

P-66 IDENTIFICATION THROUGH INTEGRATION – INCREASING ACCESS TO PALLIATIVE AND END OF LIFE CARE

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Introduction Recognising that someone is entering the last year of life enables access to Palliative and End of Life Care (PEoLC). There is currently under-identification of people in the last year of life.

Aim To enable access to PEoLC through improved identification of the patients known to the Community Trust who are likely to be in the last year of life.

Method In 2014 all Community Trust Specialist Palliative Care Nurses (SPCNs) were integrated into seven community integrated care teams, each covering a population of @100,000. The SPCNs were co-located and managed within those teams. Targeted PEoLC training was delivered to all staff. The SPCNs were supported to improve PEoLC within their locality through weekly Specialist Palliative Care multidisciplinary team meetings, senior nurse leadership, clinical supervision and an internal clinical network.

Results Two of the seven localities have been the most successful in improving identification of people in the last year of life (57% increase).

Abstract P-66 Table 1 Number of people identified as in last year of life on System1 two localities (annual snapshot March)

| Year | 2014 | 2015 | 2016 |
|--------|------|------|------|
| Number | 183 | 223 | 288 |

These joint reflections from locality manager and SPCN appear key to the improvement:

- Leadership from locality manager on integrating SPCNs
- Weekly locality multidisciplinary clinical meetings to share ideas, opinions, reflect, debrief, give informal education
- Increased visibility improves working relationships
 - more conversations, trust, respect,
 - team-work, better understanding of roles/workload
- More shared care and joint visits undertaken
- SPCN facilitation of team action learning and clinical supervision
- Offer of uniform to SPCN

Conclusion Integration of community SPCNs can significantly increase access to PEoLC through improved identification of people in the last year of life.

Next steps A comprehensive education programme is supporting staff development with the aim of further improving both access to PEoLC and clinical outcomes.

P-67 PROMOTING DIGNITY AND PATIENT-CENTRED CARE: EVALUATING THE FEASIBILITY OF ENGAGING THE ‘PATIENT DIGNITY QUESTION’ WITHIN AN ACADEMIC PALLIATIVE CARE UNIT”

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Background Patients receiving palliative care, who perceive a diminished sense of dignity, often experience greater symptomatic distress, depression and anxiety. The ‘Patient Dignity Question’ (PDQ) aims to address this challenge and promote patient centred care by asking ‘What do I need to know about you as a person to take the best care of you that I can?’ An agreed, transcribed summary of the response(s) are placed in medical and nursing notes. As part of an innovative scholarship programme for undergraduate medical trainees, a protocol for evaluating the feasibility of implementing the PDQ has been designed.

Aim To evaluate the feasibility of implementing the PDQ within an Academic Palliative Care Unit (APCU) in a University Hospital in North West England.

Methods The study uses an exploratory mixed methods design, adapted from existing studies. Suitable participants (in-patients within the APCU; able to provide informed consent) are identified, and consented appropriately by the research team. Feedback questionnaires will assess both patient and staff (HCP) perceptions on the utility and effect of the PDQ. A focus group will explore HCP’s perceptions in depth and examine the feasibility of wider implementation of the PDQ. Data on the number of patients approached, agreeing to further information, consented and providing data, will be collected.

Results Data will be collected and analysed during early 2017. Quantitative data will be analysed descriptively and examined for trends. Qualitative data will be thematically analysed in accordance with principles outlined by Braun & Clarke 2007. Study data will be ready for presentation at conference.

Conclusion There is a developing evidence base on the utility of the PDQ in promoting patient centred care. This student led study, will contribute to the evidence base and provide the groundwork for a future pilot to further assess the efficacy of the PDQ in this environment.

P-68 HOW CONFIDENT ARE FRONT LINE HOSPITAL STAFF IN CARING FOR DYING PATIENTS?

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