Results Three key strategies contributed to the successful implementation of the CSNAT Approach in practice:

1. a dedicated planning process: involving a core team to lead on implementation, senior management support/overview, and an intense pre-implementation planning period providing the 'groundwork' to support/sustain the process;
2. project leads' investment in CSNAT departmental champions: including stakeholder analysis to identify key staff with relevant skills, involving them in the planning process;
3. a process of two-way communication about progress with implementation: including development of an 'issues log' to ensure implementation concerns of CSNAT users were heard and acted upon.

Conclusions These key strategies have enhanced practitioner engagement with CSNAT implementation and have potential to sustain embedding of The CSNAT Approach in practice in the longer term. These findings were used to inform aspects of the CSNAT implementation toolkit.

P-287 EVALUATING THE QUALITY, IMPACT AND SUSTAINABILITY OF A APPRENTICESHIP PROGRAMME ACROSS SOUTH LONDON

Maaïke Vandeweghe. *Greenwich and Bexley Community Hospice, Abbey Wood, UK*

10.1136/bmjspcare-2018-hospiceabs.312

We will share the evaluation findings of the Level 5 Diploma for Assistant Practitioners in Healthcare, which was developed and delivered by the South London Hospices Education Collaborative (SLHEC) in partnership with Croydon College. Kingston University was commissioned to conduct the evaluation in collaboration with the SLHEC. Both quantitative and qualitative data was collected from students and stakeholders at two intervals (end of year 1 and 2). Eighteen students, who were all working as Health Care Assistants in either hospices or care homes at the time, enrolled on the programme.

A mixed-methods design was used to evaluate the course in multiple phases. Questionnaires for students and stakeholders focused on the quality, value, sustainability and impact of the programme. Two focus groups with students enabled the exploration of some of the barriers and challenges of the programme in more detail and offered richer, especially qualitative, data. Alongside the questionnaires and focus groups a semi-structured interview with the course director was conducted. This offered an opportunity to capture the perception of the education provider and their particular challenges.

In summary, it was felt that the course had a positive impact on students, predominantly increasing their skills, knowledge and confidence and the vast majority felt that the course had helped them prepare for their role as assistant practitioners. Two major challenges were identified in relation to workloads and communication which had an effect on perceptions of the course.

This evaluation created an opportunity to explore challenges in relation to an educational programme like this from the perspective of the students, employing organisations and education provider. These findings will inform future delivery of this or similar kind of programmes. This project has also prepared us to engage, deliver and steer the direction of the trainee nursing associate programme across the wider South London health economy.

P-288 PREPARE, PREVENT, RESPOND: IMPROVING FIRE SAFETY AND AWARENESS

Susan Doran. *St Catherine's Hospice, Preston, UK*

10.1136/bmjspcare-2018-hospiceabs.313

Background Following a number of high profile fires in 2017, most notably Grenfell Tower and Cameron House in Scotland, St Catherine's Hospice reviewed its fire safety awareness and prevention training to ensure all staff and volunteers were updated.

Aims and objectives A plan was drafted to ensure everyone was more fire safety aware and to create a cultural shift – fire safety is everyone's responsibility.

Method Three memorable words were used to promote this: Prepare; Prevent; Respond.

Prepare Have in place robust policies and evacuation procedures. Training for staff and volunteers. Assistance provided by trained fire wardens. All fire detection is inspected, maintained and tested.

Prevent Good housekeeping standards. Workplace inspections conducted. Fire risk assessments in place and issues addressed. Third party audits conducted.

Respond Evacuation training. Role play training for fire commanders, nursing staff and fire wardens. Regular drills conducted.

Five common breaches at the hospice were also highlighted and used in a poster campaign. A training programme was developed to improve understanding, combat complacency of staff and volunteers when breaching fire regulations and encourage responsibility amongst everyone.

Results Bespoke training sessions for: managers, fire wardens, fire commanders, staff and volunteers at Spring Staff Seminars. A number of the training sessions focused on behavioural safety and left many people speechless following the presentation. Some of the training was focused on responsibility and potential sanctions that can be imposed, which focused the minds.

Conclusion/impact We have conducted various role play scenarios aimed at getting patients out of the hospice in the event of a fire. The hospice is an old building which has its own challenges but these have been met with eagerness to ensure we have robust procedures in place. All the training sessions were met with positivity and support.

P-289 OXYGEN AND FIRE SAFETY IN A HOSPICE SETTING: A COLLABORATIVE APPROACH TO CHANGE PRACTICE

Doug McGarr, Rebecca Jenkinson. *Eden Valley Hospice, Carlisle, UK*

10.1136/bmjspcare-2018-hospiceabs.314

Background Following on from the tragic events at Grenfell Tower and attending an ECLiHP UK conference presentation entitled 'Supporting staff through a traumatic event in the workplace', Clinical and Estates Leads worked together to facilitate positive change

Aims Educate all staff and volunteers in safe procedures for fire and oxygen safety by creating a three-hour fire safety workshop unique to our hospice. Making sure that policies and procedures that were going to be controversial were discussed openly in a safe environment with time allowed for feedback.

