relationships over time; that physical care tended to take priority over time spent exploring issues especially when time was limited. Reasons for not exploring and documenting were common for all staff groups.

Conclusions and recommendations The results were presented to the wider hospice team who made suggestions for change. These included: offering additional staff education and training in communicating with cognitively impaired people; proactively consulting informal carers to gain a deeper understanding of patients' needs; the use of a person-centred document for informal carers to complete with patients if able, that encouraged identification and exploration of psycho-social concerns; using routine handovers to highlight when these areas had not been addressed. A working group will be formed to implement and test changes to practice as part of the quality improvement in this area.

Objective Hospital admissions of care home residents close to the end of life are a source of concern and frequently described as 'inappropriate' and avoidable. However, the magnitude of this 'problem' on a national scale has not been investigated to date. This recently completed study investigated trends and characteristics of emergency admissions from care home to hospital where death occurred within seven days.

Methods Longitudinal and cross-sectional analysis of linked Hospital Episode Statistics with ONS mortality data for England 2006 to 2015: 1,858,830 care home residents aged 25+ who experienced a last week of life emergency admission to hospital, with comparator group 9,031,75 care home residents who died in care homes.

Results Of those in the last week of life in a care home, 16.1% had an emergency hospital admission; of whom 91.3% died in hospital. Last week of life admissions contributed to 49% of care home admissions; 16.1% had an emergency hospital admission; of whom 91.3% died in hospital. Last week of life in a care home who died in hospital. Last week of life hospital admissions contributed to 49% of care home admissions; of whom 91.3% died in hospital. Last week of life hospital admissions contributed to 49% of care home admissions; of whom 91.3% died in hospital.

Conclusions Last week of life hospital admissions are a small, and decreasing, risk for care home residents, the majority of whom remain in their care home in the final week of life. The implications for practice and policy are discussed.

N.B. Data analysis recently completed: late-breaking abstract.