Abstracts

**Conclusion** Summer school is a meaningful addition to our education programme and due to this success, is to be extended in the future to cover other school holidays. Summer school has also proved to be a valuable opportunity to promote the philosophy of palliative care to those of a younger generation.

**P-258** EXTENDING THE CURRICULUM: BRINGING END OF LIFE CARE (EOLC) INTO THE CLASSROOM FOR YEAR 11 AND 13 STUDENTS

Katherine Birch. Compton Hospice, Wolverhampton, UK

10.1136/bmjspcare-2017-hospice.283

**Background** In the past, death was such a part of everyday life it was simply and frankly discussed, but such opportunities for today’s young adults are more limited. Whilst encouraging people of all ages to talk more about death and dying is important, for those considering a health-related career, having a better understanding about life-limiting illnesses and end of life care is particularly important. With many of those entering the caring professions expressing feelings of anxiety and fear in relation to death and the dying patient (Dakin, 2003) and a recognition that student nurses/doctors find caring for dying patients stress-inducing (Arber, 2001; Timmins & Kaliszer, 2002), more needs to be done to engage young adults with topics such as complex, life-limiting illnesses, death and dying (Wardhere, 2014).

**Project** Reflecting this, an innovative six- week programme, ‘Caring for Dave’, was designed by Compton Hospice for Health Futures University Technical College, West Bromwich – the first UTC in the country with healthcare and health sciences as its specialism. This challenging programme followed ‘Dave’ from an initial concern about his health through to care after death. Each week explored a different topic – such as lifestyles and health, breaking bad news, the dying process and caring for Dave after death. Students also completed work between sessions to enhance and consolidate their learning.

The aim of the project was to:
- Provide insight into eolc and related topics for students interested in a career in the care sector.
- Explore death and dying from a range of perspectives.
- Consider the personal competencies/attributes necessary to care for someone who is dying.
- Encourage learners to think about a career in palliative/eolc.

Evaluations provided very positive feedback about the programme from staff and student perspectives and the hospice is currently working with UTC and other sixth forms to explore wider roll out.

**P-259** INTRODUCTION OF REFLECTIVE PRACTICE FOR MEDICAL STUDENTS ON THEIR PLACEMENT IN A HOSPICE

Rebecca Avis, Sarah Parnacott. Ashgate Hospicare, Chesterfield, UK

10.1136/bmjspcare-2017-hospice.284

**Background** A recent study in postgraduate education found that reflection played a vital role in helping junior doctors to learn from clinical experience. All UK doctors are expected to undertake reflection and to make this an essential foundation for lifelong learning. Medical students have an attachment with the hospice for one week during their fourth year of medical training. During this time they work with our teams on the inpatient unit, the day hospice, and in the community. Following the EAPC conference (June, 2016) when Jason Boland looked at the themes of written reflection amongst medical students in Hull, we implemented the use of a reflective piece for all our students. We sought consent from the students that their reflection be anonymised and be used to educate other professionals.

**Aims** To introduce reflection as a beneficial practice to students for lifelong learning.

**Methods** The students were asked to submit a 300- word article at the end of the week to the speciality doctor, in which they reflected upon a situation encountered during their week at the hospice that they felt had impacted upon them.

**Results** The range of topics was diverse and included ‘The impact of certifying a patient’, ‘Being present when a patient or relative has been given bad news’, ‘A patient who wished to go to Dignitas’ and ‘Caring for young patients’. The medical students valued the opportunity in a supportive environment to carefully review, reflect and discuss different emotive situations that they had found surprising, distressing or inspiring during their placement. This in itself was cathartic and enabled them to receive appropriate emotional support and signposting if required to other support services before finishing the attachment.

**Conclusion** Reflection is a valuable tool in experiential learning, we hope this experience will endorse the value of reflective practice in their future careers.

**P-260** A ‘CAN DO ATTITUDE’ ENABLES LEARNING DISABILITIES STUDENTS TO EXPERIENCE WORK

Tricia Wilcock, 1Fay Elliot, 2Ellenor Gravesend, UK; 1Field 19+ College, Gravesend, UK

10.1136/bmjspcare-2017-hospice.285

**Background** Students with Learning Disabilities (LD) are encouraged to continue in education or training to the age of 25 (Department for Education, 2016). Moving from education into work requires a supportive and structured approach. An innovative programme was established by the 19+college to support work placements for this cohort of students. When approached the hospice was initially cautious, however, we were encouraged by the level of support on offer.

**Aim** To support adults with learning disabilities towards independent employment.

**Method** Job Coaches from the college accompanied each student with LD, ensuring they understood instructions and carried out tasks to a good standard. Placements were sought where routine tasks could be allocated for the student to learn and master and were monitored by the college. Each placement was offered initially for one academic year. Job Coaches were to pull back and observe from a distance encouraging and supporting the student to undertake tasks independently when ready. When agreed, the student would begin to attend on their own for part or a full day, working towards independence.

