



Cornwall
Hospice

Quality Account 2025/26

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This Quality Account reflects on the period 1st April 2025 to 31st March 2026 at Cornwall Hospice, highlighting how our purpose, values and ambitions have shaped the care and support we provide to patients and their families. Drawing on clinical outcomes, it provides an overview of our performance, learning and improvement activity, governance processes, and the experiences of those who use and deliver our services.

Through this reflection, we demonstrate how we have continued to monitor, maintain and enhance the quality and safety of care, while remaining open and accountable about both our achievements and the challenges we have faced. It also sets out our ongoing commitment to transparency and continuous improvement as we look ahead to the coming year.

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OUR PURPOSE

Our purpose is to provide compassionate, specialised end of life care for patients, their families and carers whilst guaranteeing our high-quality standards. Together with our local community in Cornwall, we will continue to make everyday matter.

OUR VALUES

Compassion

the quality of being gentle, kind, caring and helpful.

Integrity

being honest and having strong moral principles.

A person with integrity behaves professionally and ethically at all times and in all workplaces.

Togetherness

valuing everyone who works or volunteers for our charity or uses our services, giving us all the information, tools, independence and freedom to achieve.



Statement of assurance from the Board

In my first few months as Chair of Cornwall Hospice, I am pleased to report that over the past twelve months we have continued to provide the highest levels of care to patients, their families and carers across Cornwall. During this time, we undertook an extensive refurbishment of our facilities at Mount Edgcombe Hospice, and looking ahead, we will carry out further improvements to the patient environment at St Julia's Hospice.

Our dedicated clinical teams, supported by our wonderful volunteers, continue to make every moment matter. I am proud of each and every member of our team and thank them all for their commitment and hard work.

Jane Stubberfield, Volunteer Chair of Trustee



Statement of assurance from the Chief Executive

Another year of high quality end of life care delivered to the people of Cornwall. This has been achieved despite our funding environment continuing to be extremely challenging; we are one of the lowest funded Hospice providers in the UK, receiving significantly less from the NHS Cornwall Integrated Care Board than the national average (8% compared to 27%). Increasing our funding to the national average would enable us to do so much more to support people at the most difficult time of their lives.

In January 2026, we launched our new brand, Cornwall Hospice. This is already proving successful in increasing awareness of the hospices through effective media channels. I continue to be constantly amazed and humbled by the support that we receive from the people of Cornwall. Without this kindness we simply could not sustain our services that ensure our community is provided with essential end of life care.

Paul Brinsley, Chief Executive





Our income generation teams work tirelessly across Cornwall to raise the vital funds that keep our services running. Their dedication ensures we can continue to offer specialist care and support to those who need it most.

Our shops, from Bude to Penzance, play a crucial role in raising funds while diverting significant waste from landfill. Beyond their retail function they serve as community hubs - places where volunteers and customers can connect, share stories and support our cause in a meaningful way.

In September 2025, 26 remarkable individuals took on a cycle challenge to France - a testament to the passion and generosity that drives so many of our supporters. Fundraising groups across Cornwall play a vital part in this too, not only generating much-needed income but raising awareness of our work through their many and varied efforts.

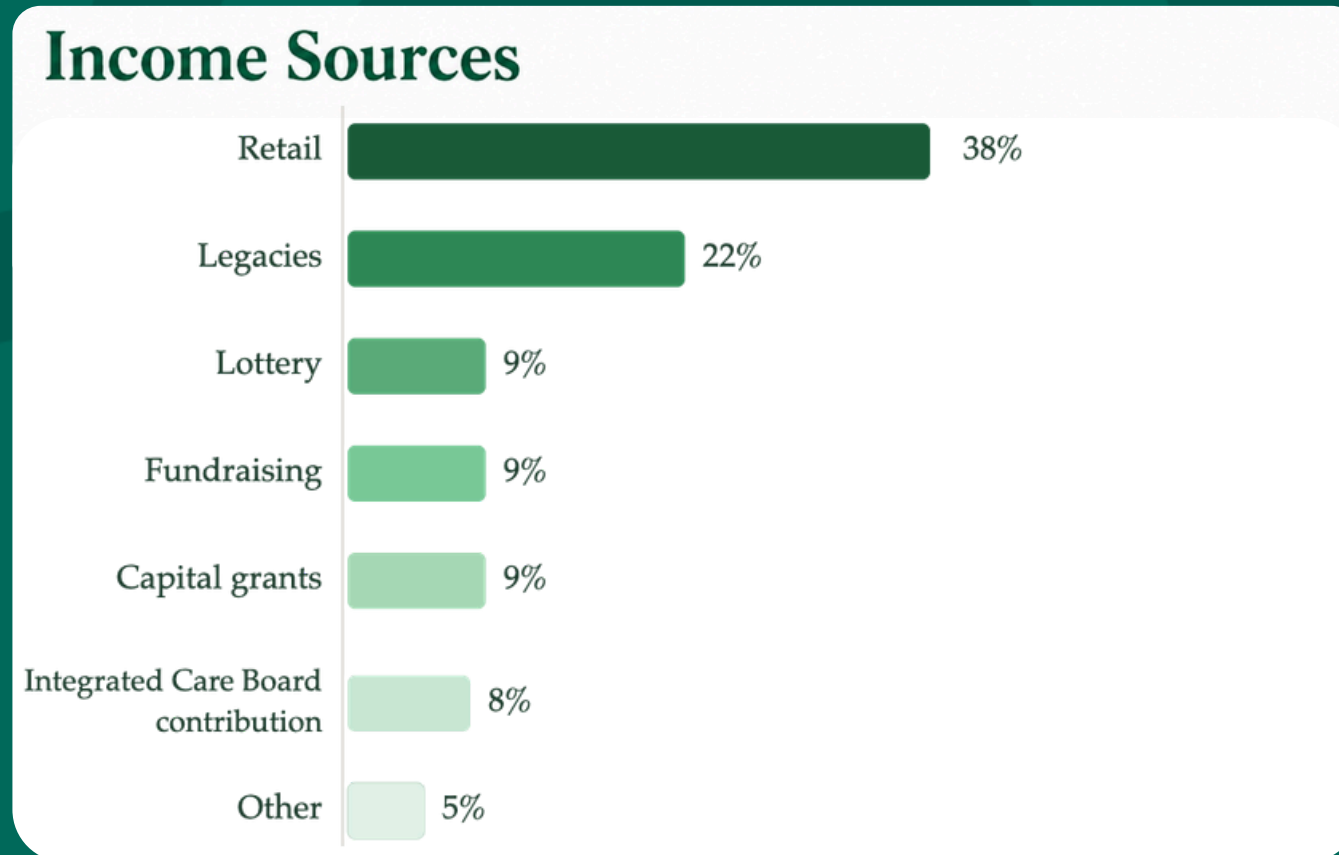
Gifts in Wills and donations made in memory of loved ones are among the most meaningful ways people choose to support Cornwall Hospice. These contributions ensure our work continues, making a lasting difference to patients and families across Cornwall.

