

End of life care for all



CELEBRATING
FIFTY YEARS

Live until you die.
The first 50 years of
Dorothy House.
And looking ahead
to the next 50.

www.dorothyhouse.org.uk



Our story
is your
story...



Ever since life began, death has been with us. It's an inescapable part of the human condition, an inevitability for everyone.

Different eras, cultures and belief systems have found their own ways of facing and commemorating death. Through rituals and rites, tradition and observance, mourning and remembrance. These expressions of loss, farewell and celebration have brought comfort. They're an important part of the grieving process, helping family and friends to find closure and move on.

Over the past 50 years, Dorothy House has cared for more than 75,000 people (patients, their families and loved ones). Our story is a remarkable one, a compendium of the countless profound stories of patients and families navigating this precious time.

Every one of these personal stories is moving and unique. We recognise and celebrate this, as we believe that whoever you are, whatever your condition, no one should face death alone.

We are here when it counts. At hand to help people live their final days fully, peacefully and with dignity.

Dame Cicely Saunders forever changed the way we think about caring for the ill, the dying and the bereaved. She was the brave, inspiring founder of the hospice movement, rejecting the accepted notion that there “was nothing more to be done” for a dying patient, in the belief that there was always “so much more to be done”.

Based on her groundbreaking experiences, Dame Cicely set down a series of compelling guiding principles that later became the foundations of Dorothy House.

“You matter because you are you, and you matter to the end of your life. We will do all we can not only to help you die peacefully, but also to live until you die.”

Dame Cicely Saunders



Dame Cicely Saunders was a nurse, medical social worker, physician and lecturer, who established the hospice movement in the late-1960s. An extraordinary woman with ideas way ahead of her time, she recognised that traditional hospitals simply weren't equipped to provide adequate care for dying patients. Because what's needed is a more holistic approach, combining excellent medical and nursing care, together with practical, emotional, social, and spiritual support.

“To think that Prue’s vision and passion has created such an influential and important organisation is just wonderful. Here’s to the next fifty years.”

Rod Macleod, Dorothy House’s first full-time physician

Our inspiring founding principles include:

- Believing that everyone has true value, no matter what their situation. And by extension that end of life patients should be treated with the same respect and dignity as patients who will recover. However long they have, there is always something to be done for end of life patients.
- Helping patients to live a full and comfortable life until the very end. As Dame Cicely Saunders so beautifully put it: “Adding life to days, rather than days to life”.
- Recognising that family and friends are a vital part of the care team, but that they also need support, before and after bereavement. A person’s last days are precious, emotional and intense, as those around them cherish their time together and mentally prepare themselves for what’s to come.



Prue Dufour set up the Dorothy House Foundation in 1976. Spurred on by a month’s sponsored secondment at Dame Cicely Saunders’ St Christopher’s Hospice in London, she was determined to bring similar innovative palliative and end of life care to the West Country. Another woman of immense vision and conviction, Prue put many of Saunders’ palliative care principles into practice as well as developing her own. She coined the name Dorothy House, as Dorothy means ‘gift from God’, which reflected her religious leanings.

Living in the present. Dorothy House today.

Dorothy House was built from humble beginnings. At first, it was just Prue, caring for cancer patients in their homes, supported by the Macmillan Cancer Relief Society. She's credited as being the UK's very first specialist domiciliary nurse. Then in 1979, her house on Bloomfield Road, Bath, became our first inpatient unit, with six beds.

In the past five decades, our dedication to serving the local community hasn't changed, although we have evolved and grown to meet increasing local demand. Our remit has also moved on, from caring for people and their families in their very final days, to looking after them in their last 1000 days, offering support from the time they're diagnosed with a life-limiting illness.

Each year, we directly care for over 4,000 people in and around Bath and north-east Somerset and parts of Somerset and Wiltshire, with most people looked after in their own homes or the community. We employ over 350 staff, run 10 local palliative care teams and 30 charity shops. Our many services are tailored to individual needs, family oriented, and take a holistic approach to palliative and end of life care. These range from medical practice to therapy, bereavement support,

wellbeing clinics, education, research and open-access community groups.

Our philosophy of care has remained constant: to see the people we care for as people, not patients; to respect their personal choices; to be there for relatives and friends through tough times; to make a positive contribution to our local community; to go about our work with diligence, respect and humility.

