Oncology patients from Outpatient areas
Radiotherapy treatment areas
Oak Road Treatment Centre.
Community Macmillan direct referrals

A bespoke proforma was completed after each consultation by the treating clinician. 413 ambulatory patient reviews took place over a 6 month period. An in depth analysis has been conducted of 236 new patient referrals between January and June 2017. Overall results show a significant impact on patient outcomes, with 21% avoidance of admissions, 25% facilitated early discharge and 43% avoided escalation of symptoms/GP review.

Data analysis remains on going to assess readmission statistics; in particular an analysis of early OAU discharges, facilitated by the ESC clinic review of low risk neutropenic patients.

The service currently operates two clinics a week on Monday and Thursday afternoons. A business case has been submitted proposing service expansion to operate daily clinics.

As the first cancer centre to implement this service, we have welcomed oncology teams from other centres across the UK, enhancing practice elsewhere.

### Free papers 16–18 | Communication

**WHAT VALUE AND CONTRIBUTION CAN ARCHAEOLOGY GIVE TO END-OF-LIFE PRACTITIONERS?**

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**Background**

What happens when archaeology meets health and social care? The Continuing Bonds Study, a pilot project lead by Dr Karina Croucher, Professor Christina Faull and Laura Green, uses case studies of the dead from the recent and distant past to spark discussions about death and dying. Via a series of workshops, the study investigates what value and consequence such materials and discussions have for health and social care students and practitioners.

**Methods**

In this qualitative, exploratory study, 92 participants attended 21 workshops delivered in Bradford and Leicester. Themed case studies presented materials in picture, video and object formats accompanied by explanatory text. Responses to pre, post and follow-up (1–3 months) questionnaires have been analysed both descriptively and thematically. Recordings of the discussions generated in the workshops were also analysed thematically.

**Results**

Our results confirm the project hypothesis, with 93% of survey respondents believing that archaeological materials can be used to facilitate discussions/training about death, dying, bereavement and loss. For some individuals, the follow-up questionnaire identified considerable personal and professional impacts of the workshop, 81% of the respondents remembered at least one archaeological example, effected by how interesting and emotive they perceived the material. The project had a further result, with 72% saying the workshops helped to reflect on differences in cultural attitudes to death and dying. Some individuals feel more confident talking about bereavement post-workshop, and now give further consideration to patients’ choices in the context of dying.

**Conclusions**

Archaeological materials facilitate discussions around death, dying and bereavement that are relevant to health and social care workers, personally and professionally. Participants welcomed the opportunity to discuss and explore the myriad aspects of death from different times and places.