Our Cornwall Hospice lottery offers supporters a fun and engaging way to contribute regularly, with the chance to win a prize each week, knowing that their participation directly supports our mission.



It cost £13 million to operate our charity from 1st April 2025 - 31st March 2026.

This is how we were funded;



Reflection on last year's priorities for improvement

1. FIT FOR THE FUTURE - MOUNT EDGCUMBE HOSPICE REFURBISHMENT

Our Mount Edgcombe refurbishment project was a key priority this year, with the main focus being to enhance the experience of patients and families. Improvements began in May 2025, with six phases completed over a 12-month period.

Key developments include:

- Conversion of four multi-use rooms into single occupancy rooms with private en suites, providing greater privacy and comfort for patients
- A new covered canopy and redesigned visitor entrance, creating a more welcoming arrival experience
- A new dedicated inpatient entrance
- Conversion of the former outpatients area into a Clinical Therapies Hub
- A fully accessible bathroom to improve access for all patients
- Upgrades to entrance doors, windows and external areas to improve energy efficiency
- Infrastructure improvements to support security and modern care delivery
- Patient rooms refurbished to ensure beds face garden views wherever possible, reinforcing comfort and wellbeing
- A full garden master plan developed to guide future enhancements to outdoor spaces across both hospice sites

These improvements create more welcoming, dignified and sustainable spaces for patients, families and staff.





Reflection on last year's priorities for improvement

2. DIGITAL TRANSFORMATION

In 2025-2026, digital transformation remained a priority, with significant progress made in integrating our systems with local health services. Through active participation in regional digital meetings and collaboration with healthcare providers, we ensured our efforts aligned with system-wide plans and supported a smooth, coordinated transition towards integrated digital care.

We are well established in digital medication management, with electronic prescribing, administration and medicines reconciliation embedded in practice for several years, supporting safe and effective care. This year we also engaged with the eCare system at Royal Cornwall Hospitals Trust and continued our involvement in the Devon and Cornwall Care Record, including the implementation of the Electronic Treatment Escalation Plan across the region. We also introduced a digital quality and performance system to enhance governance, oversight and evidence-based decision-making.



Reflection on last year's priorities for improvement

3. EDUCATION AND TRAINING

Throughout the year, Cornwall Hospice has continued to invest in the learning and development of our staff and volunteers, ensuring they have the skills needed to perform their roles effectively and safely.

We have had an excellent year for education and training, with high compliance achieved across staff groups through a comprehensive programme of both essential and developmental training. Our approach - encompassing face-to-face sessions, e-learning and practical skills training - ensures accessibility and effectiveness, supporting workforce engagement and competence. Training aligns with national standards and best practice, ensuring staff remain confident and up to date in their roles.

We have strengthened our learning culture by promoting continuous professional development and reflective practice, and by collaborating with external partners to share learning and maintain consistent care standards. Learning from incidents and feedback has been integrated into training programmes, directly supporting quality improvement.

Staff feedback indicates that training is valued and impactful, improving confidence, performance and job satisfaction.



Inpatient Numbers

Over the past year, Mount Edgcombe Hospice and St Julia's Hospice provided specialist inpatient care to 332 patients, with an average length of stay of 12 days at Mount Edgcombe Hospice and 13 days at St Julia's Hospice.

Activity reduced by approximately 7% compared with the previous year. This was anticipated and reflects a planned reduction in capacity at Mount Edgcombe Hospice during an ambitious programme of refurbishment and redevelopment. Temporary bed closures were necessary to ensure the continued safety and dignity of patients, visitors and staff while renovation works were carried out.

Although this resulted in a short-term reduction in available beds, the redevelopment forms part of a wider investment in our inpatient environment, significantly enhancing the quality of care we are able to provide and improving patient experience, privacy and comfort. The project was completed in May 2026, with operational capacity now fully restored.