We recognise that our inspiring 50-year history isn't our own, but made up of countless astonishing stories, all inextricably intertwined. The stories of patients, families, members of the community, our staff, our friends, our partners, our colleagues — anyone and everyone whose life has been touched by Dorothy House over the past half century.

We are compiling these fascinating fragments of our legacy as part of our

Life Lines project. Brought together, they will create a compelling, well-rounded account of Dorothy House — who we are and what we mean to people — recounted from all kinds of personal, moving and uplifting perspectives.

Officially speaking, Dorothy House is a charitable trust — £4 in every £5 we need to keep the organisation running comes from donations and fundraising, while the other £1 is from the NHS. Fundraising events, activities and our shops play a huge and vital part in the life of Dorothy House. We rely on the amazing ongoing support and generosity of friends, champions and local people, young and old, who pitch in year after year.

We're proud of the way we go about our work and the high standards we set ourselves. Our last inspection by the Care Quality Commission (CQC) rated us 'Outstanding', which puts us in the top

3% of service providers in the UK. More than 90% of the care and support we provide takes place in people's homes or in community settings. And that's important — family and familiarity are great sources of comfort to people who are unwell and moving towards the end of their lives.

Home care also chimes with our focus on local palliative and end of life care that's deeply rooted in our community. This is where we can make the most tangible, telling difference, working closely with family, friends, neighbours and local people to provide complete care for people near to death, along with their loved ones. We recognise that we don't have the resources to cover all the bases ourselves. Collaboration is key, which is why we work closely with other charities and Health & Social care providers.



We take a positive, strength-based approach which homes in on what's great about a community, rather than the issues it faces. Instead of focusing on problems or needs, we use the skills, talents, and resources already in place, like people who live there, local groups and physical spaces. By building on these existing strengths, our communities can create lasting, beneficial change and grow stronger from the inside out.

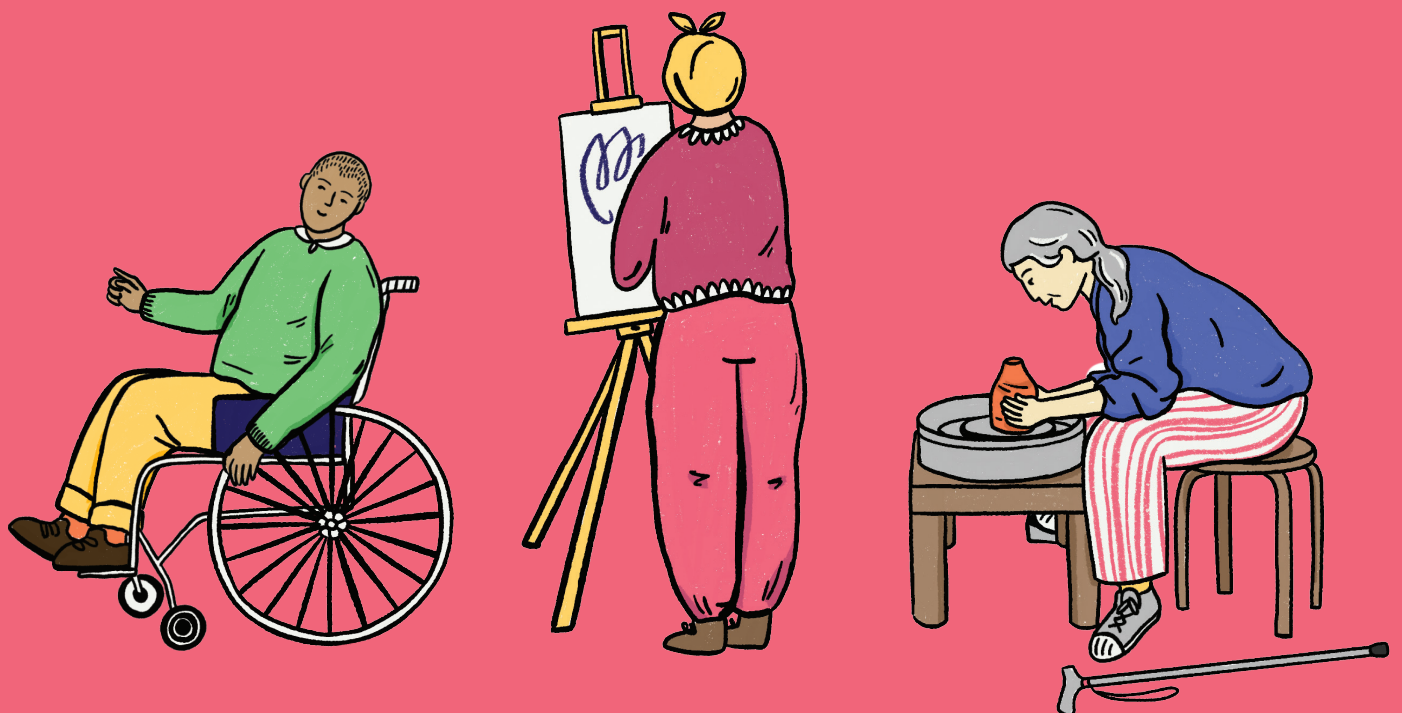
We may think local, but our pioneering, specialist work has created ripples throughout the UK and all over the world, as we share our findings, research and experience. In the early days, all nurses wanting to become Macmillan cancer nurses were trained and gained experience at Dorothy House. We also taught GPs and trainees about symptom management and specific communication skills and were invited to travel the country and abroad to spread the word about the then-new discipline of palliative care.

