

Abstracts

terminal cancer diagnosis. Referral protocols and service pathways are lacking. Physiotherapists require support and education to enhance particular skills and confidence.

Application to hospice practice Hospices have the opportunity to establish rehabilitation teams and pathways with acute hospitals to improve access to rehabilitation for all palliative cancer patients and to deliver services in line with government policy.

P163 MOVE IT OR LOSE IT! DEVELOPING SUPPORTIVE CARE: THE EVALUATION OF AN EXERCISE PROGRAMME FOR PATIENTS WITH MS

¹Nikki Archer, ²Julie Robinson, ¹Jenny Waite, ¹Denise Rowbotham. ¹*St Giles Hospice, Lichfield, UK*, ²*Move It or Lose It*

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Studies have suggested that engagement in a programme of exercise is beneficial for people living with Multiple Sclerosis (MS). There is evidence of improvements in mobility, overall health and the management of some symptoms such as fatigue, muscle stiffness, anxiety and depression.

St Giles Hospice has been working to develop its provision of Supportive Care, working with community partners to meet the needs of those affected by a life limiting illness who have previously not easily accessed hospice services.

A 12 week pilot exercise and support programme was undertaken working in collaboration with a community based exercise facilitator, and local NHS MS services.

The aims:

- promote and maintain independence
- improve muscle strength, flexibility, mobility and activity
- provide a supportive environment
- introduce patients to hospice support

The exercise class was set to music, using a range of equipment, most participants began from a seated position, with encouragement to stand if appropriate, there was focus on improving strength, stamina, mobility, co-ordination, balance, flexibility and confidence

The outcomes

- 9 people attended, aged between 43 and 77
- Overall attendance = 75%, 83 out of 111 possible attendances
- Evaluation: participants recorded sit to stand from their chair as a measure of leg strength at the beginning and end of the course.
- **The results showed significant improvement in all participants demonstrating a tangible increase in leg strength and technique. Being able to quantify their own progress boosted self-esteem, Participants reported significant social and supportive benefits to attending.**

The hospice has engaged in dialogue with commissioners to support this work. We have engaged with other MS patients, their carers and NHS staff to promote the benefits of the programme. We have engaged in dialogue with the patients who have attended and work with them to provide a maintenance programme.

P164 EVALUATION OF ADVOCACY SERVICE AT ST JOSEPH'S HOSPICE, HACKNEY

¹Hattie Roebuck, ²Susan Millar. ¹*St Josephs hospice, Hackney, England*, ²*Glasgow University Medical School*

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Evaluation of advocacy service at St Joseph's Hospice, Hackney.

Background It is estimated that 1.7 million (22%) of London residents do not speak English as their main language. In boroughs such as Newham this figure rises up to 41% of residents. (2011 Census). Newham University hospital has an extensive healthcare advocacy service to meet local need and it also provides advocates to interpret consultations at St Joseph's Hospice. **Aim** This project aimed to assess the impact of working at St Joseph's Hospice upon healthcare advocates.

Method 12 healthcare advocates were interviewed individually at St Joseph's hospice using a questionnaire. Their experience of hospice work was assessed. Their opinion was sought on whether they found working in a hospice different to the hospital setting, the emotional burden, the structure of the consultations, and episodes of culturally insensitivity. They were also asked if they would like additional training or support to undertake hospice work.

Results The advocates enjoyed hospice work but most (11/12) found it emotionally challenging. They felt unclear about how to balance professionalism and emotion whilst breaking bad news and often worried about the patient and their family later in the day. They were keen to promote continuity with the same advocate interpreting for a patient or family and to be considered part of the healthcare team. They had no formal system for emotional support and a majority requested this (11/12) plus additional training (9/12).

The advocates also reported that greater structure to the consultation process would be helpful. 7/12 felt they had observed inadvertent cultural insensitivity.

Outcomes We are liaising with the advocacy team about communication skills & emotional resilience training. Guidelines for undertaking consultations with advocates have been written. The impact of these upon advocate consultations and patient care will need to be evaluated in due course.

P165 ENGAGING MINORITY ETHNIC COMMUNITIES: AN EVALUATION OF A MARIE CURIE HOSPICE PROJECT AIMING TO IMPROVE ACCESS TO PALLIATIVE CARE SERVICES

¹Jessica Baillie, ¹Emily Harrop, ^{1,2}Anthony Byrne, ³Karen Stephens, ¹Annamarie Nelson. ¹*Marie Curie Palliative Care Research Centre, Cardiff University, Cardiff, Wales*, ²*Cardiff and Vale University Health Board, Cardiff, Wales*, ³*Marie Curie Hospice Cardiff and the Vale, Penarth, Wales*

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Background There is increasing emphasis on ensuring that access to healthcare is equitable in the UK, yet on-going evidence demonstrates that minority ethnic communities are underrepresented in accessing palliative care. A Marie Curie Hospice in Wales initiated a funded outreach project with a keyworker post to engage minority ethnic communities, aiming to improve access to palliative care services.

Methods The study aim is to evaluate the outreach project and keyworker post. A longitudinal evaluation of the initiative is being undertaken, encompassing interviews with hospice and community healthcare professionals, minority ethnic communities and the project keyworker. Key project documents, such as reports, and hospice ethnicity data are also being analysed. This presentation reports on data from semi-structured interviews with hospice staff and keyworker, and analysis of project reports. Relevant ethical and governance approvals were obtained.