332

**Inpatients at St Julia's and
Mount Edgcombe Hospices**

12

**Mount Edgcombe
Hospice**

13

**St Julia's
Hospice**

Days average stay

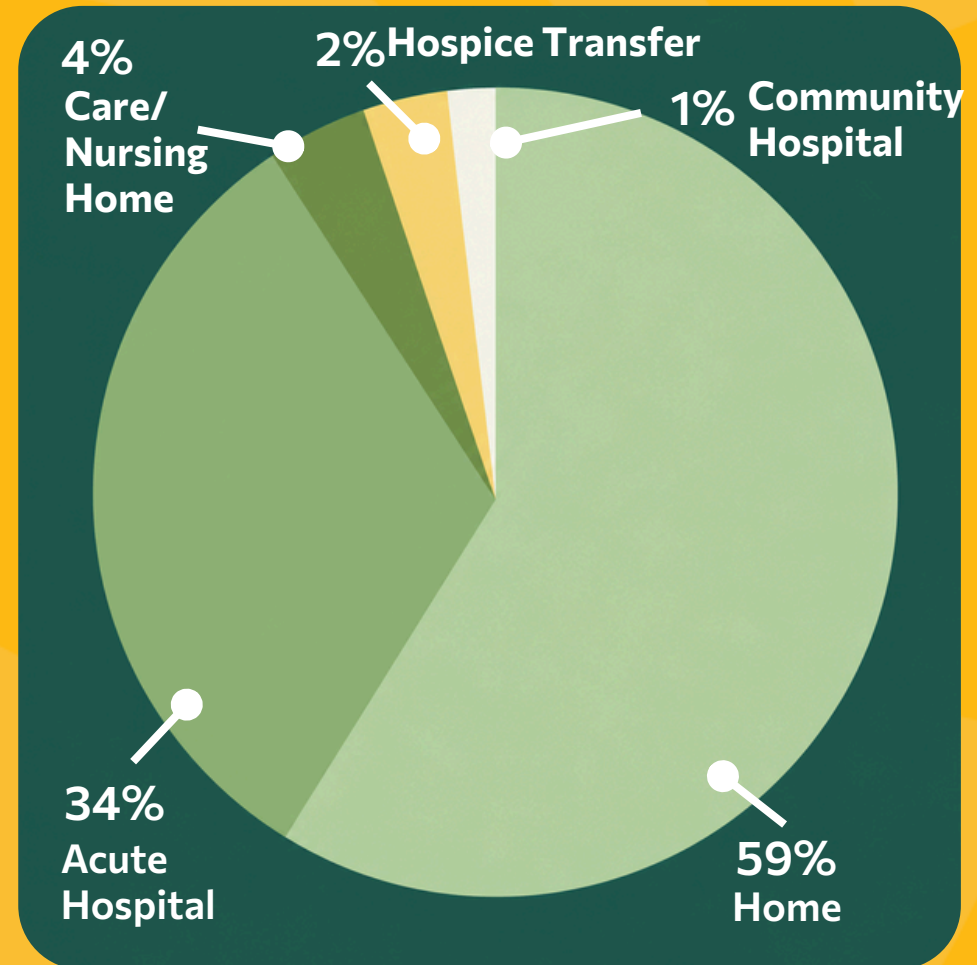


Inpatient Admissions

During the reporting year, the majority of patients admitted to the inpatient units at Mount Edgcombe Hospice and St Julia's Hospice came directly from the community. This reflects the strong working relationships we have with primary care and specialist palliative care teams, enabling patients to access inpatient hospice care in a timely and planned way, avoiding unnecessary hospital admissions.

A further 34% of admissions were from acute hospital settings, reflecting the valuable role our inpatient units play in facilitating a timely discharge and supporting patients' specialist palliative care needs outside of an acute environment.

The remaining admissions came from a range of settings including care and nursing homes, community hospitals and inter-hospice transfers, highlighting the flexibility of our inpatient service and its ability to respond to varied referral pathways, ensuring patients are cared for in the most appropriate setting for their individual needs.



Inpatient Outcomes

Discharge planning remains an important aspect of inpatient care at both hospices. While many patients are admitted for end-of-life care, a proportion are able to be safely discharged following a period of symptom stabilisation, assessment and support.

Where discharge is appropriate, it is planned by the multi-disciplinary team in close partnership with patients, families, community teams and other healthcare providers, with patients primarily returning to their usual place of residence - whether their own home or a care setting - with onward support from primary care. Our physiotherapists and occupational therapists play a key role in this process, offering expertise across a wide range of areas including mobility, breathlessness management, mindfulness and relaxation techniques, non-pharmacological pain management, memory-making activities and advance care planning.

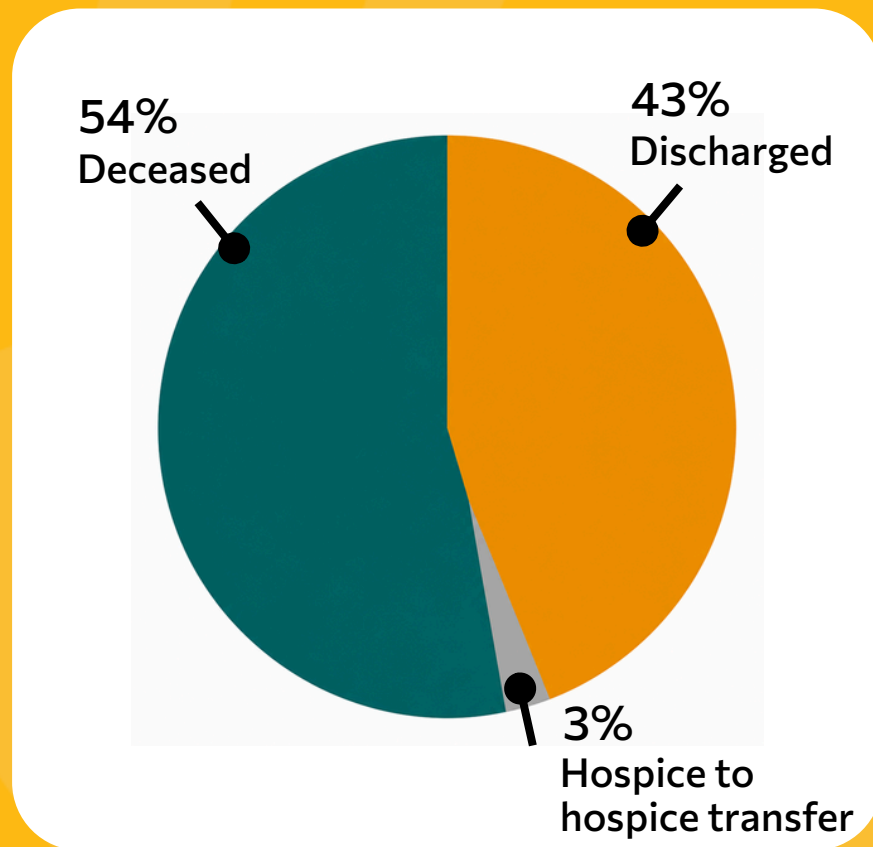
Our approach focuses on supporting patient choice, promoting dignity and independence, and ensuring robust support arrangements are in place following discharge - helping to ensure safe transitions of care and reducing the risk of unplanned re-admission.

The graphs on the following page provide an overview of inpatient discharge destinations and patient outcomes during the reporting year, illustrating where patients were discharged to and overall outcomes - including patients who passed away on the inpatient units and those discharged with onward support.

