

P-80 **EXTENDING A COLLABORATIVE PROJECT TO IMPROVE END-OF-LIFE CARE FOR ADULTS WITH LEARNING DISABILITIES**

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Background Reports from the Learning Disability Mortality Register (2020) demonstrate that people with learning disabilities die younger than other adults. Many deaths are not in the place of choice, and people experience barriers to being involved in, and receiving, end-of-life care (Tuffrey-Wijne & Davidson, 2018. *Int J Palliat Nurs.* 24: 598). National documents, (Hospice UK, 2021; PCPLD Network and NHS England, 2017) and local council audits, also identify that domiciliary staff, caring for adults with learning disabilities, receive little education and support to care for the dying.

Aim To improve the end-of-life care for adults with learning disabilities in Essex, by increasing confidence and knowledge of care agency staff in the essentials of end-of-life care, and creating support networks to reduce barriers to care.

Method A local council, and three local hospices, have worked together since 2018, to create and deliver a three-day course to upskill domiciliary care agency staff giving end-of-life care (Griffith, Richmond, Harwood et al., 2021. *BMJ Support Palliat Care.* 11). This award-winning course was adapted to help address the inequality in care that adults with learning disabilities currently receive. Using an already well-evaluated course structure, with funding streams sourced by the council, allowed the adapted course to be delivered free-of-charge to agency staff.

Results So far, forty-four carers have attended the adapted face-to-face cascade training. 100% of the attendees felt that this course increased their confidence and ability to give end-of-life care. Areas of greatest improvement were advance care planning and communicating about dying. All attendees also felt confident to cascade the teaching to their colleagues, meaning that even more carers will benefit. Staff who attended can now join the collaboration's Champions' Days, held annually, to continue their learning in care of the dying, developing even stronger links with the council, their local hospice teams and other agencies, and address key areas highlighted in reports (Tuffrey-Wijne & Davidson, 2018).

Conclusion This project demonstrates the power of collaborative working to improve end-of-life care, and offers a model for other counties to replicate.

P-81 **ABSTRACT WITHDRAWN**

P-82 **CO-DESIGNING APPROACHES TO ADVANCE CARE PLANNING FOR PEOPLE WITH LEARNING DISABILITIES: BUILDING AND SUPPORTING A TEAM OF CO-RESEARCHERS**

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People with learning disabilities should be at the centre of designing and testing ways to make planning for the end of their lives better. This paper describes how involving, training and employing colleagues with and without learning disabilities works in the Victoria and Stuart Project team. The Victoria and Stuart project aims to co-design a toolkit of approaches for end-of-life care planning with people with learning disabilities within social care settings.

People with learning disabilities were highly involved in designing the project. Richard Keagan-Bull and Amanda Cresswell (both researchers with learning disabilities) are co-applicants, and the views of the GRASSroots group helped to shape the application. The GRASSroots group of people with learning disabilities have been working together for over a decade. They have found out a lot about good ways of talking with people with learning disabilities about death and dying.

Richard, Amanda and Leon are Research Assistants with learning disabilities who are employed on the Victoria and Stuart project. Richard and Leon completed an 8-week Kingston University research training course for people with learning disabilities in 2019 and were authors on a paper about their experiences. This course helped to prepare them for their current Research Assistant roles.

The first part of our work together is to find out about what people with learning disabilities, their families, and health and social care staff, managers and policy makers think about planning for the end-of-life. Focus groups with people with learning disabilities were planned by Richard, Amanda and Leon alongside their colleagues. They use approaches such as games, picture stories, and signs to express feelings about different parts of end-of-life care planning.

This paper presents the focus group findings and the beginnings of our experience led co-design process. We are starting to design approaches and resources to support people with learning disabilities in planning the end of their lives.

P-83 **THE LIVED EXPERIENCE OF CARERS OF A PERSON WITH A LEARNING DISABILITY, AT THE END OF LIFE. CAN A HOSPICE SUPPORT GROUP STRENGTHEN RESILIENCE AND INFORM STRATEGY BUILDING?**

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Background It has long been acknowledged that people with a learning disability have a poor life expectancy, sometimes experience suboptimal care at the end of life, and their loved ones can feel isolated and uncertain about where to seek support (NHS England and PCPLD Network, 2017; Heslop et al., 2014. *The Lancet*:383: 889). Local LeDeR reviews and national guidance indicate that families and paid carers require training and support in end-of-life care to avoid unnecessary hospital admissions and to promote their own wellbeing (NHS Wigan Borough Clinical Commissioning Group, 2020; Care Quality Commission, 2016). This data provided the rationale for the development of an end of life care support group for those important to the person with a learning disability.

Aims To bring service users together with health and social care professionals to: