team provided end of life care training to Woodlands and Moorside GMMH at no cost.

Over the course of the year, we have continued to support a range of student placements across multiple disciplines. Moya Cole Hospice has supported Edge Hill University with paramedic placements and accommodated nursing placements from the University of Salford, Manchester Metropolitan University, the University of Manchester and the University of Greater Manchester (Bolton). In addition, we have supported a year-long counselling placement in partnership with the University of Salford.

The Medical team has continued to support the training of resident doctors, including specialty trainees, internal medicine trainees, foundation year two doctors and GP trainees rotating through the hospice sites. Palliative medicine consultants and associate specialists have provided comprehensive clinical and educational supervision for all trainees during their placements at the hospice. In addition, the medical team supported the Trafford and Salford Trainee GP Training Programme by delivering a full day of structured teaching and training. Organisationally, we have continued to deliver the Inspire Leadership Programme, which successfully had its QCPD accreditation renewed during 2025/26. The programme was delivered to 13 members of staff, alongside one paid external attendee. In addition, the Aspire programme was delivered to two staff members. A full cohort is already confirmed for both leadership programmes for the forthcoming year, demonstrating ongoing commitment to leadership development.

The Leadership Exchange Network remained active throughout 2025/26, addressing key themes such as giving constructive and effective feedback, leadership communication and professional curiosity. A series of bite-size sessions also continued, covering topics including compassion fatigue and interview best practice. Attendance at these sessions was lower than anticipated; however, plans are in place to improve attendance by providing session dates further in advance.

From an organisational development perspective, we have also strengthened collaboration with external partners. This has included working with the National Guardians Office to support the training of Freedom to Speak Up Guardians, RobustMinds Mental Fitness Ltd to train new Mental Health First Aiders and engaging postgraduate students from the University of Manchester in improvement projects focused on developing our food service and enhancing staff knowledge.

During 2025, over 30 New Build and You sessions were delivered to promote staff engagement and support change management in preparation for the new build. These sessions reached more than 260 employees, cross site. In addition, during February and March, over 30 Workplace Orientation Tours of the new build were delivered to both staff and volunteers. Feedback demonstrated a 100% satisfaction rate, with participants reporting the tours to be highly beneficial.

Support Services

Moya Cole Hospice's clinical teams are supported by a range of essential services that enable us to deliver outstanding, patient-centred, innovative and evidence-based palliative and end-of-life care to patients, their loved ones and their caregivers. These supporting functions include:

- **Facilities Management and Support Services,** encompassing catering, maintenance, housekeeping and reception
- **Fundraising**
- **People and Culture**
- **Finance**
- **Marketing and Communications**
- **Trading Company**
- **Digital Services**
- **Volunteers**

Each of these teams has continued to deliver high-quality services throughout 2025/26, ensuring the ongoing safety, comfort and wellbeing of patients, as well as contributing to the operational effectiveness and financial sustainability of the hospice.

Volunteers

Moya Cole Hospice is supported by approximately 460 volunteers who contribute across a wide range of roles, including ward support, charity shops, reception services, complementary therapy and administrative functions. Our volunteers are a diverse group, bringing a wealth of skills, experience and compassion that significantly enhances the services we provide.

Patient and carer feedback

Patients, relatives and caregivers can share their feedback with us in a variety of ways, including comment cards, verbal feedback, patient interviews, written correspondence and through our website.

Patient interviews

Our bi-annual patient interviews provide a valuable and insightful source of feedback, enabling us to clearly understand the patient voice and identify both areas of strength and opportunities for improvement. The results for the 2025/26 reporting period are presented in the table below, alongside a selection of comments received over the past 12 months.

Area	Summary Results (overall positive responses)
Communication	95%
Beliefs, values and religious needs	80%
Consent	100%
Pain Management	96%
Emotional support	92%
Nutrition and hydration	100%
Privacy and dignity	100%
Person centred care	95%
Complaints	Qualitative data only
Access and referral	88%

"When they have a conversation with you, it is not just a chat, they are gathering and learning a lot from the conversation. They are very skilled. That is one thing I have notice here, the high standard of care."

"There is peace because you get such good care. Within a day of coming in I had a foot massage which was positive and the lotion she used help with the sick feeling I am having."

"They help me if I want anything but they let my friend help me as well as that makes me feel more independent."

"They help if you are anxious. They will come and sit with me and ask if they can help. You never see staff miserable."

"The food is very good, I have a swallowing difficulty and that is all recorded. I have to be careful but they prepare my food in a way I can eat it. If I don't like what is on the menu, they will always offer me an alternative."

Loved one surveys

Our bi-annual loved one surveys are carried out alongside our patient interviews. These surveys provide more detailed feedback than our friends and family survey, enabling us to gain deeper insight into the experiences of patients, relatives, friends and caregivers, and to identify further opportunities for improvement.

The results for the reporting period 2025/26 are detailed below.

