It has led to an improvement in patients’ knowledge and understanding of their condition, empowering them to commence basic treatment prior to the first appointment.

**P-191 LIVING WELL: AN EARLY ACCESS PROGRAMME FOR PEOPLE LIVING WITH MND**

Yvonne Dunn. Marie Curie Hospice Newcastle, Newcastle Upon Tyne, UK

10.1136/bmjspcare-2019-HUKNC.213

Marie Curie Hospice Newcastle, which provides care and support to people who have received a terminal diagnosis and their carers, embarked on a service improvement project with a view to improving the experience of people living with Motor Neurone Disease (MND) at an early stage of their diagnosis. This project was delivered in partnership with the Motor Neurone Disease Association (MND Association), and with their support we have developed the group, Living Well: an early access programme for people living with MND.

Anecdotal evidence suggests patients diagnosed with MND have limited access to support networks at the early stages of their condition. Many patients also report that they prefer not to think too far ahead as a coping strategy to this changing condition, which can lead them to decline engagement with any such services that may be available.

The group began in September 2017 and has offered practical advice on living well with MND including basic moving and handling techniques; education sessions from a range of professionals including dietician, speech and language therapist and benefits advisor; and received complementary therapies such as massage and reiki.

The group has been running for over eighteen months. We are continually reflecting, reviewing and implementing change as appropriate. We have received fantastic user feedback from patients and carers who have been instrumental in the focus for the group. Participation has enhanced the person’s understanding of the hospice and has allowed for seamless access to Inpatient Unit/Day Therapy Unit if required, or support being put in place for home, facilitating patient choice where possible. This feedback highlights that a support group for people living with MND is valuable and beneficial to both the patient and carer, and our hope is for this service to continue at the hospice.

**P-192 BRINGING TOGETHER PALLIATIVE AND SPINAL INJURY CARE – A PROJECT TO SHARE AND DISSEMINATE KNOWLEDGE**

Jane Berg, Carole Cousins. Princess Alice Hospice, Esher, UK

10.1136/bmjspcare-2019-HUKNC.214

Background The number of annual spinal injuries (through illness or trauma) is thought to have been underestimated. Recent data suggests that 2,500 people a year in the UK are diagnosed with a spinal injury rather than the 1,000 previously thought (Spinal Injuries Association, 2019) and the number of people living with spinal injury in the UK is 50,000.

The type of injury is changing, the stereotypical young motorcyclist is being replaced as the most frequent patient profile by the older person who falls at home, or remains active in retirement and sustains an injury associated with an active lifestyle.

In addition, the life expectancy of people with spinal injury has improved and is now equal to that of non-injured people. Individuals are reaching old age with longstanding care needs as a result of their spinal injury.

The specialities of palliative and spinal injury care have traditionally had very different priorities but having recognised that the number of people with spinal injuries requiring palliative and end of life care is increasing, it is time to bring the two worlds together and learn from each other.

**Aim** The project will bring together palliative care and spinal injury care specialists to develop an education programme and resources for clinical teams caring for a person with a spinal injury who is approaching the end of life.

**Method** A course is being developed which will be available on-line and give easy access to information to support specialist and generalist practitioners.

A leading hospice and the Spinal Injuries Association are collaborating on the project to bring together their expertise. The presentation will outline how the project began and how the course is being developed.

**Anticipated results** The course will be available in Winter 2019.

This project has been funded by donation from the Yve family.

**P-193 KIRKLEES CARERS CONSORTIUM- PARTNERSHIP WORKING TO BENEFIT CARERS**

Catherine Thompson, Sarah Shaw, Sadaf Atiyan. Kirkwood Hospice, Huddersfield, UK

10.1136/bmjspcare-2019-HUKNC.215

**Background** The Carers Consortium is a collaboration of Kirklees carers services, which include:

- Carers Trust – a not-for-profit charity supporting carers. Offering carers breaks and homecare support;
- Carers Count – aims to promote the wellbeing of carers and support them in their caring role;
- Barnardo’s – offering support for young carers aged 8–18 who support an individual affected by a physical or mental health difficulty;
- Kirklees Council;
- Kirkwood Hospice.

The individual organisations identified that there were a wide range of services in Kirklees to support carers and that there seemed to be a degree of overlap in carers’ services making it confusing and complex to navigate. It was also felt that key stakeholders - including clinical staff across primary, secondary and community care - might not be aware of local services and where to signpost carers, and so a collaborative approach might support wider awareness raising and improve access to services.

As a hospice, we are extremely pleased to be recognised as a key partner in supporting carers in Kirklees. Through our involvement in the consortium, we now have the opportunity as a collective to share good practice, reduce the number of referrals that a carer would need to make and share knowledge of each others’ services and areas of expertise. This integration will benefit carers in Kirklees.

A feature of our partnership working has been the development and publication of joint promotional materials, including