P-64  PROJECT ECHO™ NI & HOSPICE UK – PROGRAMME MANAGEMENT AND SCALING-UP

1Aine McMullan, 2Tracey McTernaghan. 1Health and Social Care Board, Belfast, UK; 2Hospice UK, Belfast, UK

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Background With ever-increasing demands and focus on value-based healthcare delivery, the Health and Social Care Board (HSCB) in Northern Ireland through their publications (‘Systems, not structures: changing health and social care’, Bengoa, Stout, Scott, McAlinden et al., 2016; ‘Health and wellbeing 2026, delivering together’, Department of Health, 2016; ‘Transforming your care: a review of health and social care in Northern Ireland’, Department of Health Social Services & Public Safety, 2011) identified the Project ECHO™ model as vehicle of innovation and a methodology to implement change within its health and social care sector. In 2015 the HSCB piloted five ECHO™ Knowledge networks, rising in 2016 to 19 and then in 2018 to 30.

Project ECHO™ (Extension for Community Healthcare Outcomes) is a tele-mentoring programme that uses video-conferencing technology to share evidence-based knowledge, best practice and education by using case-based learning. The programme management of Project ECHO™ NI is a collaborative partnership between the HSCB and Hospice UK who in 2017 was commissioned to facilitate the delivery up to 30 ECHO™ Networks. The ECHO™ Networks engage with health and social care professionals in a wide variety of areas, e.g. ophthalmology, pharmacy, neurology, palliative care, paediatrics.

Aim To examine the experiences and tools used by the Project Managers to deliver the Project ECHO™ NI programme.

Method The Project Managers developed and implemented the following successful tools: project manager; project plan; Gantt chart; operations manual; ECHO™ network dashboard; clearly defined team roles; weekly operational meetings; 6-monthly team review days.

Weekly operational meetings map and measure the key milestones as agreed by the Project ECHO™ NI Board.

Results The programme management team have established successes and challenges:

• Success: staff appointed – sole focus on project with permanent/fixed term contracts; ‘work with the willing’;
• Challenges: temporary staff; staff capacity to absorb duties into current role; sustained engagement with professionals.

Conclusions The Project ECHO™ NI programme continues to meet agreed milestones and engage with health and social care professionals in Northern Ireland.

P-65  PROJECT ECHO™: PROGRAMME MANAGEMENT OF A DISRUPTIVE INNOVATION – PROJECT MANAGERS’ PERSPECTIVE

1Tracey McTernaghan, 2Hazel Webb. 1Hospice UK, Belfast, UK; 2Hospice UK, London, UK

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Background Project ECHO™ (Extension for Community Healthcare Outcomes) is a tele-mentoring programme that uses video-conferencing technology to share evidence-based knowledge, best practice and education by using case-based learning. Hospice UK’s strategic plan is to extend the reach of hospice care (Hospice UK, 2017), with the Project ECHO™ model being identified as vehicle of innovation and a methodology to achieve this. Engagement with hospices throughout the United Kingdom commenced in 2017 and by April 2018, Hospice UK delivered its first three-day training programme ‘Immersion Training’ to two hospices. As of June 2019 a further 15 hospices have completed this training programme in either London or Belfast.

The Hospice UK Project Managers for the Project ECHO™ programme, based in London and Belfast, support the operational delivery of the training programme. With additional organisational support from a Programme Management working group, consisting of clinical, finance, ICT, governance, communication and fundraising staff.

Aim To examine the experiences and tools used by the Project Managers to deliver the Hospice UK Project ECHO™ Programme.

Method The Project Managers developed and implemented the following successful tools: Project plan; pre-training support tools/guidelines which hospices use to establish ‘readiness’ to commit to training; operation/programme management guidelines; stakeholder analysis; issue log; fortnightly operational meetings (to map activity against key milestones).

Results The Project Managers have established successes and challenges:

• Success: staff appointed whose sole focus is to manage the Project ECHO™ programme. Engagement with hospices who have thoroughly analysed the ‘strategic fit’ of Project ECHO™ by using the pre–training support tools/guidelines;
• Challenges: recommended key personnel to include, a champion, a facilitator, an admin/co–ordinator and IT support, who do not attend training.

Conclusions The Hospice UK Project ECHO™ continues to develop its programme management tools to meet the demands of its customers.

P-66  A PROACTIVE APPROACH TO DEVELOP KNOWLEDGE AND UNDERSTANDING OF DEMENTIA? A HOSPICE’S EXPERIENCE

Caroline Vince, Karen Chumbley, Imelda Hodgkinson, Christine Aylott, Jacque Pamphilon. St Helena, Colchester, UK

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Background The purpose of St Helena is to help local people with incurable illness to live well and die with dignity and choice. One of the strategic priorities is to reach out based on need, regardless of diagnosis or circumstance. One of our ambitions was to invest in education in conditions that traditionally have received less palliative care support, such as dementia.

Aim St Helena acknowledge the need to provide educational opportunities for staff and volunteers to increase their knowledge and understanding of dementia.

Method St Helena is committed to providing a number of educational opportunities, including:

• Joining the Essex Dementia Action Alliance;
• Initiating The Alzheimer’s Society’s Dementia Friends information session for all staff;
• Organising a ‘Caring for those dying with dementia at the end of life’ study event;