

there is a named team supporting them, facilitated increased knowledge of all current patients, and supported the team as patients are reviewed by other CNS colleagues, reducing the risk of assessment/treatment variation.

P-226 **REDESIGNING A COMMUNITY PALLIATIVE CARE SERVICE FIT FOR THE FUTURE**

Helen Reeves, Katie Taroni. *St Giles Hospice, Whittington, UK*

10.1136/bmjspcare-2017-hospice.251

Background In 2016 St Giles Hospice undertook a review of its community palliative care services to ensure the service would be fit for the future. This entailed a review of team caseloads and how and who they were managed by.

Aims Community palliative care services have been historically very linear in their approach, mainly compromising of clinical nurse specialists. The aim of the review was to identify the numbers and complexities of patients on the caseloads and produce recommendations for how caseloads could be managed more efficiently ensuring patients were seen by the right professional or person at the right time.

Methods We reviewed the number of patients on the caseloads (approximately 550 at any one time) and identified if their needs were stable, deteriorating or unstable. We then reviewed which nurse was allocated to patients and identified whether patients were moved through the team or whether they stayed with one nurse throughout their journey.

Results After reviewing the case loads it was realised our structure needed adjusting. As a result, we now have a tiered approach to our community team. Our staff nurses will see the most stable patients or patients at the beginning of their journey with us, clinical nurse specialists will see patients whose condition is changing and our advanced CNSs will see our most complex patients. This means that patients are seen by the right person at the right time via step up or step down approach and has enabled us to see 1300 extra patients in 2016–2017.

Conclusion Service review continues and as a result we will be adding lead advanced nurse practitioners to the team and community care volunteers as we continue to evolve our service to ensure we can be responsive to the needs of the communities we serve.

P-227 **TYNEDALE HOSPICE AT HOME: COMING OF AGE!**

Sandie Faircloth, Sylvia Ritson. *Tynedale Hospice at Home, Hexham, UK*

10.1136/bmjspcare-2017-hospice.252

Background 21 years ago our hospice evolved to facilitate local residents to be able to die in their home wherever possible. However, as the current professional landscape is evolving amid a plethora of regulation, a new initiative is taking control of its metamorphosis from an altruistic venture into a pioneering professional organisation committed not only to the safe delivery of high quality care fit for purpose in the 21st century, but as an exemplar of innovation and gold standard bespoke person-centred care.

Aims To ensure that the service not only complies with CQC standards but seeks to work towards 'Outstanding' by enhancing patient centred care

To ensure that as a charitable organisation the care services provide best value for money in a clear transparent patient focused evidence-based service.

Method The organisation took the unique decision to employ two senior nurses explicitly to drive forward this ambition. They are tasked with two broad key drivers: training and development; quality improvement. Their roles are designed to be both interactive and most crucially, interdependent. The methods employed include:

- developing standards of practice
- deficits identified
- organisation specific training and development
- developing a training and development matrix
- developing quality framework and model
- developing standards of practice
- audit based on agreed standards
- develop an induction package for new staff
- set up appraisal framework.

Results Currently the senior nurses have only been in post for 12 weeks and already there have been significant positive developments. Work is in progress in all areas and the two key frameworks will act as a single platform to analyse, plan and measure future achievements.

Conclusion This is early days in the development of this unique partnership, however, the positivity so far has been encouraging and supported by all staff, volunteers and trustees.

P-228 **WIDENING INVOLVEMENT OF SERVICE USERS, CARERS AND CITIZENS IN PALLIATIVE CARE ON ISLAND OF IRELAND**

Brendan O'Hara, Karen Charnley. *All Ireland Institute of Hospice and Palliative Care, Dublin, Ireland*

10.1136/bmjspcare-2017-hospice.253

Background The meaningful involvement of people receiving palliative care (service users), carers and the wider community is essential to informing palliative care education, research, policy and practice.

A group was established on the island of Ireland in 2013 for this involvement. By 2016, as this group had come to the end of its membership term, a significant project was undertaken to refresh membership.

Aim(s) The aim was to renew and refresh group membership, fostering diversity of membership and ensuring that involvement remained worthwhile, and to increase the remit of the group's involvement in health structures in both jurisdictions on the island. Consideration was also given to a range of flexible methods of involvement wider than the original concept.

Method A recruitment drive was launched by the recruiting organisation in July 2016. This was supported by a suite of information on the organisation's website – promotional flyer, video, information leaflet, guidance for applicants and an expression of interest form. The opportunity was promoted through other networks; use of the flyer, email, social media and a press release.

