END OF LIFE CARE CHAMPIONS—A PARTNERSHIP APPROACH TO DEVELOPING TRANSFORMATIONAL LEADERS IN THE ACUTE SECTOR

Caroline Sweetland,1,2 Tess Drabble,3 Carole Walford1,2. 1Weldmar Hospicecare Trust; 2Hospice Education Alliance; 3Dorset County Hospital Foundation Trust

Aims Ahead of the Frances report (2012), the acute and third sector in West Dorset collaborated to drive through improvements in end of life care in Dorset County Hospital Foundation Trust (DCHFT). The project aimed to: Increase the focus on dignified care to the frail and elderly in DCHFT Develop End of Life Care Champions as transformational leaders (Krause 2007); influencing, motivating, and inspiring their colleagues through their End of Life Care practice.
Structure The project had 2 main elements: The support of End of Life Care Champions identified from each ward Delivery of 12 multi-professional study days on communication skills, endorsed by Bournemouth University and 6 Royal College of Physicians CPD points. Weldmar Hospicecare Trust delivered two programmes (registered/non-registered) of 3 study days. Content was drawn from the EoLC competencies, Routes to Success publication; focussing on: rapid discharge from hospital communication resuscitation orders Liverpool Care Pathway. Delivery included Support to disseminate knowledge e-learning. Presentations from GSF Beacon accredited care homes, ‘Learning in practice’ day in varied settings : hospice, funeral directors, local care homes.

Results Joint longitudinal analysis is in early stages, initial anecdotal evidence is positive: improvement in effectiveness of rapid discharges; increased written compliments and reduction in complaints relating to end of life care. The EoLC Champions themselves expressed increased confidence in: talking with patients/families regarding death and dying advocating with senior clinicians. sharing knowledge through: EoLC notice boards, information folders, teaching and launch of ‘Back of the Door poster project’. The communication study days have been equally positive: participants valuing experiential teaching techniques.

Conclusion The project strengthened partnership between the hospital and hospice, from collaboration on the bid to full support from clinical leaders and management. Future plans are to embed knowledge and skills and then support the champions through action learning groups.