

an easy-to-read leaflet for carers detailing local support services.

This has also been enhanced through joint social media activity, with a Twitter and Facebook account created along with the local #KirkleesThinkCarers.

Future plans include further collaboration on carers' issues, exploring service development and integration, development of new resources and through the medium of a shared social media account, keeping carers updated about the services that we all offer and a central point of contact.

P-194 IMPROVING CARERS' SUPPORT SERVICES AT MARIE CURIE HOSPICE, NEWCASTLE

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Carers have their own concerns, anxieties and stresses, and the complexities of these can influence their ability to fulfil this role (Trower & Reed, 2016). In turn this can significantly impact upon the patients' symptoms and psychological state, and has the potential to prevent patients from being cared for and dying in the place of their choosing (Janze & Henriksson, 2014). In claiming to provide a holistic service for palliative patients it is therefore vital that carers' needs be assessed and addressed.

With this philosophy in mind, in the financial year 2018/19 the Marie Curie Hospice (Newcastle) engaged with the Commissioning for Quality and Innovation (CQUIN) with the aim of improving the support offered to carers of our patients.

A multi-disciplinary steering group was initially formed and priorities for service improvements were developed.

The formal assessment of carers needs was felt to be paramount and we therefore embarked upon the hospice-wide introduction of the Carers' Support Needs Assessment Tool (CSNAT), (Ewing & Grande, 2013). Through engagement with the multidisciplinary team, support services have been established or developed which include mindfulness and art therapy groups, 1:1 relaxation/hypnotherapy and expansion of bereavement services to include a 'social' group and a Sons, Daughters and Siblings group. We are using information technology systems to aid the timely identification of carers and have introduced specific information resources in the form of a carers' hub and a carers' specialist section in the patients' bedside folder pack.

Many of the initiatives are in their infancy and so their impact has not yet been evaluated, although much positive feedback has been received. Moving forward there are plans to audit the use of CSNAT and research the impact of these service developments.

P-195 COLLABORATIVE WORKING BETWEEN CHILDREN AND ADULT PALLIATIVE CARE/HOSPICE SERVICES

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Background It is well documented that transition is a scary, isolating process for young persons (YPs) and their families,

with clear gaps in services (Care Quality Commission, 2014). Claire House collaborated with Wirral Hospice for an individual patient and positive outcomes were reported. We aim to replicate this offer to all YPs, offering a coordinated, continuous collaboration and opportunity to build relationships safely.

Aim To provide a collaborative service for all YPs, comprising a five-year overlap of services. To manage palliative care needs jointly, improve symptom management and quality of life. This collaboration will provide opportunity for adult services to extend knowledge of previously childhood conditions (Care Quality Commission, 2014).

Method Families were invited to joint presentation evenings facilitating early relationship building and allowing exploration of what is wanted (NICE, 2016; Chambers, 2015). Agreed to offer joint clinics (Chambers, 2015), parallel planning discussions, symptom management, and social events to enable YPs to build relationships.

Expected results Increased quality of life for YPs, improved symptom management, fewer hospital admissions, more support for families (both peer and professional), greater opportunity to build sustainable relations. The team will seek purposeful feedback at regular YP sessions, and professional feedback.

Conclusions This project will provide a choice of services offering support to YPs and their families throughout transition and providing a continuous, collaborative relationship with SPC services. It will enable adult services to gain the right skills to meet the complex needs of increasingly dependent YPs.

Innovative/of interest Children are living longer, increasing the need for access to adult palliative care. There exists a gap in knowledge of adult services, for previously exclusive childhood diseases and inequitable service provision. This project will enable children's hospices and adult palliative care services to work together and improve the struggle that families and YPs face with transition and relationship-building with adult services.

P-196 OUR SPACE – A PLACE TO JUST BE...

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Background 'Our Space' is an exciting new development created in partnership with children and young people, we recognise the rights and needs of children to grieve and be heard. Most of the children and young people we support are bereaved or have a family member who is being cared for by the hospice team. We were determined to advocate and work in partnership with children and young people to provide child-centred compassionate support, to increase opportunities to express feelings of grief and loss, to create an environment that lends itself to children and young people - a dedicated space.

How we did this The Family Support team carried out a number of consultations working with services users and agencies from across the hospice community.

The findings Children and young people reported a lack of understanding from a wide range of professionals. Not being respected for their knowledge, experience of living with a dying parent or relative.