play a pivotal aspect of end of life care and that their own knowledge could be better in addressing these factors. An educational initiative called Bridging the Gap was established with two distinct arms (community and medical staff) to improve communication and decision making at end of life care in NMUH and its local area.

Methods and results In the first phase of the community arm, religious, spiritual, cultural and social care leaders from the local community were invited to a pilot session and two workshops. Here, they were introduced the medical, moral and ethical considerations that doctors and other medical staff contend with when providing end of life care. 37 leaders from 13 distinct groups attended these events and there was an improvement in participants’ confidence and familiarity towards DNAR, ACP and end of life care discussions.

In the medical staff arm a workshop was arranged for NMUH staff and community palliative care teams, where the Greek, African & Caribbean and Muslim perspectives towards end of life care were explored and practical steps of how to manage their specific needs were discussed. Confidence rating of participants in managing these perspectives improved from 2.68/5 to 4.47/5.

Conclusions In the community arm, different approaches need to be employed to engage hard to reach leaders whilst simultaneously arranging seminars and forums to disseminate information to the wider public via established contacts from the previous workshops. For the medical staff arm there are more perspectives prevalent (Jewish, Turkish, Eastern European) in the local area that need to be explored via future workshops. A broad overview of the existing literature reveals that nurses often feel inadequately trained or prepared in terms of the communication skills needed to deal with the difficult situations. The purpose of the current study was to explore the experience of communication in the care of children with palliative care needs, from the perspective of physicians, nurses, and mothers in Jordan.

Methods This study employed a collective qualitative case study approach. It was conducted in three paediatric units in a Jordanian hospital. Each case comprised a child aged 1–12 years, their most involved family carer (mothers), physician(s) and nurse(s). Two data collection methods were employed: participant observation and semi-structured interviews with three categories of participants: mothers, physicians, and the nurses who cared for the children that participated in this study.

Results The study was based on 15 cases, with a total of 197 observational hours and 60 interviews (conducted with 15 mothers, 12 physicians and 21 nurses). The findings indicate that the healthcare professionals struggled to communicate with families of children with life-limiting or life-threatening conditions. For instance, many found it difficult to communicate with parents when delivering an initial diagnosis, when the child’s health deteriorated, or if the child’s death was imminent. Doctors also reported feeling blamed for the ineffectiveness of treatment plans and cited this as their primary difficulty. Nurses also revealed that work pressure often limited their ability to provide optimum patient care and to communicate effectively with patients and their families. Other nurses reported difficulty in offering emotional support.

Conclusions The continuous education and specialised training for professionals, which provides staff with specialised communication skills and emotional support for children and parents is imperative in improving the clinical practice in the healthcare settings with limited access to specialist palliative care.

Free papers 7 – 9: qualitative studies

7 WORK STRESSORS FACED BY HEALTH PROFESSIONALS WORKING WITH CHILDREN WITH PALLIATIVE CARE NEEDS: MULTIPLE CASE STUDY APPROACH FROM JORDAN

Maha Atout, Noureen Shivji, Philadelphia University
10.1136/spcare-2020-PCC.7

Background A broad overview of the existing literature reveals that nurses often feel inadequately trained or prepared in terms of the communication skills needed to deal with the difficult situations. The purpose of the current study was to explore the experience of communication in the care of children with palliative care needs, from the perspective of physicians, nurses, and mothers in Jordan.

Methods This study employed a collective qualitative case study approach. It was conducted in three paediatric units in a Jordanian hospital. Each case comprised a child aged 1–12 years, their most involved family carer (mothers), physician(s) and nurse(s). Two data collection methods were employed: participant observation and semi-structured interviews with three categories of participants: mothers, physicians, and the nurses who cared for the children that participated in this study.

Results The study was based on 15 cases, with a total of 197 observational hours and 60 interviews (conducted with 15 mothers, 12 physicians and 21 nurses). The findings indicate that the healthcare professionals struggled to communicate with families of children with life-limiting or life-threatening conditions. For instance, many found it difficult to