Abstracts

During phase one: the current collective syllabus will be mapped out using a standard reporting tool to collate all hospice education activity, highlight any gaps against national best practice and identify areas of current strength.

At the same time conversations will continue with all education providers across the education sector as to the feasibility of joining up all education in a collaborative setting.

Following this, information will be collated and a business case of options for hospice education will be put forward underpinned by support from Deloitte.

Conclusion The evaluation of this work will be ongoing and can be measured in simple terms by the degree of collaboration and output against the project aims.

P-236 THE NATIONAL HOSPICE EDUCATION COLLABORATIVE: DEVELOPING UK HOSPICE POTENTIAL AS VOCATIONAL EDUCATION PARTNERS

Sally Garbett. *St Christopher's Hospice, London, UK*

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In 2013 the need for high quality vocational education for the healthcare workforce gained increased relevance. Vocational qualifications became central to Health Education England Strategies and the Government announced revisions to Apprenticeships which combined with NHS workforce reforms to become a catalyst for change:

The project An appetite from hospices for collaboration and support for vocational education was proven in an 18-month pilot hospice consortium. Consequently, and with funding from CHKcharities.co.uk, the National Hospice Education Collaborative formed. The initial focus is building quality and capacity of vocational education, including nurse associate and degree level nurse apprenticeships. Economies of scale and sharing of expertise will benefit all involved. Work on other educational initiatives will emerge.

Sustainability Significant interest and two years' funding enables the establishment of a subscription model for sustainability.

P-237 TICL – TEACHING, INFORMATION, CURIOSITY, LEARNING

Kirra Moser. *Peace Hospice Care, Watford, UK*

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Context The concept of protected learning time is not new. However, when organisational commitments become overwhelming, education is usually first to be side-lined. Historically, our protected learning time was clinically focussed and excluded many staff in our organisation.

TICL sessions were born in January 2016 and co-ordinated by the education team. For one hour every Tuesday afternoon, all staff and volunteers are welcome, and encouraged, to attend information sessions on varied topics.

The **Francis Report** (February 2013) highlighted the poor standards of care in the Mid Staffs NHS Foundation Trust.

The **Cavendish Review** (July 2013) reported on the inconsistencies of care worker induction training resulting in The Care Certificate implementation in March 2015.

Health Education England (HEE) launched **Talent for Care and Widening Participation; it matters (October 2014)** - a national strategy for a route from healthcare assistant to nurse, utilising vocational qualifications.

The **Richard Review** (November 2012) and **The Future of Apprenticeships** (October 2013) announced reforms to Apprenticeships and an Apprenticeship levy (tax) for larger employers (including hospices)

The end of the nurse degree bursary and confirmation of reforms to training for RNs, with the introduction of a new Nurse Associate role – both delivered through Apprenticeships. **Raising the Bar: Shape of Caring: Health Education England's response. HEE, May 2016 and Building Capacity to Care and Capability to Treat: A new team member for Health and Social Care in England HEE, May 2016**

Abs P-236 Table 1