

SUPPORTING ADULTS BEREAVED THROUGH ADVANCED ILLNESS: DEVELOPMENT OF A CORE OUTCOME SET (COS)

¹Luke Cowie, ¹Anmarie Nelson, ²Fiona Morgan, ¹Anthony Byrne, ³Sara Pickett, ¹Stephanie Sivell, ¹Jim Fitzgibbon, ¹Emily Harrop. ¹Marie Curie Palliative Care Research Centre (MPCRC), Cardiff University; ²Specialist Unit for Review Evidence (SURE), Cardiff University; ³Swansea Centre for Health Economics, Swansea University

10.1136/bmjspcare-2016-001204.15

Background A lack of evidence-based guidance on bereavement support (Hudson *et al.*, 2012) and of consistency in the measures used in clinical practice and research to assess bereavement outcomes (Forte *et al.*, 2004) have been identified. The heterogeneity in outcome measures makes it difficult to assess and benchmark clinical services. It is also challenging to combine and compare research results, and draw robust conclusions on effectiveness to inform clinical practice and service delivery. One step to resolving this situation is to develop a core outcome set (COS). This represents the 'minimum that should be measured and reported in all clinical trials of a specific condition' (www.comet-initiative.org).

Aim This project, funded by Marie Curie, aims to develop a COS that is specific to bereavement in adults following advanced, progressive illness.

Methods The COS will be developed through a series of distinct methodologies. First, outcomes utilised in the studies identified by systematic review will be mapped into different domains. Second, an expert consensus day will be convened with up to 30 stakeholders to identify any further outcomes and engage in a consensus methodology (Gallagher *et al.*, 1993) designed to identify the most important. Finally, the list of core outcomes will be further refined through an online Delphi survey with items rated over two rounds to reach consensus on which items should be included in the COS.

Results/conclusions The COS will allow research results to be compared, contrasted and combined, and will have additional benefits for clinical practice and the commissioning of services.

REFERENCES

- 1 Hudson P, Remedios C, Zordan R, *et al.* Guidelines for the psychosocial and bereavement support of family caregivers of palliative care. *J Palliat Med* 2012;**15**(6):696–702
- 2 Forte A, Hill M, Pazder R, Feudtner C. Bereavement care interventions: a systematic review. *BMC Palliat Care* 2004;**3**(1):3
- 3 Gallagher M, Hares T, Spencer J, Bradshaw C, Webb I. The nominal group technique: a research tool for general practice? *Fam Pract* 1993;**10**(1):76–81