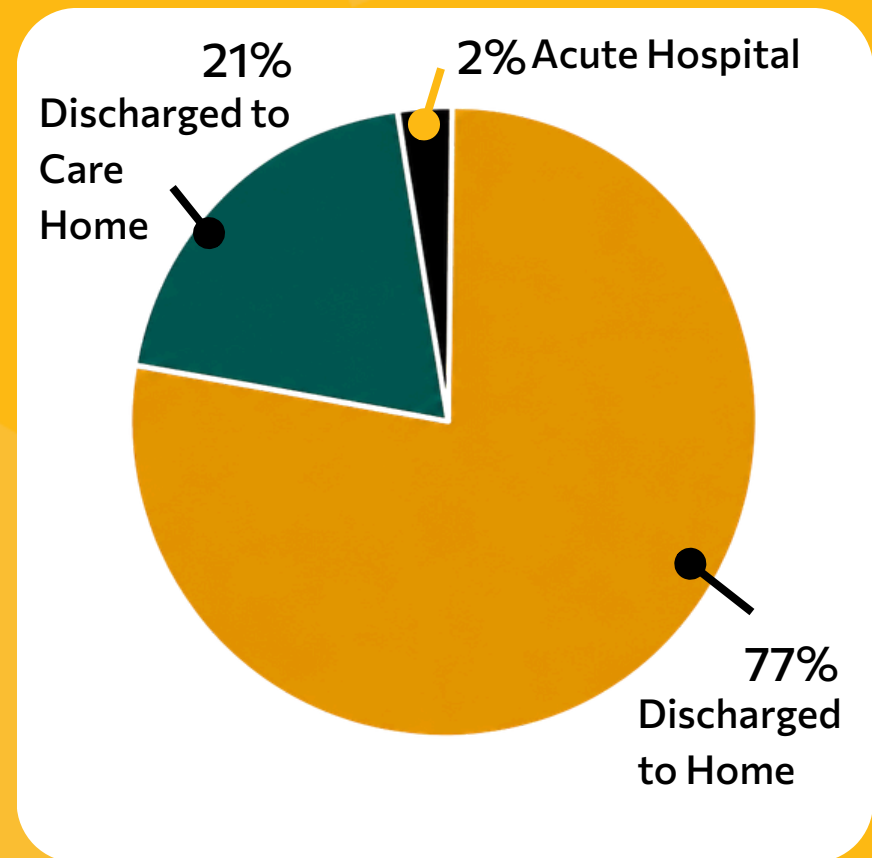


Inpatient Outcomes

**Outcomes for every episode of care
across Cornwall Hospices
2025 - 2026**

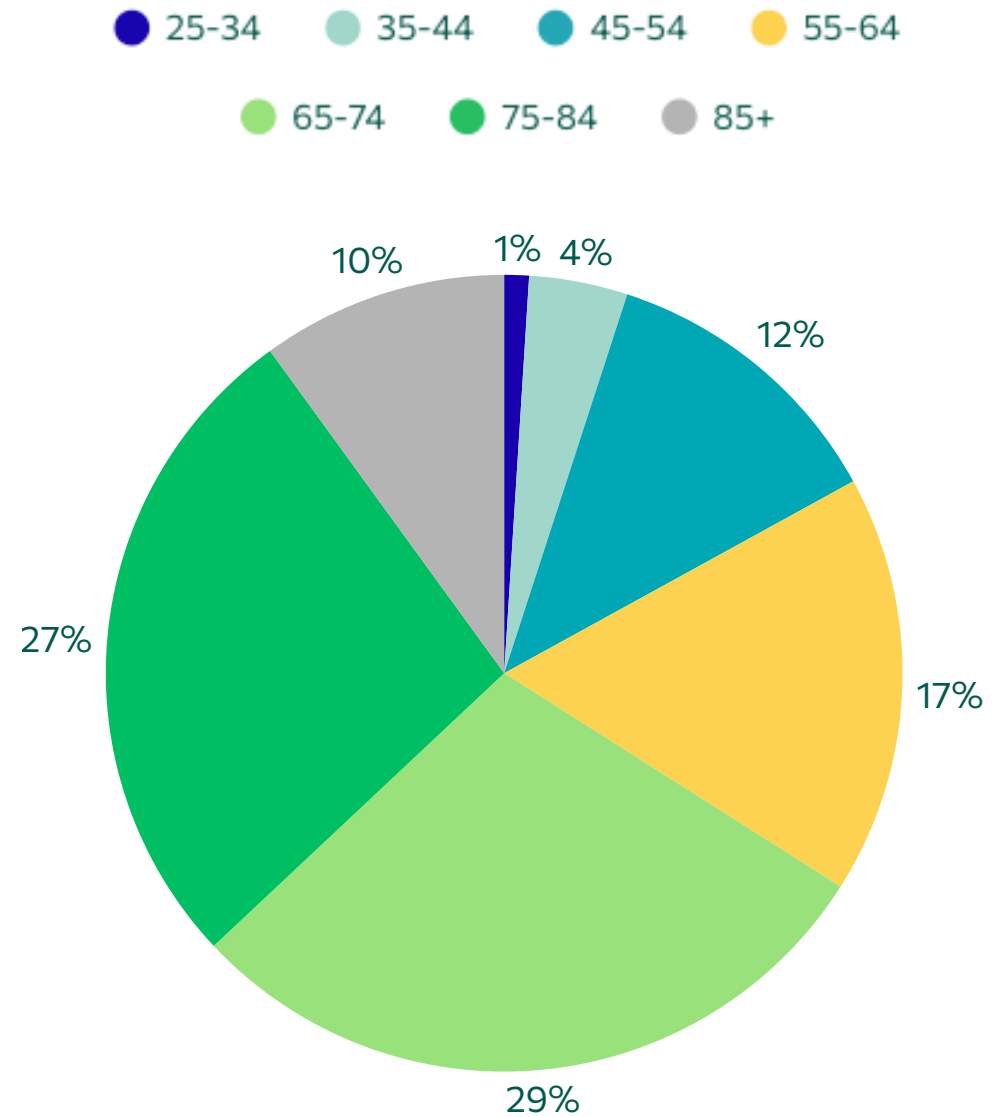


**Destination of patients who were
discharged from Cornwall Hospice
2025-2026**



Age of Patients

Cornwall Hospice cares for patients across a broad age range, with the majority aged between 45 and 85 years, reinforcing the importance of delivering adaptable, high-quality palliative care tailored to individual needs and circumstances.