**Results** Two students attended placements all year; one in retail and he has been working towards independence; another one in the gardening and catering teams and he has been
applying for jobs in catering as a result of his experience. Student quote ‘I really enjoy working in the kitchen and have been cutting up vegetables and making cakes. The bit I enjoy most though is how we all help each other in the kitchen’. Staff have reported they were happy with the job coach’s support which meant their own workload did not increase as a result of the placement.

Conclusion Students with LD can successfully integrate into work placements with the right level of support. Further placements are being considered in the housekeeping and laundry teams.

**P-261** THROWN IN AT THE DEEP END – SCHOOL STUDENTS’ EXPERIENCES ON A SIX-MONTH INPATIENT WORK PLACEMENT

Tricia Wilcocks, Sue Marshall, Ellenor Graveshend, UK

10.1136/bmjspcare-2017-hospice.286

**Background** Healthcare providers need to reach out to school students to attract entrants (NHS England, 2014), to bridge the growing gap between rapidly increasing demand and the shortfall in workforce supply (NHS Improvement, 2016). Student career choices need to be influenced as early as possible (National Careers Service) through diverse and positive experiences in order to improve recruitment and retention (NHS England, 2014). The quality of work experience offered in hospices varies widely (Barnard, 2016) with some hospices daring to invite school students to directly experience patient care in a supportive manner.

**Aim** To provide school students with direct access to patient care in a supportive environment.

**Method** School students aged 17+ were invited to undertake a supported six-month work experience placement on a hospice inpatient ward, gaining a care certificate. Student feedback, plus pre- and post-placement questionnaires were evaluated. Results 24 placements offered over 12 months to students from a range of academic ability. Ten completed; two left for personal reasons; twelve are currently on placement; 22 currently plan to work in care. All students embraced opportunities to learn, surprising staff with their initiative, resilience and willingness to care. Students provided assistance with personal care, feeding patients, emptying catheter bags. They were exposed to death, coping remarkably well with the emotional aspect, utilising support of review meetings to share their feelings. A wealth of qualitative was collected demonstrating overall positive experiences:

- ‘I used images on Ipad to understand he wanted jelly and soft pears. He was ecstatic, and gave a thumbs up.’
- Commenting on a patient photo: ‘Nice to see the person behind the illness.’
- After witnessing a death, one student told her grandparent, ‘You’ll be in safe hands Nan, don’t worry.’
- All recognised the experience helped them to appreciate life even more.

**Conclusion** Valuable life skills, communication techniques and insight were gained by students.

**P-262** LEADING LEARNERS – DEVELOPING A FORMAL EDUCATION PROGRAMME FOR HOSPICE CARE STAFF

Jasmine Lee, Louise Henderson, Jacqui Ray, Wendy Green, Angela Pymm, North London Hospice, London, UK

10.1136/bmjspcare-2017-hospice.287

**Background** Historically the delivery of an education programme for inpatient nursing staff has been challenging. Particular challenges are:

1. Resourcing an education programme with leadership and teachers
2. Facilitating teaching given the clinical demands in a busy inpatient unit.

We adopted a new multi-disciplinary team joint approach with a doctor and nurse team, education team and nurse managers to run a teaching programme.

**Aims**

- To evaluate current learning practices and teaching interest
- To develop and run a teaching programme
- To evaluate teaching with a view to creating a sustainable programme which can function against the challenges of the inpatient unit.

**Methods** Staff surveys were used to review current learning practice and attitudes. The team designed and delivered a weekly programme trialled over two months with pre- and post-evaluation. Five sessions have happened to date with individual session feedback.

**Results** In pre-programme assessment 20 staff surveys demonstrated:

- Low attendance to formal training with most attending no sessions in the last month (no sessions=63.2%)
- All interested in attending teaching
- With 40% willing themselves to teach.

Individual session feedback demonstrates good attendance and all rated ‘very good’ or ‘excellent’. We will additionally be presenting follow-up data at two months.

**Conclusions** Results demonstrate strong learning interest and some interest in teacher development. To date there is good attendance and highly positive feedback. We propose that central to its success is our team approach with dedicated nursing leadership, increasing the teaching profile, e.g., with certificates, and co-ordinators managing staff allocation between teaching and clinical duties. Lessons learnt are vitally important to help other hospices adopt successful strategies to run teaching programmes when faced with a demanding clinical environment. We will now work towards running a sustainable programme and to develop staff as teachers and learning leaders themselves.

**P-263** ENHANCING THE RECOGNITION OF PALLIATIVE CARE EDUCATION FOR DISTRICT NURSES – ‘WALKING SIDEBY SIDE’ A PROGRAMME OF ENGAGEMENT BETWEEN HOSPICE AND COMMUNITY

Nicola Parkes, Helen Moran, Sarah Roberts, Julie Huttley, Trinity Hospice Blackpool, UK

10.1136/bmjspcare-2017-hospice.288

**Abstract**

Historically the delivery of an education programme for inpatient nursing staff has been challenging. Particular challenges are:

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2. Facilitating teaching given the clinical demands in a busy inpatient unit.

We adopted a new multi-disciplinary team joint approach with a doctor and nurse team, education team and nurse managers to run a teaching programme.

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