

**Methods** Evaluation findings following GSF training in End of life care and Accreditation in five settings are described, with illustrations and quantitative and qualitative examples.

**Results** Increased uptake of ACP discussions was enabled in all settings, with comparative results described. Particularly high results (over 95%) were from care homes, where the GSF Accreditation standard is that “every resident is offered an ACP discussion.”

**Discussion** Use of training to increase staff confidence, competence and organisation of care can be used extensively across many settings to support better relationships with patients near the end of life, enabling more ACP discussions, leading to better quality end of life care

**Conclusion** Routine staff training in EOLC and assessment/accreditation of organisations leads to widespread improvements in care.

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#### IMPROVING THE ROUTINE UPTAKE OF ADVANCE CARE PLANNING (ACP) DISCUSSIONS IN MANY SETTINGS AS PART OF GSF TRAINING PROGRAMMES IN END OF LIFE CARE

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**Background** Advance Care Planning is introduced as an integral part of The Gold Standards Framework (GSF) Training Programme in end-of-life care in the UK, in a variety of settings. GSF enables a systematic way to deliver the ‘right care, for the right person, in the right place at the right time’ and is extensively used across the UK (eg, over 2000 GSF-trained care homes).

There is increased uptake of ACP, but is this the case in different settings?

**Aim** To demonstrate change in end-of-life care in several settings including routine use of ACP discussions, as part of the GSF Training and Accreditation programmes, These include:-

- ▶ Care homes (ACF)
- ▶ Primary care
- ▶ Acute hospitals
- ▶ Domiciliary care
- ▶ Community hospitals

To describe increase ACP in GSF care homes.