

**P-211** END OF LIFE CARE EDUCATION PASSPORT FOR HEALTHCARE AND WELLBEING ASSISTANTS

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**Background** Healthcare and Wellbeing Assistants (HCAs/WBAs) provide a significant amount of care at the bedside for patients within the hospice. However, there is little end of life care education available to support this specific group of staff. The need for highly skilled, enabled workforce across all components of the hospice is key. Therefore, the piloting of this educational intervention was undertaken.

**Aims** To pilot an end-of-life care educational intervention to enable HCAs/WBAs, build confidence and skills when caring for individuals with life-limiting illness whilst providing opportunities to influence, change and improve overall patient care.

**Method** The educational intervention consisted of several components: 1) five theory-based modules demonstrating learning through observation in practice; 2) a project where there was the potential to influence improvements in patient care/experience and demonstrate a clear rationale on how this was to be achieved; 3) projects were then presented by the individuals who had undertaken them, to senior management, line managers and work colleagues on the final day of the course.

**Results** 41% (13) HCAs/WBAs had completed the end of life care educational intervention. HCAs and WBAs completed projects that have influenced practice including the introduction of smoothies for patients, changes to patient bathroom environments, introduction of white boards to support patient choice and a unique 'Bring a Smile' initiative in support of patient wishes. The project's breadth of topics, demonstrates that learning takes place both in the classroom and in the participants' clinical environment when education, wider team support and coaching are employed.

**Conclusion** The end of life care educational intervention was branded as the 'Passport Programme' as it comprised multiple components demonstrating a variety of skills that have capitalised on this group of staff who are not usually at the forefront of innovating and enhancing the patients' and family experience of hospice care.

**P-212** THE AIMS AND PROCESSES OF A GENERAL PRACTITIONER (GP) FELLOW IN PALLIATIVE CARE

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**Background** The General Practitioner (GP) curriculum does not require specific training/exposure in palliative care in a hospice setting to allow completion of training (Royal College of General Practitioners, 2019). Primary care is at times the frontline for patients and relatives during times of critical illness and end of life care, thus it is imperative that General Practitioners possess basic skills in palliative care, as well as knowledge of local community palliative services available to enhance patient care. We present the aims and process of a GP fellow in Palliative Care.

**Methods** We outline the application process, typical work schedule and aims of the fellowship at St Clare Hospice.

**Results** Application process: advertisement of placement via the West Essex CCG Workforce and Training Hub. Application via paper form with CV, and then short-listing for interview. Typical work schedule: one day per week (08:30am-5pm) for 12 months attending ward rounds, meetings and carrying out the roles of an SHO. Aims: learning about the MDT process, systems of referral, earlier identification of dying patients, anticipating/managing their needs and understanding the numerous holistic services available. Development: the GP Fellow will be expected to complete a clinical audit and successfully complete the European Certificate in Essential Palliative Care as part of this placement.

**Conclusions** Fellowships are a great way to increase exposure to a sub-specialty and are adopted in many areas of medicine and surgery (Fleming, Pucher, Elsey et al. 2019. *Int J Surg*. 67:101). The hospice Palliative Care Fellowship placement allows GPs to acquire skills and knowledge which supplement the GP curriculum and can be utilised in primary care to enhance care given to patients and their relatives at the end of life.

**P-213** THE SUCCESSES, STRUGGLES AND LEARNING FROM A HOSPICE COHORT OF TRAINEE NURSING ASSOCIATES

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**Background** Regulating bodies have recognised that there is a serious shortage of healthcare professionals (Nursing & Midwifery Council, 2021; British Medical Association, 2020), resulting in a workforce crisis (King's Fund, 2022). The hospice had struggled to recruit nurses and had continuous vacancies.

**Aim** To offer health care assistants (HCAs) currently employed by the hospice the opportunity to train as nursing associates (NAs) through an apprenticeship. To help build the capacity of the nursing workforce and deliver high-quality care (Health Education England. Nursing associates. [Internet] [Cited 11 May 2022]). To utilise the apprenticeship levy and introduce a recognised career pathway.

**Method** Six hospice HCAs applied and commenced their training with a local university, funded by the hospice and a supporting grant. Information campaign as a new role. Support structure identified.

**Results** Four of the trainee nursing associates successfully completed their course in March 2022. The remaining two await results.

**Struggles:** The course coincided with a global pandemic. The trainee nursing associates had to adapt to on-line learning and changing clinical environments. The cohort of six was large. On-going support increased the workload of colleagues, shifts were difficult to fill especially with changing COVID demands and the reciprocal agreement for learners placed additional pressure (Robertson, King, Taylor et al., 2022. *Br J Healthcare Assistants*. 16:126).

**Successes:** Four of the learners have been successfully recruited to nursing vacancies within the hospice.

The reciprocal agreement allowed an exchange of good practice and spread understanding of the hospice.

The hospice community worked together to support the learners; 'I could feel the support and that they wanted me to do well'. The opportunity provided a positive example of learning and development in the organisation; 'having the