

at initial and follow up consultation. Most striking was the significant degree of psychological distress reported by 85% of the patients and cited as the main reason for referral. This was reflected in higher ESAS scores in the psychological domain and an impact on wellbeing scores.

P-207 ADVANCING PERSON CENTRED PALLIATIVE CARE: DEVELOPMENT OF A SEVEN DAY THERAPY SERVICE

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Background Both the NHS Five Year Forward View (2014) and Ambitions for Palliative and End of Life Care (2015) advocate developing models of care organised around the needs of patients emphasising personalised care planning, fair access, collaborative working and care coordination. The hospice had an established team of therapists, however, it was recognised that there were gaps in service provision. The existing therapy service was reviewed in 2015 alongside NHS Improving Quality and adapted to provide a seven day service.

Aims

- Avoid unwanted admissions and facilitate patient’s choices and preferred place of care
- Provide ongoing rehabilitation, preventing loss of function and maintaining independence
- Facilitate discharge over seven days
- Provide moving and handling assessments to reduce falls risk
- Increase collaborative working with our seven day community nurse specialist service and health and social care providers.

Method Following the service review, funding for two WTE therapists was secured from our CCG and charity corporate partner to pilot a revised service. This enabled cover to start from January 2016 for weekends and bank holidays and increased response times. Therapists assess and treat patients in both inpatient and community settings and possess core skills and specialist skills specific to each profession.

Results At the three month interim review an improvement in services and outcomes for patients was demonstrated. Most referrals were for urgent community visits to maintain patients at home or for falls prevention on the inpatient unit.

Conclusion Seven day rehabilitation helps to reduce falls and maintains occupational skills. Rapid intervention facilitates discharge planning for end-of-life care at home and supports a person to remain there through provision of equipment and education of patient/carers. Enhancing partnerships with community services provides inclusive care for patients with palliative needs.

P-208 THE VALUE OF TRAINING VOLUNTEERS IN ENABLING COMMUNITIES: MINDFULNESS AND COMPLEMENTARY THERAPY GROUP

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In 2013 one of our volunteers (Jenny) voiced concerns that hospice clients attending a MS seated exercise class were finding the session less useful due to disease progression. Their weekly visit had proved to be invaluable to their wellbeing. Since becoming a volunteer with the hospice Jenny had done some basic complementary therapy training – reiki, “M” technique and chair massage. In conjunction with colleagues Jenny developed a 12 week programme for both clients and carers. The hour’s session started and finished with a relaxation/visualisation 10 minutes – and the middle section offered a different therapy each week. Jenny recruited trained therapists to gift their time and deliver a range of therapies. For example; massage, reiki, mindfulness, sound baths, reflexology etc.

From the outset the volunteers and therapists involved with the group were encouraged to facilitate a rehabilitative and enabling approach “to actively support patients to integrate self-management behaviours into their daily lives”. (Tiberini, Richardson Pg. 32) Group members evaluated their pain, mobility, general wellbeing and concentration. Also the effect of the session, both immediately and whether it had a longer lasting effect and helped them during the week.

The group has evolved into a sustainable cost effective programme. Every second week Jenny offers a therapy, either with or without additional therapists. On the alternate weeks the group focusses on mindfulness, either with Jenny or if she is unavailable one of the group puts on a mindfulness CD and the group runs itself.

Mindfulness was particularly popular and the Spiritual Co-ordinator has piloted an eight-week programme. Group members have discovered for themselves what therapies they benefit from and therefore might incorporate into their lives. Three group members went onto enrol on a complementary therapy course. Clients say the group experience generates fantastic positive “energy”.

Social Media, Communication and Technology

P-209 COMMUNICATION – HOW TO MAKE IT CLEARER

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The Issue We needed cost effective in-house communication skills education to suit all levels of staff and volunteers to ensure they had the knowledge, skills and confidence to communicate effectively with patients, their families and with each other.

Why it is important All of our staff and volunteers will at some time be supporting people in distress. Clinical staff often have ‘big’ conversations with their patients – breaking bad news etc. They can only do this if they have the right communication skills and the confidence to use them.

What was done We developed a three- tier programme of interactive communication skills workshops called CLEARER.