Results Over a seven day period 70% of the working clinical team participated in the study, documenting in total a period of 3,133 hours of activity. Activities were categorised into ten distinct areas with subsections to identify the elements of our specialist roles. On average Clinical Teams spent 25% of time on administration (this includes answering work related emails and entering data onto the electronic patient system (EPS)), 20% communicating (both internally and externally) and 17% on management duties including 1:1 sessions/staff support.

Conclusions A large amount of working time is spent on administration, communication and management duties, which may be improved by analysing systems within the service to reduce duplication of work and inefficient processes. A digitalisation strategy is being introduced to consider the use of virtual and AI approaches to care, alongside a LEAN group to focus on email management This work is ongoing but provides valuable information to allow us to further explore and re-evaluate current roles, releasing time to care including utilising volunteers and considering more non-traditional roles within our MDT.

P-147 ADVANCED ASSISTANCE IMPROVING THE QUALITY OF CARE

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Patient feedback in 2018 highlighted the value of therapeutic intervention for patients accessing inpatient services in supporting timelier, more innovative symptom management and safer discharges home and a requirement for equitable access to therapy provision across the hospice, seven-days a week. A bespoke 18-month intensive competency based learning and training programme was created to develop healthcare assistants to deliver therapeutic interventions inclusive of non-complex physiotherapy, occupational therapy, complementary therapy and lymphoedema care. A blend of practical and theory based learning to evidence practice of extended knowledge, skills and expertise.

This interdisciplinary approach has strengthened collaborative working with patients, their relatives/carers to support them to achieve their personal goals and priorities. The responsiveness to patients resulted in a reduction of waiting times and a flexible person-centred treatment plan enables confidence building in performing daily living. A patient described how adopting a pacing approach taught by an Advanced Assistant has influenced significantly on her fatigue levels and on her mood as she feels less guilty and is able to enjoy more activities with her family. The significant impact of the roles have been captured through quantitative and qualitative data. Activity data supports that they are now already able to offer Reiki and Slow Stroke Massage across seven days, which in some cases, has resulted in patients not requiring pain medication due to non-pharmacological symptom relief.

A year into the training programme, the Advanced Assistants are ahead of the envisioned timescale of learning and development. They are able to optimise people’s function and wellbeing to enable them to live as independently and fully as possible, with choice and autonomy, within the limitations of advancing disease.

P-148 JOYFUL, SWEET TIME TOGETHER: HOSPICE’s CATERING TEAM ROLE IN CREATING LASTING MEMORIES FOR PATIENTS AND FAMILIES

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Aim(s) To support people living with terminal illness to celebrate special occasions in their lives by organising individually designed person-centred events to meet the needs and preferences of the people they support and creating memories into bereavement.

Methods The catering team build close relationships with hospice inpatients as a key part of their holistic care (e.g., getting to know their favourite foods/special dietary requirements etc.). They are supported by the hospice multidisciplinary team to organise celebratory events and create lasting memories of special occasions for both patients and families. An example of such special events is a surprise date night for a patient staying in the hospice, who was missing spending quality time with his wife. Working together with the patient, the team came up with a 3-course meal of their favourite dishes prepared by the head chef, flowers from the hospice garden and all the romance they could ask for.

Results Feedback from special events frequently organised within the hospice, has repeatedly shown the importance of celebrating big life events involving delicious, good quality food. These events create an opportunity for patients and those important to them to come together and regain some sense of normality, while leaving family members with special memories to cherish after their loved one’s death.

Conclusions The role of the catering team is invaluable in providing holistic care and improving quality of life of patients and their families.

P-149 ASSESSMENT AND DOCUMENTATION OF SPIRITUAL NEEDS OF HOSPICE INPATIENTS

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Background Spiritual care is a fundamental domain of palliative and end-of-life care. Addressing spiritual care empowers patients to take ownership of what is important to them. All healthcare professionals should feel confident to address patients’ spiritual needs and provide tailored individual care and support.

Aims To demonstrate that a concise educational intervention improves healthcare professionals’ confidence for undertaking