P-155

## ARE BEREAVED CARERS SATISFIED WITH THE QUALITY OF END OF LIFE CARE? AN INTEGRATED EVALUATION – FINDINGS FROM A 1-YEAR SURVEY (VOICES) IN THE LONDON BOROUGHS OF CITY AND HACKNEY

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10.1136/bmjspcare-2016-001245.178

The VOICES Survey (Views of Informal Carers – Evaluation of Services) is a validated survey among bereaved carers, to develop an understanding about the care dying patients and their carers received in the last three months of a patient's life.

City and Hackney Clinical Commissioning Group funded a one year evaluation of care services. The VOICES survey was administered by St Joseph's Hospice following up expected deaths under the care of Homerton University Hospital and St Joseph's Hospice between April 2015 and March 2016. Quantifiable and qualitative findings offer extensive insight into the care provided out-of-hours, in the community, care homes, GPs, hospitals and hospices.

The majority of bereaved participants were pleased with the provided care they. However, the quality of care differs between care settings and patient location. It shows that females are more likely to respond. Also, respondent-patient ethnicities do not reflect the diversity of the local population. This asks for a targeted approach to overcome ethnic boundaries to understand their experience.

Dignity and respect have the best ratings in hospice care (100%) followed by hospital care (89%), GP care (84%) and community care (75%). Pain relief is considerably more successful in inpatient settings (62%) compared to community care (27%). Excellence of care is rated best in hospice care (81%) and dropping to an average of 38% across other services.

Feedback provided by participants offer insight into participant and patient experiences. The comments were often very positive. Nevertheless they highlighted emotional and logistical challenges patients, respondents and professionals experienced how strongly it affected their lives and the care they received.

The final report will be published in September 2016. By July 2016 we expect to have invited around 450 carers and eventually received 90 completed questionnaires. So far 320 people have been invited of which 55 completed the questionnaire.

P-156

## PATIENTS, FAMILY & FRIENDS – SHAPING OUR HOSPICE TOGETHER

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10.1136/bmjspcare-2016-001245.179

**Introduction** Woodlands' 2013/14 Quality Account identified the development of a Patient, Family and Friends Forum as its patient experience priority. The objectives were to ensure:

- · Current high standards of care were maintained
- Service developments continued to focus on the needs and priorities of patients and families
- People were better informed of services
- There was shared responsibility and partnership.

The first meeting of the Forum was held in March 2014; a core group of attendees has since met regularly with others attending on an ad-hoc basis.

Participation was initially sought from patients already known to the hospice; family members and bereaved carers were also invited. The invitation was extended to members of the local community through local Healthwatch Groups with wider advertising on the hospice website and social media.

Results The Forum has contributed to many initiatives which have benefitted patients and carers including:

- Developing the annual patient and family satisfaction questionnaire
- Reviewing the 'Quiet Room' facility; contributing ideas and suggestions included in the resulting refurbishment
- Producing a 'How to Treat Me with Dignity and Respect' card, issued to all staff, volunteers and students as an aide memoire
- Evaluating food served in the hospice cafe, making recommendations to cater for lighter appetites and children
- Revising the inpatient information pack
- Contributing ideas to the Board of Trustees for an organisational 'strapline' and 'vision'.

Conclusion The group continues to meet quarterly throughout the year and is regularly asked to contribute to initiatives across the organisation. In 2016 the Hospice is taking part in the 'PLACE' assessment for the first time, with group members acting as assessors.

The group provides a sounding board, a place for debate, an ideas generator and a reality check... enabling the hospice to meet the needs of our population.

## Service Models, Care Settings and Partnerships

P-157

'HOSPICE IN YOUR CARE HOME' – A DEDICATED SERVICE AIMING TO PROMOTE HIGH QUALITY PALLIATIVE AND END OF LIFE CARE IN THE NURSING HOME SETTING

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10.1136/bmjspcare-2016-001245.180

In November 2015, Wigan and Leigh Hospice launched their 'Hospice in your care home service' which aims to educate and support nursing home staff to enhance the care of their residents and those important to them. The team of four registered nurses and one health care assistant provide formal education, clinical skills training and facilitate resident coding meetings in a bid to increase confidence and competence in the nursing home workforce, whilst advocating a more proactive approach to planning for the end-of-life.

Adapted from the model utilised at St Christopher's Hospice, the service differs in that, the team will respond to urgent referrals from the home or other healthcare professionals, when it has been agreed that the resident is dying and further support and advice may be required. The team will work alongside the staff in the nursing home to embed the five priorities of care, utilising this as a learning opportunity for the care staff via role modelling of sensitive conversations with residents and families/those important to the resident and skilling up staff to promote a good death for the individuals they care for.

The rationale for the team has been the high numbers of hospital admissions from nursing homes within our locality and a