

- Increased volunteer numbers and roles
- Enhanced the diversity and quality of care provided on the IPU
- Effective management of volunteers ensuring volunteers are retained, feel valued and integrated into the team
- A further 10 competencies have been introduced to develop the IPU Care role further including taking and recording blood pressure

Following the success of the role the 3 bed community led DMH unit, recruited a volunteer coordinator for 16hours/week.

### P37 THE 100% PROJECT

Roslyn Neely. *Children's Hospice Association Scotland, Edinburgh, UK*

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**Background** There is anecdotal evidence that families who have a child with a life-limiting condition experience isolation and stress because people avoid engaging with them about issues around death, dying and bereavement. Scotland has a number of organisations who are now focusing on how to encourage a societal shift in attitudes. As a children's palliative care organisation, there is a responsibility to families to contribute to this work.

The 100% Project is a community engagement project which aims to start conversations about death, dying and bereavement in a life-affirming way.

**Aim** The 100% Project comprises a range of events and social media activities which aims to:

- Promote positive attitudes to death, dying and bereavement
- Tackle the silence and isolation experienced by those affected by death, dying and bereavement
- Raise awareness amongst those involved with the organisation, including service users, staff, volunteers, the public; and develop people's skills and confidence in this area
- Promote community involvement with and understanding of issues relating to life-shortening conditions

**Approach** The 100% Project will build gradually towards more difficult conversations around death and dying, by starting with a range of accessible, non-challenging activities. These include a social media poll to decide Scotland's Top Tear-jerker film; as well as engaging individuals in submitting uplifting pictures, quotes and stories. The 100% Book Club aims to generate conversations, bringing small groups together in local communities. In partnership with Good Life, Good Death, Good Grief, "Before I Die Walls" will generate positive publicity about the campaign across Scotland.

**Outcomes and Implications for Practice** It is hoped that this project will reduce the misconceptions that surround children's hospice care, and contribute to a national conversation in Scotland about Death, Dying and Bereavement, ultimately improving quality of life for families.

### P38 THE UK SQUARE TABLE PROGRAMME – AN ENGAGEMENT TOOL FOR HOSPICES

Barbara Gelb. *Together for Short Lives, Bristol, UK*

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**Introduction** During 2010-11, 41 Square Table events held across the UK. More than 1,500 people took part, including

families of children with life-limiting and life-threatening conditions, young adults who have grown up using children's palliative care services, health, social care and education professionals as well as other community leaders.

**Aims** The Square Table programme aimed to:

- Deepen understanding of children's palliative care within communities.
- Act as a catalyst for communities to work better together to meet the needs of children and families.
- Stimulate children's hospices and other providers to develop their services.

**Methods and results** The Square Table is a structured discussion, where all sides of the table are the same length to symbolise all views as equal in merit. Most were hosted by children's hospices, enabling a better understanding of the needs of users and reach out into their communities.

There were some common themes which emerged:

1. Low awareness has a negative impact on access to services.
2. Greater coordination of services and partnerships is needed at all levels.
3. Key working is seen by families as a necessity for helping navigate a complex system.
4. Serious concerns about support for young people making the transition to adulthood.
5. The future sustainability of services is a concern, particularly in the context of a fragile economy.

**Follow up** Progress has been made by services since the programme, particularly in

- Widening family support services
- Improving partnership working and collaboration with the statutory sector
- Developing new services
- Improving communication

**Conclusion** The Square Table concept is a valuable tool for hospices to engage more effectively with communities and in service development, especially in response to the Commission into the Future of Hospice Care.

### P39 NEWHAM BEREAVEMENT SERVICE – A COMMUNITY ENGAGEMENT PROJECT

Lourdes Colclough, Sarah Burnard. *St Joseph's Hospice, Hackney*

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**Aim** The aim is to assess the bereavement needs in Newham and to provide support that is sensitive to the cultural, religious and language requirements of the borough's population. The service operates via a compassionate community model, providing training to enable the local population to support people within their locality, as well as improving local knowledge around death and grief.

**Background** Newham has a diverse community, with 68% of its 247,614 population coming from Black and minority ethnic communities (ONS, 2008). The estimated number of deaths in Newham in 2008 was 1,437 (ONS, 2008), yet the majority of those bereaved did not access professional support. Cultural attitudes to death and grieving could prevent people from accessing formal bereavement services and many people could be unaware of other areas of support they could access.

**Approach** Volunteers, who are reflective of the local community, are being trained, on an on-going basis, as befrienders, allowing

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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

Sr Hilary Thompson, Vivi Boucher. *St Joseph's Hospice, Hackney, London, UK*

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**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

Celia Pyke-Lees, Laura Parker. *St Michael's Hospice, St Leonards on Sea, UK*

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.