completion date of training approaching (30%). Four ideas for future research projects were submitted.

**Conclusions** Surveying trainees to gauge opinions on our research collaborative has shown a continued enthusiasm for developing research ideas and commitment to trainee-level leadership. WM CARES has demonstrated the value of trainee-led research with an expanding footprint in the palliative care literature.

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**P-106 REGIONAL COLLABORATION FACILITATES DELIVERY OF PALLIATIVE CARE RESEARCH IN THE WEST MIDLANDS**

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**Background** Within the West Midlands there are a number of palliative care services which are actively engaged in research whilst others are working to become ‘research ready’.

**Aims**
- To increase research activity within palliative care providers across the West Midlands;
- To develop and conduct original research in these settings across the West Midlands;
- To support delivery of the National Institute for Health Research (NIHR) and Charities Consortium for Hospice and Community Research objectives.

**Methods** A collaborative network was formalised in 2018, which meets quarterly and is made up of clinical and non-clinical staff that represent:
- Hospices;
- NHS community palliative care services;
- NIHR senior research staff for supportive and palliative care;
- University representatives;
- A representative from the registrar–led West Midlands research collaborative.

**Results** Meetings are attended by over 10 organisations and this number continues to increase. Feedback on being part of the group includes:
- Excellent networking opportunities and a useful forum for problem solving;
- Helpful with job descriptions and interview questions for recruiting research nurses;
- Useful for gaining ideas of how to promote research within a hospice and to hospice Boards;
- Has enabled us to identify studies to which we could recruit patients and become part of the study;
- Being able to discuss a research project with other organisations before deciding whether it was appropriate to put in an expression of interest;
- NIHR research nurses have reported improved ability to signpost potential studies and training opportunities through the group.

**Conclusions** So far, the group has led to an increase in recruitment to portfolio studies within the region and is helping to establish the infrastructure that will enable through collaborative working the development of original research projects.

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**P-107 ENABLING DYING PATIENTS TO TAKE PART IN RESEARCH USING ADVANCED CONSENT METHODOLOGY**

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**Background** The need for research is a priority area in palliative care. Palliative care research is essential to establish evidence-based models of care that are required to improve outcomes for people with terminal illness (Higginson, 2016). Obtaining informed consent for participation in hospice and palliative care clinical trials is an ongoing challenge faced by researchers (Agar, Ko, Sheehan, Chapman et al., 2013; Hardy, 2000; Rees, 2001). Aim By consenting patients in advance, we aimed to improve research opportunities in the last week of life.

**Methods** Advanced consent methodology was used to recruit participants to a National Institute for Health Research Portfolio study. Potential participants with capacity were given verbal and written information by a researcher outlining the aims of the study and the advanced consent process, looking to continue research into the last week of life.

A ‘Personal Consultee’ was identified to act as a point of contact should the participant lose capacity to consent to further assessments.

Once recruited to the study the researcher ensured regular contact with both participant and consultee throughout their inpatient stay.

**Results**
- Hospice staff were regularly updated on research processes, with an aim to minimise gate keeping (Preston, Payne, Salt, Griggs et al., 2013).
- The majority of patients agreed to provide consent in advance, leading some to have assessments in the last week of life. This is consistent with previous work reporting patients’ willingness to participate in research (Nwosu, Mayland, Mason, Varro et al., 2013; Henderson, Addington-Hall, Hotopf, 2005). Regular communication ensures that caregivers are kept informed. Feedback has been positive when performing assessments in the last week of life, with focus on improving future care.

**Conclusions** Our experiences have demonstrated that palliative patients want to participate in research up to and including the last week of life. Caregivers have shown great desire to support research.

These findings could encourage other palliative care settings to recruit patients to research studies using advanced consent, thus informing policy for best evidence based care at the end of life.

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**P-108 A RECIPE FOR ENABLING RESEARCH IN NON-NHS ORGANISATIONS**

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**Background** Health and social care research has expanded beyond hospitals and GP surgeries to include hospices, charities and care homes. The NIHR has increased support for research in palliative and end of life care to support activity in this area, which includes some non-NHS organisations.