**THE DEVELOPMENT OF AN ENHANCED NURSING HOME BEDS SERVICE PROVIDES AN ALTERNATIVE TO HOSPITALISATION FOR PEOPLE APPROACHING THE END OF THEIR LIVES**

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Background In 2013 the Palliative Medicine Department at Derby Hospitals launched an initiative within care homes with the aim of reducing unwanted hospitalisation and offering an alternative place of care for people approaching the end of their lives.

The Enhanced Beds Service consists of 10 beds within 5 Nursing Homes across a commissioning locality. They are available to patients who reach a crisis point, needing 24 hour care, where hospitalisation is undesirable. Day to day care is delivered by the Nursing Home staff, overseen by three specialist nurses who provide support and additional nursing care to patients and those important to them, as well as training and support to the Nursing Home staff.

Referrals are taken from all care providers including the hospital and community palliative care teams. Patients are assessed in their current location and, if admitted, are usually transferred within hours. A patient and carer experience survey and an audit are completed for all referrals. These measures monitor the service impact and direct improvements to the service.

Results In the last 4 years 466 patients have been transferred into an Enhanced Bed, 63% of which would have otherwise been admitted to hospital the same day – potentially saving 3500 acute bed days. Overall, 96% of admissions avoid further hospitalisation. The experience survey reports a high level of satisfaction in the care received. Informal feedback from colleagues in health and social care is positive, with increasingly more complex patients being referred.

Recommendations The Enhanced Beds service has demonstrated measurable improvements in patient experience and outcomes. Future developments include a ‘roaming bed’ to increase choice of location.

**INTEGRATED ONCOLOGY AND PALLIATIVE CARE: ANALYSIS OF A NEW SERVICE FOR CANCER PATIENTS**

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Background There is growing evidence to support the benefits of early integrated palliative care (PC) for patients with advanced cancer. Within a tertiary referral cancer centre we started a new Integrated Symptom Control and PC service. The aim of this service is to proactively identify patients who would benefit from PC review and to offer earlier support. The aim of this study is to assess the feasibility and outcomes of this service.

Methods This pre-post design study was approved locally, and is part of a national programme to develop Integrated PC. Two tumour groups were selected due to their poor prognosis; renal cell cancer (RCC) and gynaecological cancer (GC). The study was conducted between October 2016 and September 2017. 316 patients (RCC 111/GC 205) were assessed as part of the new service. 286 of these patients (RCC 100/GC 186) were formally assessed for PC needs using the validated Integrated Palliative care Outcome Scale (IPOS). Descriptive statistical analysis was conducted.