Feedback

Last year, we received 130 responses through the 'Friends and Family' feedback form and 96 thank-you cards and letters. The gratitude expressed reflects the compassionate care provided by our staff and volunteers, and helps us understand both what we do well and where we can improve.

Although the 'Friends and Family' feedback form is anonymous, those who wish to raise a concern can provide an email address for follow-up, allowing us to address issues whilst respecting anonymity. We have also introduced a digital feedback option for staff suggestions.

“It sounds strange to tell people our time with you was happy, but it was. That is testament to how safe and cared for you made our mum feel. I am not sure there is a greater gift any human can bestow on another.

Please know you are not just 'doing a job' you are shaping and impacting lives at someone's most vulnerable time and you do it with such grace.

You mattered to our mum because you removed her fear – for that we will forever be indebted to you. We speak of you all so often, and it is true to say our hearts are full with eternal gratitude that you are the people who came into our lives.

You made a difference and that matters just as much today as it did then.”



“The biggest thank you for the care, support and kindness you showed our dad in the last few days of his life.

You made the hardest time just a little bit easier and we are forever grateful.”

“Words are not enough to express our thanks and appreciation for your work, care and warmth these last few weeks. My husband felt so supported, cared for and loved – all of you contributed to that both for him and us.

The work you do is both critical and amazing.”



Pat's Story

“From the moment Andy arrived at St Julia's, the care was exceptional.”



‘Having a laugh in France’



‘Wannabe Musicians’



‘With one of 6 grandchildren’



‘Honeymoon in Galapagos’



My name is Pat Bartholomew, and I have been a real beneficiary of the support provided by Cornwall Hospice. My husband, Andy, died on 13 July last year after living with prostate cancer for a number of years. We had recently returned from a three-week cruise that we had not been sure he would be well enough to take, only to receive the devastating news that his cancer was terminal.

We made the most of the little time we had left together. Andy threw himself into putting practical things in place for me, even as he became more unwell and came under the care of the community palliative care team. Fortunately, we had talked openly many years earlier about what we would want at the end of life. Coming from an NHS background, I had always felt these conversations were important, and we had both agreed that, when the time came, we would prefer to be cared for in a hospice. When Andy's condition deteriorated, he was admitted to St Julia's Hospice, where he spent the final 11 days of his life.

From the moment Andy arrived at St Julia's Hospice, the care was exceptional. I remember being overwhelmed with relief that a professional team could do for him what I no longer could. They looked after Andy with great kindness and dignity, but they cared for me as well. Small things stayed with me: being asked how I liked my tea, being handed tissues when I needed them, and being given the space and support to be there in the way Andy wanted. Although he was too unwell to get out of bed, we could have the doors open to the garden in the summer heat, and there was a sense of peace that meant a great deal to both of us. When Andy died, I was with him, and the staff were there for me too. I remember two staff in the room, one caring for Andy while the other was caring for me. I will never forget that.

During those 11 days at the hospice, I noticed information about the support available afterwards and took a photo of the poster to refer to later. I decided to try Walk Talk Kernow, a bereavement support group run by Cornwall Hospice that brings people together through gentle walks and conversation. It suited me far better than the idea of sitting around a table. I have always been a walker, and being outdoors with people who understood grief felt right for me. At my first walk, I became upset when someone simply asked my husband's name, but nobody was embarrassed or tried to change the subject. Instead, I was surrounded by people who understood exactly what I was feeling - that acceptance made a huge difference.

Since then, Walk Talk Kernow has become an important part of my life. It has helped me build a broad friendship group and a supportive network of people who meet not only on the organised walks, but also for outings and shared activities. Through that support, I have felt less alone and more able to adjust to life as a widow. I cannot thank Cornwall Hospice enough for the care they gave Andy and for the ongoing support they have given me. They have been absolutely amazing.



Make every moment *matter.*



**Cornwall
Hospice**



Registered Charity
No. 1113140

Complaints and Safeguarding

Cornwall Hospice strives to be open and to address concerns quickly, helping to prevent issues from escalating to a formal stage. During this reporting year, Cornwall Hospice received no formal complaints.

Safeguarding remains a top priority, strong procedures are in place to ensure the safety of patients, families and carers, promoting a culture of openness and respect. Staff and volunteers are trained to handle safeguarding concerns confidently, and Cornwall Hospice works collaboratively with local partners and agencies to manage concerns, share information responsibly and support patients and families compassionately.

Audit Process

Over the past year, a programme of clinical audits has been undertaken across the inpatient units, led by the nursing teams to provide ongoing assurance of care quality and safety. Audit outcomes are reviewed at the monthly Clinical Governance Committee, supporting oversight, shared learning and the identification of trends. Ward managers provide feedback to their teams, recognising areas of good practice and excellence as well as highlighting opportunities for improvement.

Cornwall Hospice is currently redesigning the audit framework, moving from a monthly to a quarterly cycle. This revised approach will support more in-depth analysis of audit findings, enable clearer identification of strengths and development areas, and allow sufficient time for improvement actions to be implemented, embedded and evaluated. It will also facilitate targeted support for wards where required, strengthening Cornwall Hospice's approach to continuous quality improvement and assurance.



Clinical Incidents

At Cornwall Hospice, all clinical incidents reported by staff are recorded through the internal incident reporting system and reviewed as part of Cornwall Hospice's clinical governance processes. Although Hospice UK does not require the submission of lower-level harm incidents, these are recorded and monitored internally to ensure comprehensive oversight and learning.

Following reported incidents, a bi-monthly multi-disciplinary team (MDT) meeting is held to review incidents in detail, identify themes and maximise learning opportunities. Learning is then cascaded to teams across the organisation to support continuous improvement and strengthen patient safety. Cornwall Hospice follows the Patient Safety Incident Response Framework (PSIRF) for incident reporting and the sharing of learning.

Incidents and Patient Safety

Cornwall Hospice monitors and reviews incidents to ensure patient safety and drive quality improvement. Incidents are reported both internally and via the Hospice UK portal for benchmarking and shared learning, covering a range of incident types including medication errors, falls and near misses to identify patterns and inform improvement activity.

