Conclusions The levels of attendance at and participation within the ECHO sessions highlights the growing recognition of the need for multi-professional responses to the challenges of supporting people experiencing homelessness towards the end of life. There is an appetite to continue this network to maintain the momentum generated and to facilitate the creation of inter-professional relationships and connections to understand and improve palliative care for people experiencing homelessness.

Background There are many recognised challenges for people experiencing homelessness in accessing palliative and end of life care services, despite a high burden of complex needs among this population. These challenges include navigating complex healthcare systems, managing unstable housing situations, and previous negative experiences with healthcare services (Schulman, Hudson, Low, et al. Palliat Med. 2018; 32 (1): 36–45). Health needs among this patient group often include drug and/or alcohol dependence and mental health problems in association with physical health issues (known as ‘tri-morbidity’) (Himsworth, Paudyal, Sargeant. Br J Gen Pract. 2020; 70(695): e406–e411). Prognosis may be uncertain and professionals working with those experiencing homelessness may not have the appropriate training to identify those who are approaching the end of life (Marie Curie. Care for people experiencing homelessness in palliative care. [Internet]).

Aims The aim of this service evaluation is to describe and evaluate an outreach service established at a hospice in London to support residents and members of staff at two local homeless hostels.

Methods The hospice homelessness group is a team of cross-department staff members who collaboratively developed an outreach programme with the aim to improve the quality of palliative and end of life care provided to patients experiencing homelessness in our local community. The work primarily focused on two homeless hostels, and included direct clinical care, informal ‘pre-referral’ support regarding patients hesitant to be formally referred, regular MDT attendance, community outreach work with hostel staff and residents and an education programme for hostel staff. This service evaluation will outline the results of qualitative and quantitative feedback from hostel residents and staff members.

Results The results of this project will be presented as an evaluation of our service on behalf of patients and members of staff.

Conclusions The hospice outreach programme will continue to be developed in light of feedback obtained. Further conclusions will follow depending on the results of the service evaluation.

Developing a Palliative Care Outreach Service to Support Homeless Hostel Residents and Staff

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Background Exeter has a larger homelessness problem proportionally than Birmingham or Manchester with a ratio of 0.65 per 1000 households (Office for National Statistics, 2017), with the amount of rough sleepers being 25th city in the country (Ministry of Housing, Communities and Local Government, 2019). 75% of the homeless community have a physical health problem, alongside a reduced mortality age in comparison to the national average. Hospiscare, with grant funding, focused resource on building relationships with St Petrocks, our local homelessness charity, and together developed a pathway of care for this population.

Aims To ensure the local population living within the homeless community were aware of the accessibility of support

END OF LIFE CARE EDUCATION FOR ORGANISATIONS SUPPORTING HOMELESSNESS

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Abstracts