

Methods The project steering group developed four workshops: (1) All about me. (2) Who and what matters. (3) Choices and wishes. (4) Legacies.

Results

- Online art ACP workshops with reasonable adjustments
- Co-delivered online education
- Film
- Community artwork
- Twitter handle
- Pilot led to NHS Charities Together funding for qualitative research, education and art workshops for people excluded by identity, culture, ethnicity or race.

'It's great how the group shared things. I felt safe to do that.'

'If you're cynical about what art-making adds to health-based discussion, this project will challenge that cynicism.'

Conclusion It is important that people are supported to identify end of life wishes (PCPLD Network & NHS England, 2017). 'No Barriers Here' increased awareness of the challenges people with intellectual disabilities experience and how using a creative approach can improve conversations.

Please note an easy read version of this abstract is available from the first named author.

Parallel Session 3.1 – Thinking differently through networks, knowledge and narratives (Thursday 4 November, 10:45 – 12:00)

0-9 ABSTRACT WITHDRAWN

0-10 SUSSEX HOSPICES COLLABORATION

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10.1136/spcare-2021-Hospice.9

Background Since 2018 the seven Sussex adult hospices have been actively pursuing opportunities to collaborate. This gives opportunities to combine resources, share knowledge and speak effectively with one voice, raising the quality and profile of hospice care in Sussex. This chimes with key themes from the Hospice UK Future Vision Programme (2020), the NHS 'Next Steps' document (NHS England and NHS Improvement, 2020) and the Ambitions Framework (National Palliative and End of Life Care Partnership, 2021).

Aims

- To increase collective reach.
- Create sustainable hospices capable of influencing and leading the wider health and social care system and responding coherently to threats and opportunities.
- Share learning and resources to improve existing variation and inefficiency.
- Create flexibility allowing hospice sub-sets to work at place level.
- Seek to standardise and improve statutory funding.

Methods

- Autumn 2018 – scoping work done.
- March 2019 – joint meeting of Trustees/Chief Executive Officers to agree initial work programme.
- May 2019 – combined launch event with staff.
- June-October 2019 – five workstreams developing proposals.
- November/December 2019 – proposals brought to hospice Boards. Financial commitment for 18-month programme and memorandum of understanding signed. Collaboration Steering Group established.
- March 2020 – pause due to pandemic, joint work to establish basis for additional beds funding.
- September 2020 – programme recommenced.

Results

- Set up Project ECHO superhub for care home education.
- Agreed joint mandatory and management learning programmes.
- Creating Sussex Education Hub to combine resources in one jointly-owned entity.
- Benchmarking core activity.
- Working on common data set.
- Created Sussex Hospices brand.
- Appointed Programme Manager.
- Shared posts.
- Place-based collaboration.
- Growing influence and representation with commissioners and in ICS planning forums.
- Selected as a pilot area for NHSE sustainability work.

Conclusions We are now seeing growing momentum and, from the evidence so far of our ability to cost share, exchange knowledge and influence thinking in key forums, we are convinced of the imperative for this work if we are to make the best use of our knowledge and resources for the benefit of the people of Sussex.

0-11 DEVELOPMENT OF A JOURNAL CLUB TO IMPROVE CARE IN A HOSPICE THROUGH EVIDENCE BASED PRACTICE

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Background Many palliative care organisations use journal clubs to support educational development for staff. However, to date, the potential to use journal clubs to directly improve clinical care in hospices (through quality improvement activity) has not been described in the literature.

Aims We describe the development of a multidisciplinary hospice journal club, through which aimed to (1) develop research questions to clinical care problems in the hospice and (2) identify solutions to these problems to improve care delivery.

Methods In January 2019, we established fortnightly journal club meetings, which provided staff with the opportunity to present hospice-relevant palliative care research. In these meetings, we discussed the main findings, clinical practice implications and future research questions. Initially, the meetings were in-person, but we later hosted these online (via