Area	Summary Results (overall positive responses)
Communication	100%
Dignity and respect	100%
Pain management	100%
Emotional support	100%
Person centred care	100%
Complaints	100%

Friends and family survey

The Friends and Family Survey is a key feedback tool that enables people using our services to provide anonymous comments on their overall experience. As a single-question survey, it offers a simple way for patients to share their views, helping us understand what is working well and where further improvements can be made.

The results for the 2025/26 reporting period are presented in the table below:

Thinking about your stay in the hospice, overall, how was your experience of your service?			
	Inpatients	Outpatients	Community
Very Good	141	96	155
Good	8	2	8
Neither good or poor	0	1	3
Poor	0	0	0
Very poor	0	0	0
Total completed	**149**	**99**	**166**

Social media

We receive feedback about the hospice and our services through a variety of channels, including our social media platforms. Below is a small selection of comments shared publicly on social media, offering a snapshot of the views expressed by those who have engaged with our services.

"The care and compassion my Dad was shown was amazing and our family is eternally grateful."

"The team will forever be in our hearts for what they did for us as a family."

"Just wanted to say a big thank you for everything you did to care for my mum."

"You were all amazing when my partner was in palliative care."

"So kind and caring."

Complaints

As an organisation, Moya Cole Hospice remains committed to taking all complaints seriously, ensuring they are investigated thoroughly and managed with compassion. We actively encourage individuals to raise concerns when they feel something has not gone as expected, as this helps us learn from their experiences and continually improve our services. We promote a culture of openness and honesty, and our staff are supported by clear complaints and whistleblowing policies.

The table below presents the formal and informal complaints received during the current reporting period, alongside data from the previous two years.

	2023/24	2024/25	2025/26
Formal complaints	3	6	8
Informal complaints	26	32	35

Information on how to make a complaint is readily available on the Moya Cole website, providing clear guidance for patients, service users and carers who wish to submit a concern or complaint. In addition, complaint information is included in the patient bedside booklet, ensuring that individuals staying on our inpatient unit, as well as their families and carers, have easy access to this information throughout their stay.

Staff engagement

Engagement with staff

We remain committed to fostering effective communication and meaningful engagement across our workforce, recognising that staff who feel valued, informed and supported are better positioned to deliver high-quality care. Creating a positive, inclusive and fulfilling working environment continues to be a core organisational priority.

In addition to performance, development and review meetings and regular one-to-one discussions, a broad range of communication and engagement mechanisms were in place during 2025/26. These included the weekly Chief Executive Brief, Director drop-in sessions, Schwartz Rounds, quarterly meetings of the Involve Group and an open-door approach to senior management, all supporting open dialogue and staff engagement.

Further support structures provided during the year included Equality, Diversity and Inclusion Group meetings, Keep in Touch (KIT) meetings, the Leadership Exchange Network and the introduction of Freedom to Speak Up Guardians, reinforcing our commitment to an inclusive, supportive and open organisational culture.

Staff wellbeing and recognition remained a priority. This included the delivery of Wellbeing Week, Chair and Long Service Awards, a quarterly Wellbeing Newsletter, staff relaxation sessions and continued access to Mental Health First Aiders, Care First Employee Assistance Programme and the Greater Manchester Resilience Hub.

Engagement with the New Build programme continued throughout the year through drop-in sessions, site and supplier visits, Workforce Orientation Tours, and the introduction of departmental inductions within the new building. Regular communication was maintained to keep staff and volunteers informed and to provide opportunities for questions and feedback.

We facilitated workshops for staff and volunteers, providing a safe and supportive forum to discuss and stay informed about the progress of the Terminally Ill Adults Bill. These sessions supported the workforce to develop understanding, confidence and reflective discussion around the potential implications for patient care.

To promote transparency, engagement and shared learning, clinical leaders and their teams were actively encouraged to attend key governance meetings, including relevant committees and Board sessions. This approach enhances visibility of decision-making, supports understanding of organisational priorities and enables staff to contribute to strategic discussions. Colleagues were also encouraged to observe weekly Patient Safety Group meetings, strengthening confidence in governance processes and reinforcing a collective commitment to patient safety and continuous improvement.

Staff surveys

In September 2025, we carried out an Employee Check-In with staff across the hospice to understand what was working well and where further improvements could be made. The Check-In was designed to gather meaningful insight while continuing to build an environment in which everyone can thrive.

Our highest responses included: 95% of staff share the values of Moya Cole and 94% of staff shared a sense that their role enables them to work collaboratively with other teams.

Annex

It is my privilege to endorse the Moya Cole Hospice Quality Accounts. Over the past 3 years I have worked closely with them in my role as lead commissioner. Their commitment to high quality care is borne out by the positive feedback which they consistently receive from patients, their families and friends. The hospice has always taken a collaborative approach working with closely with other GM hospices to ensure that all patients receive high quality care. The much anticipated move to the new purpose built premises will be the beginning of a new era. This will provide our patients with world class facilities whilst continuing to provide high quality care.

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