abstracts

standardised format created. Electronic forms were reviewed to ensure compliance with the updated documentation policy and a standardised abbreviation list created to ensure consistency. Documentation training was introduced for new members of staff and a mandatory training programme provided using redacted patient records. Multi-disciplinary groups worked together to answer key clinical enquiries which were representative of issues investigated by a Coroner.

Results

On-going audits demonstrate incremental improvement in documentation and to ensure standards are being maintained there are plans to introduce a peer documentation review process and record keeping champions.

Conclusion

The development of a robust document management process, training and audit programme is fundamental to ensuring high standards of documentation and the delivery of high quality care.

Background

1. In the UK the number of 16–25 year olds living with life limiting illness has doubled in the past decade (Fraser et al., 2011).
2. Nationally there is a lack of suitable respite provision for young adults with palliative care needs (King and Barclay, 2007, p201).
3. An integrative literature review has been carried out to support development of a business case for a regional young adult short break unit in an adult hospice.
4. Short break provision is seen as integral to children’s palliative care transition and to meet these complex needs. Can adult hospices inherit this legacy for a new generation of young adults with palliative care needs surviving into adulthood?
5. Further primary research with young adults needed.

Literature review-emerging themes

Needs of parents:

• A break from complex and technical care is needed, to maintain well-being and enable time with other children
• A break enables parents to sustain care in the home
• Needs change over time-ageing parents and relatives, increasing complexity of care means less informal support available
• Parents struggle with trusting others to provide care.