intervention= 70). Wellbeing was measured with the Hospital Anxiety and Depression Scale (HADS) and Impact Event Scale (IES).

Results No significant differences were found in wellbeing of FCs between groups. The mean scores for the HADS show no significant differences between groups for anxiety (mean score control 7.09 vs. mean score intervention 8.29) and depression (mean score control 6.72 vs. mean score intervention 7.17). No significant differences are found between groups in the mean scores for the IES. Intrusion had a mean score of 21.27 for control vs. 21.38 for intervention; Avoidance had a mean score of 10.34 for control vs. 12.72 for intervention.

Conclusion Despite previous evidence about improved outcomes for wellbeing in FCs in ACP programs, our ACP intervention did not show differences between groups. Possibly the non-response or cultural discrepancies between the different countries have a part in this. More research is needed to explain what mechanisms are present.

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OP50 INFLUENCING FACTORS ON ENGAGEMENT IN ADVANCE CARE PLANNING (ACP) FROM THE CAREGIVER’S PERSPECTIVE
S Herzog, M Koch, C Seifart. Philipps-University Marburg, Marburg, Germany

Background One important aspect of successful ACP is the engagement of caregivers during the process. However, sometimes the engagement of patients and their caregivers in ACP is known to be difficult. Therefore barriers and facilitators of participation in ACP from the caregiver’s point of view are explored.

Methods 12 relatives (caregivers) of palliative-oncologic patients were questioned in guideline-based interviews. 5 caregivers were children and 7 were spouses of patients. The analysis was conducted by Qualitative Content Analysis by Ma.

Results Six result clusters were evaluated influencing the willingness of both patients and caregivers.

1. Skills Of ACP–Initiators (general and social expectations on the initiator and conductor of ACP–intervention)
2. “Omnipresent Electivity” (setting of daily–life impulses for ACP bearing a non–binding nature)
3. Importance of Relationship Between Spouses (understanding of symmetrical needs)
4. Relative Differences Of Perception Of Children And Spouses of patients
5. Maintenance of Objective Necessities (non–emotional structural circumstances such as resources of time, finances and legal responsibilities)

All empowering relatives to be

6. A Participative Caregiver (including experiences and desired role in ACP setting)

Conclusions Acknowledging the importance of caregivers and their essential role in ACP further interventions should consider incorporating these factors to improve the implementation of such.

OP51 EXPERIENCES WITH AND OUTCOMES OF ADVANCE CARE PLANNING IN BEREAVED RELATIVES OF FRAIL OLDER PATIENTS: A MIXED METHODS STUDY
1 A Overbeek*, 1 J Korfage, 2 A van der Heide, 1 J Rieijrens. 1Erasmus MC, Rotterdam, Netherlands; 2TAC Innovations, La Crosse, USA

Background Advance Care Planning (ACP) may prepare relatives of frail older patients for future decision-making.

Objective To investigate (1) how bereaved relatives of frail older patients experience ACP conversations and (2) whether ACP has an effect on relatives’ preparation for decision-making and on their levels of anxiety and depression.

Setting: Cluster randomised controlled trial.

Conclusion: Cluster randomised controlled trial.

OP52 TO WHAT EXTENT DO ONLINE RESOURCES MEET THE NEEDS OF SUBSTITUTE DECISION-MAKERS IN AUSTRALIA? PART 2
1 M Sellar*, 1 J Tran, 1 L Nolte, 2 B White, 3 C Sinclair, 4 D Fetherstonhaugh, 5 K Detering. 1Austin Health, MELBOURNE, Australia; 2Australian Centre of Health Law Research, Queensland University of Technology, Queensland, Australia; 3Rural Clinical School of Western Australia, University of Western Australia, Albany, Western Australia, Australia; 4Australian Centre for Evidence Based Aged Care, La Trobe University, Melbourne, Victoria, Australia; 5Faculty of Medicine, Dentistry and Health Science, University of Melbourne, Melbourne, Victoria, Australia

Background We aimed to examine Australians’ knowledge, attitudes and experiences regarding the role of substitute