Wheatfields hospice. We conducted 4 focus groups with six service users and 17 professionals involved in palliative care. We analysed these using thematic analysis with two independent coders.

Findings We found several major themes. Service users identified access to their GP as a major barrier. Service users and healthcare professionals also identified discrimination and lack of trust in professionals. Healthcare professionals identified a lack of experience and education in caring for this group, but stated they were keen to develop this. Service users also identified education around what palliative care is as a major barrier to accessing services. Despite these themes both professionals and service users described their real life experience as positive.

Conclusion Although the experience of both service users and professionals in the context of palliative care in this community has been positive we have identified barriers to developing these services further. Flexible services are required to ensure holistic, and culturally sensitive care. This requires collaboration between services, with access to GPs being identified as a crucial area to start.

163 RESPECT, FIND OUT WHAT IT MEANS TO ME?
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Introduction ReSPECT is a national initiative to encourage shared decision making around treatment decision and advance care planning. We undertook a trust wide launch to replace all DNAR forms in November 2018. The aim of this project was to evaluate staff understanding of the respect process and confidence in having significant conversations, as part of a wider trust evaluation.

Methods In dying matters week the Specialist Palliative care team (SPCT) designed a staff survey to rate confidence and understanding of the Respect process, staff were asked a number of questions including; completion of online ReSPECT training app, understanding of the respect process and their role and confidence in participating in conversations with patients about their wishes around future treatment and care. SPCT visited all areas of the hospital and asked staff to complete the questionnaire.

Results 132 health care professionals replied. 44% doctors, 37% Nurses, 19% Allied health professionals. 93% were aware that ReSPECT has been introduced to the trust, only 17% had completed the online training. 83% of respondents felt strongly confident or confident to discuss with patients their wishes about their care. Only 59% felt strongly confident or confident to discuss resuscitation status and end of life care. However, 100% senior nurses and doctors felt confident or strongly confident in discussing resuscitation status and end of life care.

Conclusions It is reassuring that our senior staff feel confident in engaging patients in such significant conversations. We are exploring making the ReSPECT learning app completion mandatory to further support all staff and recognise the need to empower senior nursing staff to participate further in the ReSPECT process in our trust. We will use this information to promote significant conversations as a process rather than a one off and improve form completion.