

SKIPP, 15 two and 5, three. 28 patients continue to attend, 7 have died and 4 were discharged. SKIPP was completed by patients alone or with staff. Data was missing for SKIPP one for 9 patients. Average QOL, on a 1–7 (excellent) score, at SKIPP one was 3, SKIPP two, 5, and SKIPP three, 6. At SKIPP one, 77% of patients felt day therapy had improved things for them: 8% felt it had not helped much and 5% didn't know. At SKIPP two these figures had changed to 87% felt day therapy had helped: 13% not at all. At SKIPP three, 4 patients felt it had helped to a very great extent, 1 not at all. At SKIPP two, 10 felt that day therapy had made their concern better, 3 had no change and 2 felt it was a little worse. At SKIPP three, 3 patients felt their concern was better, 1 much worse and data was missing for 1 patient.

Conclusions SKIPP demonstrates that average QOL improves during day therapy attendance and most patients' think day therapy is helping them overall. However, a third of patients' main concern remained the same or a little worse at SKIPP 2. Only a small number completed a second SKIPP and this will influence the results. SKIPP appears to be useful in demonstrating the benefits of day therapy for some aspects of patient care.

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EVALUATING THE IMPACT OF DAY THERAPY USING ST CHRISTOPHER'S HOSPICE INDEX OF PATIENT PRIORITIES (SKIPP)

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Aims To evaluate patients' perceived global impact of day therapy and the impact of day therapy on patients' quality of life (QOL) and concerns using SKIPP.

Methods SKIPP was completed at a patients' second attendance and thereafter 6 weekly for all new patients attending day therapy at Marie Curie Hospice, Bradford between January and July 2013.

Results 43 new attendees: 39 completed SKIPP. 24 completed one