This year, Cornwall Hospice achieved a 35% reduction in pressure damage during admission, reflecting improvements to assessment processes and preventive measures. A 23% decrease in pressure ulcers identified on admission was also recorded. While some pressure damage remains unavoidable given the complexity of need among hospice patients, timely assessments, effective symptom management and appropriate equipment continue to support improved outcomes for those admitted with existing pressure injuries.

Falls Prevention

Falls were minimised through preventative measures including low-level beds, appropriate room allocation and personalised risk assessments. This approach balances patient independence with safety, enabling patients to remain active while reducing the risk of harm.



Controlled Drugs

Over the past year, Cornwall Hospice has strengthened its processes for the management of controlled drugs, resulting in a more robust and clearly defined procedure. Governance and oversight have been enhanced through the appointment of two Deputy Controlled Drugs Accountable Officers (CDAOs), who support the Head of Clinical Services in their role as Controlled Drugs Accountable Officer. Appropriately trained staff also undertake the destruction of controlled drugs, and the additional support in these roles ensures destructions can be carried out more frequently and in a timely manner. A nominated authorised witness supervises all destructions to provide appropriate oversight and assurance. Cornwall Hospice has had no controlled drug incidents 'that cause harm to patient'.

The CDAO team has also embedded regular team meetings, auditing of occurrence reports and active engagement with the Controlled Drug Local Intelligence Network (CDLIN). This has strengthened oversight of controlled drug incidents, supported shared learning and enhanced the team's contribution to clinical governance and continuous quality improvement.

Infection Control

Cornwall Hospice maintains a strong focus on infection prevention and control to ensure the safety of patients, visitors, volunteers and staff. Over the past year, no hospice-acquired infections have been reported, providing assurance that effective infection control measures are embedded within daily practice. Monthly environmental audits monitor cleanliness and compliance with infection prevention standards, ensuring high standards are consistently maintained across all areas. Cornwall Hospice also receives an annual infection prevention and control inspection from the local acute hospital infection control team, providing independent external assurance.

Infection prevention and control training is embedded within Cornwall Hospice's mandatory training programme, ensuring all staff and volunteers receive regular, up-to-date guidance in line with current standards and best practice. This integrated approach supports consistent application of infection control principles, strengthens awareness of individual responsibilities and contributes to maintaining a safe environment for patients, families, staff and visitors.

The outcomes of the most recent infection control external inspection:

Mount Edgumbe Hospice 95%

St Julias Hospice 98%



Education

Over the past year, Cornwall Hospice's Education Team has significantly advanced learning and understanding of palliative and end-of-life care, delivering a broad programme of education for staff, volunteers, students and partners.

A key focus was delivering tailored education and workshops to external partners, strengthening relationships and supporting professional development. Topics included end-of-life care, pain management and compassionate conversations, with 730 people receiving external training. University placement audits confirmed strong governance arrangements, and 131 students were supported through placements and education during the year.

Education was integrated into clinical practice, with the team providing frontline teaching to support safe, person-centred care and developing policies and care plans aligned with best practice. A total of 1,337 attendees participated in individual sessions, and Resilience Based Clinical Supervision was offered to enhance staff wellbeing and resilience.

The team remained actively engaged in local and regional networks, leading the Cornwall and Isles of Scilly Palliative Education Group and continuing the Advanced Communication Skills programme. Feedback from participants was positive, with many noting increased confidence and the practical impact of their training.



Palliative Care Research Nurse

Cornwall Hospice introduced its first dedicated research role, funded by the National Institute for Health and Care Research (NIHR), working across both hospices two days a week to establish a solid foundation for future research activity.

The role supports Cornwall Hospice's participation in quality research and ensures hospice care is informed by evidence and patient experiences. In its first year, the focus has been on establishing effective structures, building confidence and forming strong partnerships with local and national research bodies.

A research governance approach has been developed to ensure safety and ethical rigour, enabling Cornwall Hospice to participate in national studies, support local research and involve patients and families meaningfully. Cornwall Hospice is now a Patient Identification Centre, supporting selected NIHR-funded research projects.

Cornwall Hospice is currently participating in a national study led by the University of Plymouth, focusing on end-of-life care experiences in rural and coastal areas of the South West, with both staff and bereaved families contributing to the research. A further NIHR-funded study, exploring physical changes at the end of life, is also planned. Cornwall Hospice has additionally supported local research, including a study on the relevance of older cancer legislation - the first to use the hospice's new research approval process.

Encouraging staff interest in research remains a priority. Two staff members have been supported with research ideas, and links with the University of Plymouth are being explored for research internships. Cornwall Hospice has also joined regional and national palliative care research networks and engaged with the public at local events to highlight the importance of research in improving care.

Looking ahead, plans include new collaborative research projects, a short training session on palliative care research for staff and a dedicated research intranet page. A Hospice Innovation Group is also being planned to involve staff, volunteers and the public in shaping future research and innovation.



Lymphoedema

Cornwall Hospice's lymphoedema clinics treat cancer-related lymphoedema for adults across Cornwall and the Isles of Scilly, supporting patients from diagnosis through to palliative care, including inpatients requiring lymphoedema management. Referrals are accepted from all healthcare professionals, and the service works closely with the team at Royal Cornwall Hospitals Trust. Following a two-hour assessment, the team works with patients to identify the most appropriate treatment options, with the aim of improving function and movement, reducing swelling and pain, enhancing scar tissue management and boosting overall quality of life. Psychological support is also provided to help patients live as fully as possible and, where appropriate, return to work.

Initial assessment:

The initial assessment covers:

- Differential diagnosis
- Explaining anatomy and physiology so that patients can understand their condition and why lymphoedema has developed in that area
- Education on managing the condition day to day, including exploring hobbies and interests so that patients can continue to make every moment matter
- Discussion of treatment options to achieve the best results in a way that is sustainable and manageable as a lifelong condition
- Psychological support, including understanding where each patient is with their diagnosis, prognosis and general wellbeing, to help formulate treatment plans and support concordance

Once a treatment plan is established, patients are seen for an intensive period to reduce oedema and pain and improve quality of life, before moving into a maintenance phase.

