- To remove barriers to accessing hospice services.

Aims Empower palliative care patients to maximise their physical activity in order to promote an ongoing active lifestyle and develop resilience in managing the impact of their condition.

Method Paced Rehabilitation and Enablement Programme (PREP) is a community-based service at Willen Hospice funded by a grant from St James's Place Foundation and was developed in partnership with the local council and secondary care. PREP is an 8–12 week programme delivered within a gym setting by a clinical team consisting of physiotherapy, occupational therapy, nursing and a gym instructor. The weekly two-hour programme includes exercise and education underpinned by an individual goal orientated ethos. The programme utilises a range of outcome measures to identify goals, progression and evaluate the overall impact of the service.

Results Of the eight patients who have so far completed the programme:

- all have achieved their goals
- all have improved their physical performance (Mean '3 metre timed up and go' increase of 5.8 s; Mean 'sit to stands in 1 min' increase of 67%)
- all are engaged in ongoing physical activity and participating in valued roles of their everyday life (country dancing, fishing and gym memberships)
- three patients want to return as volunteers to support other patients.

Conclusion We believe PREP is an ideal opportunity to empower palliative care patients to stay active for longer and to regain their sense of value and confidence and could be replicated across palliative care settings.

P-149 EFFECTIVENESS OF PALLIATIVE CARE INTERVENTIONS OFFERING SOCIAL SUPPORT – A SYSTEMATIC REVIEW

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Background Social support is a necessary resource for good quality of life, particularly for individuals managing the psychological challenges of living with a life-limiting illness. Qualitative evidence describes social support obtained during palliative care interventions as valuable to the patient and beneficial to their wellbeing. Improving the quantitative evidence base is necessary to develop the application of economic evaluation in palliative care.

Aim(s) This systematic review aims to summarise existing quantitative evidence on the effectiveness (and cost-effectiveness) of interventions offering social support to individuals with life-limiting illness.

Method Research literature was identified through searching of electronic databases, reference picking and hand searches of key journals. Searches returned a total of 6247 unique titles of which sixteen were eligible for inclusion in this review.

Results Identified interventions included group therapies, group multidisciplinary interventions, and palliative day care. Outcome measures and study designs were heterogeneous. There was very limited use of economic evaluation. Statistically significant results were reported in areas including quality of life, mood disturbance, pain experience and symptom control. Benefits were frequently short term or influenced by participant

characteristics (age, gender, baseline distress). Methodological limitations included attrition rates, insensitivity of outcome measures, and difficulties in capturing a true baseline.

Conclusions Although benefits in both psychological and physical domains were identified from palliative care interventions that include an element of social support, methodological problems and a scarcity of research has resulted in limited evidence of sustained benefit or cost-effectiveness. Existing evidence suggests that social support interventions may be more beneficial to some groups of patients than others.

P-150 SOCIAL SUPPORT IN PALLIATIVE CARE

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Background A holistic approach to supporting a person with life-limiting illness and their families requires a consideration of their social context, including the availability of social support (defined as the resources gained from relationships with others). Hospices offer social environments, enabling opportunities to interact with others, maintain self-esteem and engage in group activities which are reported to be valuable opportunities to improve wellbeing. There has been limited research into the role of social support in palliative care, and whether the provision of such support has a measurable impact on patient outcomes.

Aims This three-year project will use mixed methods to explore services offered by hospices that facilitate social support, leading to a detailed understanding of social support in palliative care.

Methods A survey, disseminated to all hospices in the UK, will contribute knowledge on the establishment and variety of services that offer social support. Qualitative investigation including observations and interviews with service providers will seek to establish the meaning of social support in life-limiting illness and gain detailed understanding of services. A prospective study of patient reported outcome measures will be used to test the effectiveness (and if possible, cost-effectiveness) of these services.

Results An analysis of the results of the survey and preliminary qualitative findings will be presented.

Conclusions The project will contribute knowledge on the variety and significance of social support services in UK hospices and provide evidence for policy and decision makers on the necessity of social support in the context of life-limiting illness.

P-151 HUMAN RIGHTS IN END OF LIFE CARE: DEVELOPMENT AND IMPLEMENTATION OF A PRACTITIONER'S GUIDE

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Background There have been many reminders of losing sight of our humanity when delivering health care: the Mid-Staffordshire Enquiry (2013) and Winterbourne View (2012). The Care Quality Commission's new approach and the End of Life Care Education Framework for Scotland, are based on human rights principles.