

P-203 WELLBEING AND BEREAVEMENT SUPPORT FOR CARE HOME STAFF

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Background The challenges faced during the pandemic have resulted in care home staff putting their own mental health needs to one side. Many find it difficult to ask for help yet we know people benefit from support in different ways and that enhancing our wellbeing can make a huge difference.

Aim(s) The aim of the project is to establish the wellbeing and bereavement support needs of care home staff, and devise a support programme, alongside identifying potential barriers to providing or accessing this support.

Method Support needs were established through conversations with managers and by surveying care staff to learn about experiences of working through the pandemic. Based on these findings, a support programme was devised and offered flexibly to meet individual preferences. Support included individual or group counselling, in person, via video call, email, or telephone, at either the care organisation or hospice.

Additionally, workshops were developed that focused on enhancing positive, effective communication, managing stress, bereavement, and building resilience.

Results Successful funding was obtained from the local Clinical Commissioning Group and Care Association.

Of the 56 care homes contacted, 8 so far, have requested support. Support provided has included individual counselling for 5 care staff and for 2 managers, 6 workshops have been delivered and a further 6 booked. Another workshop has been developed for managers, at their request, focusing on developing wellbeing tools for themselves and their staff. Feedback collated indicates positive experiences of the support provided particularly in relation to learning skills to manage stress and build resilience, and having an opportunity to talk about dying, death, bereavement, and grief.

Conclusion Our hospice is committed to supporting our local care homes and work continues with care organisation managers to address barriers to accessing support ensuring care home staff wellbeing is prioritised and support available.

P-204 BATTLING BURNOUT: UTILISING OUR HOSPICE COMPLEMENTARY THERAPY TEAM TO SUPPORT POST-PANDEMIC COLLEAGUE WELLBEING

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Motivation Healthcare workers were under extreme pressure during the COVID-19 pandemic, which proved detrimental to staff wellbeing. In their research paper, Petrella et al. (2021. *Gen Psychiatr.* 34: e100458) concluded that 'In order to mitigate the risk of burnout and post-traumatic stress, long-term, effective strategies that facilitate staff accessing support are urgently required.'

Purpose Kilbryde Hospice's Complementary Therapists recognised the importance of utilising their skills to address the physical and emotional wellbeing of colleagues. The Complementary Therapy (CT) Team therefore established formal methods of support, available to all colleagues regardless of role. Given the considerable costs associated with staff

absence, the CT Team sought to demonstrate how an existing service can be extended to provide effectual and cost-effective in-house support.

Methods The hospice CT Team (comprising 2.5 WTE and 1 volunteer therapist) provided support to colleagues over the period 01/04/21 to 31/03/22, in addition to all existing patient/carer services.

Staff received CT input dependant on individual needs, identified following a holistic assessment. Range of CT interventions included:

- Provision of hands-on therapy.
- Preparation of bespoke aromatherapy products.
- Demonstration of self-management techniques.
- Provision of relaxation music and guided meditation CDs.

Written instructions accompanied all items provided.

Results CT support was available to 88 contracted and 21 flexi-bank staff. A total of 108 aromatherapy products were issued to staff over the period. Results show the top reasons for receipt of a product were: stress/anxiety; pain; skin problems. The CT Team also delivered 45 hands-on therapies, predominantly to address stress/anxiety, and pain. These results show a high level of need and demand for CT support.

Conclusions This poster outlines a cost-effective solution to maintaining the health/wellbeing of the staff body by utilising an existing resource (requiring investment of staff time but no additional budget). Direct staff feedback would have provided an interesting adjunct to these results. Staff evaluations will therefore be collected going forward.

P-205 STRUGGLING FOR AGENCY AND MORALITY IN THE FACE OF REPEATED MORAL INJURY AMONGST PALLIATIVE CARE NURSES WORKING DURING THE COVID-19 PANDEMIC: A NARRATIVE STUDY

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Background Palliative care nurses have been required to adopt physical distancing measures and the increased use of personal protective equipment impacting face-to-face communication with patients and relatives and to severely restrict visiting during the COVID-19 pandemic. What is unclear is how nurses managed and coped, over the time frame, with the resulting moral distress and moral injury.

Methods This study explored the changing personal and professional experiences of, and responses to delivering nursing care in a palliative care unit, under the imposed pandemic restrictions, through narratives. In-depth narrative focused interviews were undertaken. Interviews were transcribed verbatim and analysed using a narrative approach to consider the shape as well as content of the individual accounts given and to elucidate common themes.

Results Thirteen palliative care nurses who were working in a hospice in-patient unit in the UK before and during the pandemic were recruited. Moral distress and injury was evident in all the accounts with narratives suggesting three different responses occurred. These were acceptance, resistance and defiance and defeat. How nurses were able to reconcile themselves and their sense of morality to the experiences

underpinned the narratives. Nurses struggled with not being able to care for patients and their families in a way that they were used to and that felt intuitive and many described personal as well as professional affront.