Mount Edgcumbe Hospice

Number of appointments: 853

Referrals: 59

Discharges: 53

St Julia's Hospice

Number of appointments: 950

Referrals: 73

Discharges: 58



Treatments offered at both clinics:

- Myofascial release - by releasing scar tissue, this makes a significant difference to range of movement (ROM) and lymphatic flow
- Manual lymphatic drainage (MLD) - mostly used in conjunction with myofascial release, as improving ROM and softening tissues increases quality of life (QOL), enables patients to stay in work and reduces visits to their GP for pain management
- Intermittent pneumatic compression (IPC) - a machine for arms and legs that works on a vascular element to encourage lymphatic flow and enable greater ROM for patients
- Kinesio tape - an excellent addition to compression hosiery and massage, as it works in the background and can be managed by the patient independently at home
- Reviews are at one month post initial assessment and, if no further treatments are required, patients will then be seen at five months and then six-monthly to re-measure and ensure current compression is maintaining or reducing volumes and altering tissue texture. Education is vital for compression as patients must understand that any weight gain or loss will have an impact upon the quality of mmHg, and that if patients are undergoing oncology treatment this will alter tissue tension and compression will need to be altered accordingly
- Reflexology at St Julia's Hospice clinic



Lymphoedema - Patient Quotes

“I have been attending the lymphoedema clinic at St Julia's in Hayle for a number of years and have always received excellent treatment. Chris gives good advice, answers questions and explains everything in a clear, friendly manner. I am exceedingly grateful for all the treatment I have received which has certainly helped me tremendously. It's excellent.”



Lymphoedema - Patient Quotes

“I was encouraged in understanding how my body works and needed information to help me help myself. To clarify how best I can improve and stop the pain I was experiencing.

Indeed Helen identified an issue with the swelling below my left breast in my abdomen that I have been seeking an answer for from my GP for 18 months.

I have had investigations/scans to identify what the mass was unsuccessfully until Helen could help.

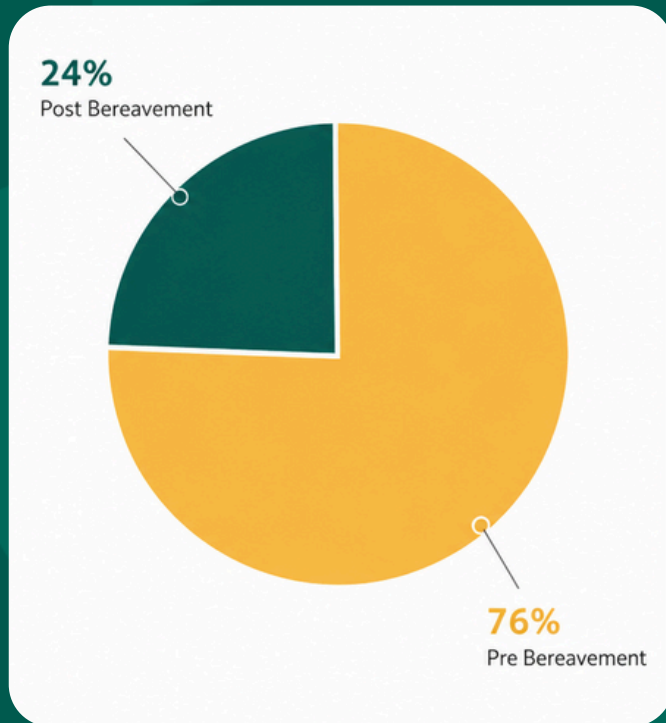
I cannot recommend the clinical service highly enough. Professional, knowledgeable, reassuring and excellent.”



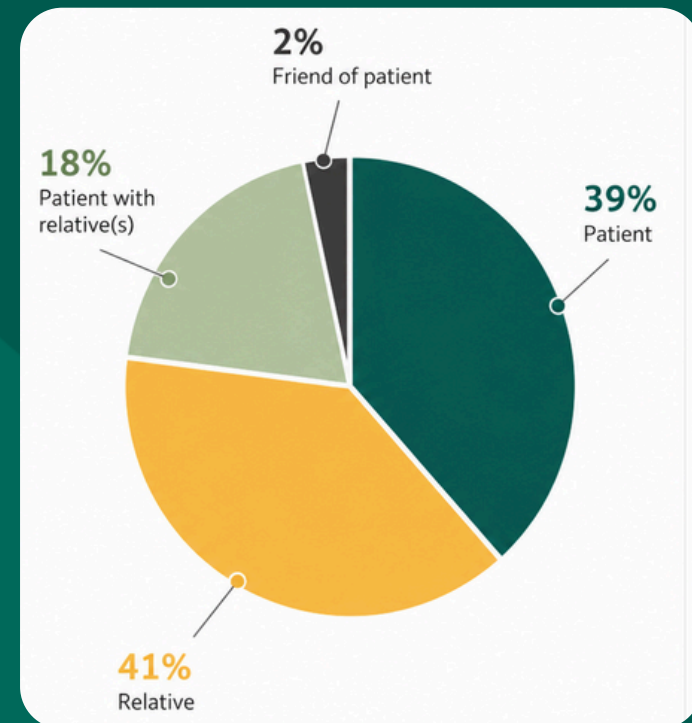
Patient and Family Support Services

Cornwall Hospice's Patient and Family Support Service offers compassionate, holistic support to patients and their families throughout their journey with the hospice. The team plays a vital role in providing emotional, psychological and practical support, helping individuals and those important to them feel supported and understood. Over the past year, the service delivered 1,480 hours of care, demonstrating a significant contribution to patient and family wellbeing. Working closely with the wider multi-disciplinary team, the service helps ensure care is person-centred, responsive and tailored to individual needs, promoting dignity, reassurance and continuity of support at every stage of care.

When Support Was Offered by Patient and Family Support Services 2025–2026



Types of Clients Supported by Patient and Family Support Services 2025–2026



Complementary therapies

Over the past year, Cornwall Hospice's complementary therapy team delivered 875 treatments and interventions for patients and a further 178 for carers and relatives. Individual patients may receive more than one complementary therapy intervention during their inpatient stay, with sessions offered regularly in response to ongoing needs and preferences.

“Helpful and knowledgeable. Suiting treatments and oils to my condition. Foot massage took me into a place I had not been before. Super relaxed after both treatments. I had the best sleep.”



Community Services

Listening Ear:

Cornwall Hospice's Listening Ear Service is available to anyone living in Cornwall who has experienced the death of a loved one within the last three years. Although not a counselling service, it offers information, support and signposting via telephone for up to six calls of one hour each. Clients can self-refer or be referred by a healthcare professional.

Total referrals:

264

Number of support calls:

1060

"I don't really want the calls to end, but I do feel in a much better place and speaking to you has been so helpful, having someone who understands, and I can say anything to."



Community Services

Neighbourhood Hub:

Cornwall Hospice's Neighbourhood Hub service offers support, practical advice, information and treatment for people living with a palliative or terminal illness or a deteriorating progressive disease. Emotional and psychological support is also available for their carers. The service supports patients with a range of needs including problem solving, daily living activities, equipment, fatigue and anxiety management, advance care planning, breathlessness management and more. The hub team complete a full assessment and focus treatment on what matters most to each individual.

Total referrals:

116 (76 x patients, 40 x carers)

Number of support calls/appointments:

244

“Thank you so much for your support, you will never know how much assistance and help you have been. If I hadn't spoken with you, I would have done something awful to myself.

I was so low and I can see that now. I have really looked forward to your calls and appreciated them. You listened and that was so helpful”



Community Services

Walk Talk Kernow

Walk Talk Kernow is Cornwall Hospice's walking adult bereavement support group. Whilst walking one to two miles in nature, each group provides a space for those who are bereaved and seeking social connections with others. Sessions are held at various locations across Cornwall, including Penzance, Truro, Hayle and St Austell.

Total number of attendances: 657

Bereavement Help Point

The Hospice's Bereavement Help Points take the form of a monthly drop-in space for anyone who has been bereaved, offering a relaxed and supportive group environment for conversations, peer support, signposting and refreshments. Sessions are currently running in Ladock, Hayle, Redruth, Launceston and St Austell.

Total number of attendances: 243

Brandon Trust - Listening Lounge

A friendly and welcoming space for adults with a learning disability to talk about death, bereavement and loss. Sessions are held monthly, alternating between Redruth Hub and Brandon Trust offices in Roche, with a different craft activity each month to support and encourage conversations. This service launched in April 2025.

Total number of attendances: 41

"Thank you so much for everyone that attends, especially to the volunteers!"

Come rain or shine, they are always there to guide us with, offering a friendly chat, or a shoulder to cry on! Since starting, I have been able to put one step in front of the other...literally!

I have made friends that I didn't even know that I needed but are now a true connection in my life."



Volunteering

Cornwall Hospice has an extensive community of volunteers who support its work throughout Cornwall - in shops, hospices and the community, and across fundraising efforts. The 1,600 strong volunteer community makes a daily difference to patients, families and friends and is at the heart of the charity.

Cornwall Hospice encourages volunteers to contribute to the life of the hospice in meaningful ways that reflect their skills, interests and availability. Volunteers play a vital part in supporting the delivery of high-quality hospice care, with contributions spanning patient interaction, bereavement services and the maintenance of peaceful and therapeutic gardens across both hospice environments.

Volunteers continue to make a significant contribution to the quality of services provided, and their impact is felt by everyone who visits Cornwall Hospice.

By continuing to invest in, expand and strengthen volunteer roles and engagement, Cornwall Hospice is well placed to build on this already significant positive impact, ensuring volunteers remain a core part of delivering safe, responsive and person-centred care.



Ian

Ian joined the St Julia's Hospice volunteer gardening team in January 2026, inspired by a chance encounter with Healthcare Assistant Michelle at Hayle's remembrance service the previous November. Michelle recognised Ian and remembered his wife Glennis, who had been a patient at St Julia's Hospice nine years earlier. She reintroduced herself and asked how he was doing - Ian was deeply moved that Michelle remembered both him and his wife, and felt encouraged to come and talk about volunteering.

With a wealth of practical skills and a keen desire to give something back, Ian has already made a tangible difference. He arranged a donation from Jewson's of one tonne of blue slate chippings for the new succulent rockery outside the hospice reception, and has also spruced up the external walls of the courtyard garden.

Ian's story is a wonderful reminder of how the care Cornwall Hospice provides touches so many lives across the community - and how that connection can inspire people to give back for years to come.



Soo

Soo Stockle has been volunteering on the ward and on reception at St Julia's Hospice for 20 years, celebrating this wonderful milestone with staff, volunteers and a fabulous cake made in-house by the St Julia's chef.

Soo's journey began when she spotted an advert on a noticeboard - "can you spare a few hours a week?" - noted down the number, made the call, and the rest is history.

When asked what she gets out of volunteering, the answer is everything. From being part of the team to making a difference in the smallest of ways to patients, families, staff and fellow volunteers - it all means the world to her.



Priorities moving forward

- Strengthening system-wide palliative care reform through continued collaboration, ensuring roles and ways of working are fit for the future. This may include closer alignment with the virtual ward model as part of ongoing reform.
- Building on established collaboration with the National Institute for Health and Care Research (NIHR), including the appointment of a dedicated research nurse and continued involvement in supporting research and innovation in palliative care.

Future Focus: Sustainability, Efficiency and Service Resilience

- Looking ahead, Cornwall Hospice will continue to strengthen its approach to sustainability across both clinical and non-clinical areas, with a focus on improving efficiency, reducing costs and enhancing patient and family experience.
- This includes ongoing review of how Cornwall Hospice manages resources, develops in-house capabilities and works collaboratively with local partners to support holistic care.
- Cornwall Hospice will remain proactive, building on recent investment to improve the comfort, safety and environmental performance of its buildings. Alongside this, a more structured approach to asset management will be adopted to ensure both hospices are well maintained and capable of supporting high-quality clinical care into the future.
- Cornwall Hospice will also continue to review its clinical service provision and voluntary offer to ensure they remain responsive, sustainable and aligned with the needs of patients, families and the wider community.



We will continue to make every moment *matter*.





Thank you