Prue toured the United States and helped set up a hospice in Minnesota. She also travelled and lectured extensively in the Far East. Rod Macleod, Dorothy House's first full-time physician, later moved to New Zealand to become the country's first Professor in Palliative Care at the University of Otago Dunedin School of Medicine.

Today, we have an excellent, dedicated research and education team whose role is to understand, develop and transform the landscape of palliative and end of life care. We work closely with other leading providers, forging fruitful partnerships in the UK and internationally, as well as collaborating with higher education institutes and receiving international grants to develop and refine our groundbreaking research.

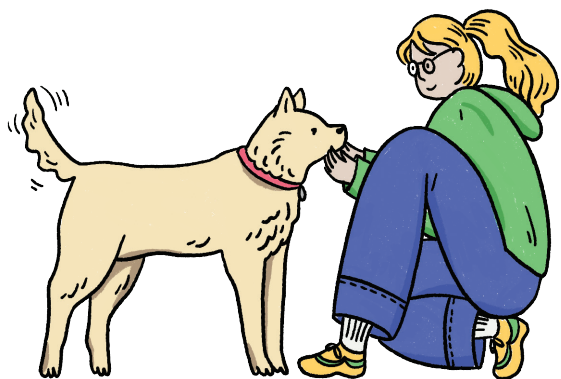


We add life
to days, not
days to life...



New beginnings for end of life care. What the next 50 years may bring.

Today's blueprint for end of care life simply won't be sustainable for the next 50 years. The UK (and indeed the world) has an ageing population, and the balance of older to younger people will shift significantly due to increased life expectancy and fewer children being born. By 2047, the 85+ age group is expected to have nearly doubled to 3.3 million, from 1.7 million in 2022.



The status quo will have to change. Dorothy House, along with other healthcare providers, will have to find ways to do things differently, innovating to meet an ever-increasing demand. The cost of caring for individuals in their last days will need to be reduced, as we move away from a mainly medical approach to one that's more holistic, with an emphasis on quality over quantity.

We see a hopeful future where families and communities take more responsibility — socially and financially. A care model that's more localised and personalised, as people approaching the end of their lives make choices that feel totally right and relevant to them.

To us, life is not about desperately holding on to the veneer of youth or artificially prolonging our life spans — ageing and death are completely natural to all animals, humans included. We need to be more accepting of death as an important part of the cycle of human existence, better educated so that we know how to deal with it confidently — practically, emotionally and spiritually.

The logical extension of this way of thinking is that death becomes seen as a positive phenomenon. That we cherish our mortality, embrace the truth of it, rather than desperately searching for new breakthroughs that will somehow help us live forever. As a race, we need to get back to our roots, get back to nature. We need to embrace life fully until our time comes. Because immortality is overrated. We believe that the most fundamental human need is connection and love.

As technology advances, people are starting to realise what's missing — namely, real human contact, communing with nature, feeling in tune with the seasons and senses.

It's well known that nature is wonderfully therapeutic, and at Dorothy House, we encourage patients to harness its positive energy on wellbeing walks and other peaceful outdoor activities.

Giving control back to people, empowering them to shape their own end of life, getting back to nature to rediscover what's set deep in our human DNA, all fits with the founding philosophy of Dorothy House. Ever since the beginning, we have been working towards a society where death is part of life.

That's our vision for the future. And we'll do everything we can to make it happen.

End of life care for all

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