their families and carers. We are keen to share our results and experience with others and to improve further our service.

P155  MAKING SENSE OF SHADES OF GREY!: IMPACT OF LUNG CLINIC TO MEET THE NEEDS OF PATIENTS WITH NON MALIGNANT LUNG DISEASE AT GARDEN HOUSE HOSPICE

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Introduction In 2011 the Department of Health Outcomes strategy for COPD suggested that the needs and preferences of patients for care at the end of life were not being met.

The model of Day Hospice did not meet the needs of this group of patients; therefore a proposal was put forward with the support of the local chest physicians to provide a service accessible to COPD patients and their carers.

A pilot clinic was set up for twelve months. Staffed by a nursing Sister, a physiotherapist and trained volunteers.

Aims The aim was to develop an accessible multidisciplinary service that met the individual needs of the patients, family and carers. This included transition to palliative care services, psychosocial support, symptom management and advanced care planning.

Method During the pilot and the following year the numbers of patients attending was monitored. Also the source of referrals was examined. Some anecdotal feedback was gained from the referrers. The service was adjusted overtime to maximise accessibility for the patients.

A qualitative questionnaire was produced in December 2012 to find out the perceived benefits for patients attending the clinic and if there was anything else that could be provided. Nine questionnaires were completed.

Results The results of the questionnaire suggested that the patients were fearful of attending the hospice beforehand, however, once attendance had commenced their psychosocial and symptom control needs were being met. The results of the questionnaire will be made available.

Conclusion The clinic is meeting the patients’ needs, therefore it will continue in its current format. There is a need to discuss and consider strategies to educate the referrers on Hospice philosophy and the aims of the clinic so they can help change the fearful expectations of the patients on referral.