Method

- Clinical and Estates Leads working collaboratively to design a bespoke workshop suitable for clinical and non-clinical roles and ensuring all staff received quality training with a variety of teaching methods used to produce clear outcomes
- Updated policies for fire evacuation, oxygen awareness and smoking, using the workshops as a vehicle to roll these out to staff for feedback before final agreement with senior managers and trustees
- Created a working group of colleagues from departments across the hospice to develop a new referral form to identify if a patient is a smoker prior to admission, produce a risk assessment for patients who smoke and leaflets for service users, one for smoking and one for safe use of oxygen.

Results

- Clinical, non-clinical staff and volunteers provided with consistent and bespoke on-site fire safety workshops rolled out to over 150 staff and volunteers
- New policies agreed and implemented for smoking, fire safety and medical gases.

Conclusion In 12 months we have facilitated 20 fire safety workshops, updated policies and implemented new documents and ways of working with excellent feedback received, putting the safety and welfare of patients, visitors and our workforce at the forefront of what we do. Plans are in place to facilitate refresher training for all staff next year.

P-290 EMOTIONAL SAFETY: ONE HOSPICE'S APPROACH TO ORGANISATIONAL INTEGRITY AND DEVELOPING WORKFORCE HEALTH

Becky Chaddock, Nick Dey. *St Columba's Hospice, Edinburgh, UK*

10.1136/bmjspcare-2018-hospiceabs.315

Background Working with death and dying can lead to heightened risk of burnout and stress for the workforce (staff and volunteers), and increased difficulty with personal bereavement (Goodrich, Harrison & Cornwell, 2015; Hill, Dempster, Donnelly et al., 2016; Huggard & Nichols, 2011). Informed by our 2016/17 staff survey, person-centred care observational studies (Haraldsdottir, Donaldson, Barclay et al., 2018; St Columba's Hospice, 2015) and drawing on the skills of the workforce, and literature (Goodrich, Harrison & Cornwell, 2015; Tsiris, Davis & San, 2014) we looked at health and wellbeing from emotional safety perspective (Huggard & Nichols, 2011), in order to establish an evidence based holistic approach tailored to St Columba's Hospice.

Aims To scope the organisation's existing support systems, to encourage self-care across the workforce, and to explore new ways to improve health and wellbeing at work across the organisation.

Methods We mapped our existing support systems, initiatives, and policies/procedures, categorising them into: meaningful work; feeling valued; living healthy lives; maintaining healthy minds; and, hospitable working environment. We held a workforce awareness campaign, invited feedback/ideas, and

established a short term working group. Gaps in current practice and policy were identified and an action plan developed.

Results We learnt that most staff were unaware of what was already in place, and many had not considered some areas relevant to their health and wellbeing at work. The organisation made changes across each category, encouraged the workforce to take personal responsibility and ensured that the hospice operated with integrity through prioritising emotional safety and adjusting policies and entitlements. The process has encouraged organisational change in terms of becoming a more compassionate employer (ACAS, 2014; National Council for Palliative Care, 2014), empowered staff to establish a subsidised weekly yoga class, and supported the founding of a volunteer-led hospice choir.

Conclusion There are particular challenges for hospice care in establishing emotional safety throughout the organisational structure, support systems and within available resources. However, it is possible to operate with integrity, enable the workforce to have longevity and encourage maintenance of good health and wellbeing in hospice care.

P-291 BRAND NEW ANALYSIS

Jon Heggie. *St Columba's Hospice, Edinburgh, UK*

10.1136/bmjspcare-2018-hospiceabs.316

Background In order to meet the diverse needs of the community we serve, our hospice relies on the commitment of our supporters. The first step for a donor in supporting the work of the hospice is an awareness of who we are and what we do. In order to better understand the level of awareness for our brand, and the knowledge of our services, we commissioned a piece of research work.

Methodology Survey work was carried out across various sites in our catchment area. The areas identified were either places we felt awareness may be high, or areas where we want to expand our services and support. At least 100 surveys were conducted with members of the public in each site, focussing on questions which gave us an idea of each individual's awareness of St Columba's Hospice, and our work. The company we worked alongside interviewed a representative cross section of the public. The survey work was complemented by an analysis of our current and lapsed supporter databases which helped us interpret the results.

Results The research produced some fascinating results, not only in terms of the hospice's position in the local community, but also with reference to some wider questions around death, dying and bereavement. We found that awareness of our logo was relatively strong (although could be improved), however, knowledge of what we actually do as a service, even amongst those who say they support us, was not as high as may be expected.

Next steps Following on from the survey we will conduct focus groups to better understand the reasons for this limited understanding. We also want to understand how we should articulate our key messages, which are fundamental to our success as an organisation.