

P16 **ROLE OF A HOSPICE EDUCATION UNIT IN LEADING THE DEVELOPMENT OF AN END OF LIFE CARE MODEL OF SERVICE**

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Key concepts This innovation has been developed and led by a palliative care education centre supported by two hospices. It illustrates how hospices can lead, innovate and influence the quality and strategic direction of end of life care (eolc) within their community. The key to this is a passion to lead and work collaboratively with multiple care settings and staff groups. The strategic engagement of the eolc commissioner has been instrumental to its success.

Background Achieving quality eolc across a myriad of care settings in which disparate groups of professionals work and where the culture of care is varied and inconsistent, represents an enormous challenge. In response to this challenge a new model of service has been developed to facilitate end of life care in a co-ordinated and unified way across Central and Eastern Cheshire.

Aims and outcomes The structure of this model enables sharing of best practice and innovations across professional and organisational boundaries to promote a whole systems approach. The approaches and ethos of this model are improving the experiences of patients, families and care workers with evidence that care is becoming better co-ordinated. Through this, obstacles and barriers within the patient pathway are being identified and overcome. Care sectors are encouraged to share good ideas and best practice with communication between professional groups and different organisations becoming more streamlined.

The model is led by two Macmillan role post holders and three co-leaders who work across care sectors. The team, within the model, engage directly with champion groups from a variety of care settings who are made up of different professionals caring for patients and families. They are inspired and developed by the model team to change and enhance their practice in ways that enable patients and families to live and die where they prefer with dignity.