Results More than 60 people asked to find out about the opportunity and 45 expressions of interest forms were received. A small number of applications were not progressed when involvement was clarified. An opportunity to renew membership was extended to current members. Invitations

were issued to potential new members (43) and renewing members (13) to a meeting in September 2016. Terms of Reference, which were discussed at the meeting and amended, were issued to 54 people in November 2016. Receipt of a signed copy confirmed membership of the group. A total of 44 members confirmed membership. Since September 2016 they have been involved in a range of activities informing palliative care education, research, policy and practice across both the Republic of Ireland and Northern Ireland.

P-229 **EXPLORING PALLIATIVE CARE NEEDS: A CONSULTATION WITH YOUNG PEOPLE WITH LIFE-LIMITING CONDITIONS**

¹Johanna Taylor, ²Jan Aldridge. ¹University of York, York, UK; ²Martin House Hospice, Wetherby, UK

10.1136/bmjspcare-2017-hospice.254

Background Paediatric palliative care plays an important role in the lives of children and young people with life-limiting conditions and their families. However, the views of young people are rarely sought when improving these services.

Aims This consultation explored the views and experiences of young people, with an aim to inform clinical guidelines.

Methods Qualitative thematic analysis of data collected from 14 young people (aged 12–18) with a life-limiting condition, who took part in focus groups or interviews. Topics explored were information and communication; care planning; place of care; emotional care; and improving services.

Findings Participants were keen to be involved in care planning, although preferences for involvement and information varied and changed over time. Participants emphasised that quality of care was more important than place of care. Aspects that helped them to feel safe and looked after included: access to specialists with knowledge of their condition; being treated as an individual; carers taking time to meet their personalised needs; and continuity of relationships. Participants described a range of negative feelings related to having a serious health condition. Distraction, avoidance, and talking to others were identified as common strategies to manage these. However, some participants expressed unmet needs for emotional care and felt unable to discuss this with others.

Conclusions Providing young people with personalised information and involving them in planning care to the extent they desire can reduce uncertainty about what will happen and when, and minimise disruption to everyday life. This needs to be balanced against their developmental and emotional needs, and the importance to young people of living well rather than focusing on their deteriorating health and end of life.

P-230 **'YOU SAID WE DID': LEARNING FROM SERVICE USERS AT SAINT FRANCIS HOSPICE**

Bridget Moss, Jan Scott, Tracie Brennan, Clare McPartland. *Saint Francis Hospice, Romford, UK*

10.1136/bmjspcare-2017-hospice.255

Background The Care Quality Commission requires hospices to evidence how views of service users are sought to inform and develop quality of care. Getting constructive comments is

a challenge and can mean a gap in knowledge and understanding.

Aim To gather greater depth on service users' views of the care, using a focus group approach, to generate constructive feedback.

To establish a platform for listening, taking action and informing improvements.

Method Participants were recruited from two support groups and were diverse in age, gender and ethnic origin. All had experienced hospice care. 'You said we did' was emphasised to clarify the purpose. Two key questions guided discussion. Comments were organised into themes of 'What we do well' and 'What can we improve'. Additionally three participants undertook a video recorded interview in an adapted London taxi, provided by Health Watch Essex.

Findings Bereavement support and involvement with the hospice was important to many. Who accessed bereavement services was questioned. Support groups at evenings and weekends were requested. A range of approaches to care and support is needed as one size does not fit all. Extending the opening hours of the hospice shop elicited strong feelings; limited hours had a big impact. Some referral routes were difficult and this caused stress. The video material offers powerful stories.

Conclusion The focus group itself had a big impact on the attendees; being asked for their opinion was highly valued. Some feedback was constructive although further work is needed. Another focus group is planned for October 2017 to feedback on improvements made. The potential for learning from the service users is huge and goes beyond making specific improvements. Funding has been identified to increase bereavement support services. An outcome of the event is recruitment of 12 'Cloud Surfers' who will assist with reviewing marketing material.

P-231 **CREATING OPPORTUNITIES TO EXTEND PATIENT AND CARER INVOLVEMENT IN HOSPICE WORK**

Veronica Mickleburgh. *LOROS Hospice, Leicester, UK*

10.1136/bmjspcare-2017-hospice.256

Background Our current patient and carer participation group [PCPG] actively engages members with shaping the direction of the hospice whilst simultaneously improving the clinical environment and services.

Aim To create meaningful opportunities for our PCPG members to positively influence our services.

Methods Our three key opportunities are:

- Speaking out – members were invited to explore how we could use their experience in speaking out at LOROS events and to support campaigns involving the local media. Training was provided
- Participating in recruitment of key positions at LOROS
- Increasing the return rate of a comment card scheme – Tell us what you think. Once a month, working with the patient experience lead, members go into clinical areas to engage patients with the scheme.

Results Following training, we now have a programme to utilise their new skills and past experience. So far, our members have attended several events including our annual cathedral concert.

Quote from a PCPG member –