terminal cancer diagnosis. Referral protocols and service pathways are lacking. Physiotherapists require support and education to enhance particular skills and confidence.

**Application to hospice practice** Hospices have the opportunity to establish rehabilitation teams and pathways with acute hospitals to improve access to rehabilitation for all palliative cancer patients and to deliver services in line with government policy.

**Evaluation of advocacy service at St Joseph’s Hospice, Hackney.**

**Background** It is estimated that 1.7 million (22%) of London residents do not speak English as their main language. In boroughs such as Newham this figure rises up to 41% of residents. (2011 Census). Newham University hospital has an extensive healthcare advocacy service to meet local need and it also provides advocates to interpret consultations at St Joseph’s Hospice.

**Aim** This project aimed to assess the impact of working at St Joseph’s Hospice upon healthcare advocates.

**Method** 12 healthcare advocates were interviewed individually at St Joseph’s hospice using a questionnaire. Their experience of hospice work was assessed. Their opinion was sought on whether they found working in a hospice different to the hospital setting, the emotional burden, the structure of the consultations, and episodes of culturally insensitivity. They were also asked if they would like additional training or support to undertake hospice work.

**Results** The advocates enjoyed hospice work but most (11/12) found it emotionally challenging. They felt unclear about how to balance professionalism and emotion whilst breaking bad news and often worried about the patient and their family later in the day. They were keen to promote continuity with the same advocate interpreting for a patient or family and to be considered part of the healthcare team. They had no formal system for emotional support and a majority requested this (11/12) plus additional training (9/12).

The advocates also reported that greater structure to the consultation process would be helpful. 7/12 felt they had observed inadvertent cultural insensitivity.

**Outcomes** We are liaising with the advocacy team about communication skills & emotional resilience training. Guidelines for undertaking consultations with advocates have been written. The impact of these upon advocate consultations and patient care will need to be evaluated in due course.