Conclusions Restrictions had a considerable impact on palliative care nurses at a professional and personal level in their ability to communicate with and provide care for patients and their families which led to moral distress and injury. How they managed this and made sense of what happened affected their capacity to cope, with those unable to reconcile their experiences being profoundly impacted and losing hope for the future.

P-206 LONG TERM IMPACT OF A SHORT COURSE IN ESSENTIALS OF PALLIATIVE CARE

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Background The importance for healthcare professionals (HCPs) to be trained in palliative and end-of-life care (PEoLC) was highlighted during the COVID-19 pandemic (Porter, Zile, Peryer, et al., 2021. *Soc Sci Med.* 287:114397). With the Health and Care Bill (UK Parliament, 2022) making PEoLC a core specialty, there will be an emphasis on training HCPs to deliver generalist palliative care. The European Certificate of Essential Palliative Care (ECEPC) (Sadler, Watson & Gannon, 2021; Reed, Todd, Lawton, et al., 2018. *Palliat Med.* 32: 571) is a widely recognised certificate programme which has trained over 8000 HCPs since 2001.

Aim To understand candidates' motivation for undertaking the ECEPC and if the course, despite its short duration, has changed candidates' clinical practice.

Methods Candidates are invited to participate in an online survey six months after starting the course. An initial thematic analysis of responses from the summer 2021 cohort was performed.

Results 17 responses were received from HCPs working in acute trusts, community settings and hospices. Candidates were unanimous in undertaking the course to improve clinical practice and build skills, knowledge and confidence in PEoLC. Nine (53%) respondents undertook the course to aid career progression. Course topics identified as most beneficial were symptom recognition and management, holistic care and disease-specific information. The true-to-life clinical scenarios in written resources and the course handbook for ongoing reference were stated as useful. Application of new knowledge in communication skills, recognition of spinal cord compression and other medical emergencies and ongoing confidence in performing holistic assessments was evident. Candidates reported supporting colleagues and sharing knowledge.

Discussion An initial survey of ECEPC candidates demonstrates that their PEoLC knowledge and skills improved and they felt confident to share new knowledge with colleagues. Since PEoLC knowledge has been identified as a priority for HCPs (National Palliative and End of Life Care Partnership, 2021), demonstration of the benefits of this established 8-week home-study programme and its value as a stepping stone to career progression is encouraging. Results from the following cohort will be included in the upcoming complete analysis.

P-207 SCHOOL'S OUT FOR SUMMER, SO COME AND JOIN MOUNTBATTEN'S SUMMER SCHOOL

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Background Mountbatten strategy provides an opportunity to challenge perceptions about death, dying and hospice care and has been used to form a summer school training programme. Additionally, this programme enables young people to learn about and experience a wide range of careers available at our hospice, thus building our workforce of the future.

Aim To engage young people in a summer school programme, providing an opportunity to meet various Mountbatten professionals and receive information on many of the 250 career opportunities available across the NHS and Social Care sector and to demystify and engage young people in conversations about hospice care.

Method

- Engagement with all local six form schools, training enterprises and colleges for those aged 16 years and above.
- Participation in a 3-day interactive programme including a mix of practical workshops and information sessions that was rewarded with a detailed certificate of attendance.
- Further opportunities presented for volunteering or work experience.
- Provided an insight to both clinical services and supportive services, for example, Human Resources, communication, and fundraising.

Results Students noted how their perceptions of hospice care and the hospice building were positively challenged during their summer school experience. Furthermore, students reported increased knowledge of a range of career opportunities and confidence in embracing work opportunities and pursuing career choices. Students also valued the opportunity to submit a formal application and develop a CV for future use. Qualitative and quantitative data from the two programmes run in summer 2021 and from a further programme in 2022 will be presented.

Conclusion Students took away valuable information to guide and support them with future career choices. Many expressed an interest to volunteer as they gained an insight into hospice care, providing the opportunity to challenge pre-existing preconceptions about the hospice building and hospice care. The programme ended with a more engaged and confident group of students who took away a unique experience.

P-208 DEVELOPMENT OF A COMPREHENSIVE EDUCATION PROGRAMME 'THE TULIP STANDARD ESSENTIALS OF CARE', SECURING THE FUTURE OF OUR WORKFORCE

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Background Our hospice vision is to meet the needs of more people. Our unregistered staff are key in helping us to provide more care and we are expanding this workforce. It is essential that these staff are equipped to meet the changing demands of their roles and especially for those new to a caring role, in order to promote job satisfaction, improved staff retention and create career progression opportunities.