safety), accessible both locally for palliative care teams to support service planning and bench-marking, and nationally for policy and strategy judgements.

Introduction Access to end-of-life care is particularly challenging in resource-poor countries where palliative care is at an embryonic state. Lack of access to affordable palliative care leads to inequity at end of life with consequential financial hardship for families and communities. There are access barriers, which have direct implications on how a society views life and death and how it prioritises health and community care.

Aims To develop a sustainable model of end-of-life care that empowers communities, in a manner that is embedded within mainstream provision.

Methods A series of stakeholder consultations, supported by in-country visits resulted in the development of a culturally appropriate model called ‘Compassionate Palliative Services’. The consultation included private and public health care professionals, regulatory agencies, patients and family caregivers’ groups, faith-based organisations and community influencers.

Results A two-arm charity has been established. One, registered in the UK (Charity Reg No: 1199633) is focused on fund raising, strategy and governance; the other registered in Ghana to support the delivery. This non-westernised palliative care model has been embraced with the consent and buy in of key providers, the patients, caregivers, families, and communities.

Conclusions The creation of ‘COMPASS Ghana’, is a critical step in enabling the delivery of palliative care in a non-westernised context. It directly involves all in developing the future construct of care, in a manner that reflects government and regional health priorities, current infrastructure and community behaviours. Sustainable, reducing the financial impact (direct and indirect) to which resource-poor communities are exposed to.

Impact COMPASS Ghana combines innovation and best practice to improve palliative care in Ghana and the wider region. It pioneered gathering and analysing public health data to inform palliative care decision-making. Impact is delivered through advocacy around death and end-of-life care and a solution through the establishment of Mobile Multidisciplinary Palliative Care Teams (MMPCTs).

REFERENCES