

four clinical areas at a large teaching hospital in the North of England.

**Aim** To gather information regarding participants' perceptions and experiences of a CODV service, in order to improve and refine the volunteer training programme and future service delivery.

**Methods** Three study specific questionnaires were designed to elicit feedback from three groups regarding their perceptions of the CODV service and training programme: bereaved relatives/friends, healthcare professionals (HCP) and the CODV themselves. In-depth interviews were undertaken with bereaved relatives/friends, HCP and CODV's who had experienced/provided the CODV service. Interview data was triangulated around multiple perspectives in order to link 'within-case analysis' and 'between-case' analysis. All questionnaires were analysed descriptively.

**Results** 40 referrals resulted with 14 patients/families accepting the offer a CODV. 11 bereaved relatives/friends completed the questionnaire(s) and 10 consented to be interviewed. HCP's (n=60; response rate 27%) and CODV's also returned questionnaires for analysis (n=51; response rate 84%) and a sample were interviewed (n=14 & n=19) respectively.

The CODV's viewed the training as appropriate in preparing them for their role and regarded the support encounters experienced as 'profound'. Relatives perceived the CODV service as appropriate, supportive and very positive. HCPs regarded the presence of the volunteer supportive for the patient and a valuable source of additional patient information; e.g. patient conditional changes. Interestingly, the theme of patients "dying alone" was a core motivating factor for CODV's and frequently regarded by HCPs as challenging and where the CODV impacted the most.

**Conclusion** Results from this pilot study demonstrate that a CODV service can be implemented in the acute setting, providing meaningful support to patients and their families in this crucial phase of life.

OP 005

### A LIVING COMMUNITY PRESENCE: EVALUATING A CARE OF THE DYING VOLUNTEER SERVICE

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**Background** This abstract describes the evaluation of a Care of the Dying Volunteer (CODV) service provided to patients (and their relatives/friends) in the last hours or days of life, piloted in