Abstracts

those who may not choose to access professionally led services to receive support and information following bereavement. Referrals are triaged to the service via Newham Psychological Services who partner us in providing this service. The service is mainly operated by volunteers, with only two members of staff dedicated to the service on a part-time basis.

Findings and Recommendations We evaluate the impact of our service by measuring several factors including how the support has affected service user's lives.

Conclusion The services is in its first year, of three commissioned, but has had a strong start up with a high number of volunteers trained and 'active'. The level of uptake will allow us to find out the gaps in service provision/uptake and the need for informal support. This model could be replicated in other boroughs if the need and response is supported.

P40 A HOSPICE CHAPLAINCY APPROACH TO COMMUNITY OUTREACH: BUILDING END OF LIFE GROUPS WITHIN FAITH COMMUNITIES

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10.1136/bmjspcare-2013-000591.62

Introduction This innovative piece of Hospice Chaplaincy outreach is in its infancy. It is a listening project concentrating on multi faith communities in a richly diverse multi ethnic, multi-cultural inner city borough. The focus is on End of Life Care and Hospice services.

Aims This project aims to build long lasting relationships between local faith communities and the Hospice. It is organic and will develop according to the expressed needs of the stakeholders.

Method A local council map of places of worship was divided into four smaller areas and a project plan developed. Faith leaders in the first area were visited. Several introductory workshops were held in the Hospice. The Chaplain was invited to speak and give workshops in some faith communities. A training programme for volunteers to support End of Life Groups in faith communities was initiated. Work in area one is being sustained while visits to faith leaders begin in area two.

Results All thirty five faith leaders in area one were visited and invited into the Hospice for an introductory workshop. Twenty seven attended. A significant number had not met before. A second workshop was requested and several requested talks and workshops to be given to their faith communities. This has resulted in the development of a series of workshops based on the needs of these faith groups.

Discussion So far the results are consistent with the aims. Faith leaders meeting for the first time were able to explore possibilities of working more closely. Several have come into the Hospice to attend other events. End of Life groups are beginning in faith communities. Death is being discussed.

Conclusion Information given is often based on professional assessment of what is wanted, this ensures that we listen and respond to articulated needs. Working systematically with smaller groupings embeds the project in faith communities.

P41 ENGAGING OUR LOCAL COMMUNITIES

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10.1136/bmjspcare-2013-000591.63

'Creativity is contagious. Pass it on' Albert Einstein

Rooted in creativity Our area is filled with creative spirits, working away at their craft creating some truly stunning pieces. These artisans will often say that their work is good for the soul, working with their hands and heart with stunning results. At the Hospice we believe in holistic care, focusing on the individual, their soul and the things that matter to them. We believe that by adopting this focus it not only helps the individual but also the people that surround them, their family and friends. So as we started to look to ways to engage our more rural communities we decided to pair these two philosophies and host an event that was good for everyone's soul.

Create. Make. Bake was born.

The concept behind Create. Make. Bake is simply to bring together local artisans, with skills such 3D weaving, upholstery, jewellery making or bread making, to share their skill, knowledge and expertise. Artisans held workshops, demonstrations and talks and let the visiting public have a go. Our Trading Warehouse supplied a range of materials and a Pop-Up shop.

Create. Make. Bake. is a relaxed affair. No formal table plan, no standing behind trestle tables and no entrance or exhibiting fee. A free and informal event that targets local communities, engages the Hospice with a new audience and communicates the services that we can provide.

So, how did it turn out? Well... 16 tables with different artisans. 15 amazing raffle prizes. Over a 100 people through the door. People learnt, shared and, most importantly, enjoyed a day to remember with the Hospice. There was positive feedback: *'Had a great time today and thought the event was very inspirational.'*

Will it become an annual event? It's been booked in the diary already!

P42 MEDITATION: FROM HOSPICE TO COMMUNITY – FROM THERAPY TO LIFE SKILL

Ian Dewar. *St Catherine's Hospice, Preston, UK*

10.1136/bmjspcare-2013-000591.64

Introduction Programmes are developed in hospices to meet the needs of patients and have the potential to be life changing for people in the wider community. This project stemmed from work with patients on using meditation (mindfulness) as a therapeutic tool and extended outwards into the wider community.

Aim Bring together experience and praxis of work with patients, extract life lessons and turn these into life skills for non patients.

Methods Combining the experience of the facilitator (20 years of teaching meditation) and the insights gained from working with patients, a 6 week introductory course was developed for the wider community to buy into. Each session is 1.5 hours in length and there is an upper limit of 10 people per course.

Data is gathered verbally as the course progresses and the course is flexible by design so that changes in emphasis can take place according to group need. Feedback sheets are issued at the end of the 6 week course.

Results The course for non-patients is now into its fourth programme, numbers are growing – 4 on the first course, 10 on the third - and it is generating regular publicity for the hospice. At £99 per person per course for non-patients it is also generating income. More significantly feedback indicates that people are coping better with anxiety, changing attitudes to life situations, volunteering for the hospice and many report continuing to practise after the completion of the course.