disciplinary (MDT) approach at Kirkwood, with input offered by our trained Counsellors and Specialist Palliative Care Social Workers. Working closely with MDT members, we hope to develop this group, along with the service users, so that it is truly meeting the needs identified by the group.

Feedback from Kirkwood's service and carer user forum had previously indicated a demand for a male-specific service at Kirkwood Hospice. This was alongside recognition of existing services offered perhaps not appealing to male patients. Given the national 'Men's Shed' movement has been gaining momentum and demonstrating positive links with mental health and wellbeing, it has felt like the right opportunity to develop a Men's Space session.

With the aim to engage and support more male service users at Kirkwood, the 'Men's Space' sessions have been developed and launched. The sessions are being envisaged as a developmental 12 week programme where service users, alongside Kirkwood Hospice staff, come together in a supportive manner with the option to plan and deliver a specific project such as gardening, creative activities or IT based projects. The activities undertaken by the group will be led by the group itself and supported and facilitated by staff from the Support and Therapy team, Family Care Team and IT team members. Users can attend for as long as they want to during a weekly four hour period.

Initial feedback has been extremely positive and the service will be evaluated through the 'Short Warwick-Edinburgh Well-being Scale' at week 1, 6 and 12. The sessions are also being promoted to local stakeholders including other Men's Sheds groups based in Kirklees.

P-26 CREATING A TEMPLATE TO IMPROVE RECORDING END OF LIFE DISCUSSIONS/PLANS IN A CUSTODIAL SETTING

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Background In April 2018 the Dying Well in Custody Charter was published. This Charter provides a framework to assist all prison staff supporting an individual who is preparing to die in a custodial setting. Projections indicate the number of individuals aged 50 plus held in custodial settings is increasing rapidly. There is strong evidence that this older population in prisons experience higher burden of physical/mental health problems. Prison staff highlight that initiating discussions about end of life care/preferences in relation to place of death/care was challenging and that the recording and tracking of these discussions/plans was problematic leading to possible unnecessary hospital admissions.

Aims Design/develop an end of life template focused on the Dying Well in Custody Charter. The template to be given a designated area on the computer system (SystemOne) that all prisons use nationally. The template can be used as a passport of end of life discussions/planning if the individual moves to another location e.g. other prison, hospice, community setting. Provide multi-professional education focused on planning/recording of end of life care in prisons.

Method Collaborative working with hospice and two prison healthcare/IT teams. Staff comments/ideas gained through group discussions to develop the template.

Implementation To trial the template in two prisons and one hospice over six months. First prison has a high percentage of elderly individuals and the second prison has a health-care unit. The hospice uses the same computer system and covers both prisons.

Evaluation Discussion of the use of the template monthly and amend as appropriate until a template has been formed that meets the need of individuals and can be used nationally to improve end of life care/planning in custody.

P-27 INNOVATIVE PARTNERSHIP WORKING TO HELP SUPPORT THE NEEDS OF DIVERSE COMMUNITIES

Susan Smith, Kathryn Hamling. *Highland Hospice, Inverness, Highlands*

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Highland Hospice covers an area 20% larger than Wales with a population less than 8% the size. The delivery of services equitably has proven extremely challenging. Whilst the concept of a hospice running a volunteer befriending service is not innovative, we believe our approach to rolling this out across the Highlands through partnership with local communities is.

Helping Hands is a volunteer befriending and support service established in 2016. The service has four objectives: build community capacity to deal with death and dying; support carers to sustain their caring roles; mitigate impacts of social isolation for clients; support wider health and social care system to cope with increasing demand.

The service is open to all individuals in need, regardless of their diagnosis. In order to extend the service across the whole Highland region we deliberately sought small, locally run organisations with a close connection to their community. To date we have established five partnerships each at a different stage of development. One partner had an existing befriending service we were able to augment, the others had no similar services. The partnerships work with small populations dispersed across large areas. Local knowledge and contacts support the recruitment of volunteers and helps people feel more comfortable referring to the service.

Seeing success, the hospice has committed to establishing more partnerships to develop local services. Our 2018–2021 strategy, 'Supporting our Compassionate Community', reflects the fact that we wish to support our wider community so that together we can help address palliative and end of life care needs.

We recently identified two rural Highland communities with under-provision of social care who want to work with us to pilot partnership delivery of social care services. Working in this new way can prove challenging but the opportunities of supporting people in their own community is worth it.

P-28 SAFEHARBOR: SUCCESSES AND CHALLENGES IN THREE YEARS OF OUTREACH TO UNDER-SERVED GROUPS IN NORTH EAST ESSEX

Debbie Pigeon, Karen Chumbley, Lee Welland. *St Helena, Colchester, UK*

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Background The Safe Harbour project was set up in 2016 to address the lack of hospice support for patients from under-served groups. During its pilot phase, a feasibility study