Developing a Volunteer Workforce for a Large Lymphoedema Service to Support the Clinical Team to Continue Services to Patients during the COVID-19 Pandemic

Seamus Nash, Rosie Dempsey, Tracey Addy. The Kirkwood, Huddersfield, UK
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Abstract

Background: St Oswald’s provides a large and specialist Lymphoedema Service which has traditionally been predominantly clinic-based at their main hospice site. Due to the impact of COVID-19, the service had to quickly pivot to provide much more domiciliary based care - to adhere to new infection control measures and respond to shielding patients’ needs. To adhere to the practical nature of the care as well as safeguarding regulations, the domiciliary visits had to be carried out by two lymphoedema nurses and it became apparent that recruitment of additional volunteers would be extremely beneficial and allow more patients to benefit from care.

Aims: To increase the number of volunteers recruited and inducted into their role to allow the lymphoedema service to maintain services during the pandemic.

Methods: To respond to an increased need for domiciliary care, in April 2020 St Oswald’s Hospice began recruitment by advertising the volunteer role on social media. Following recruitment, volunteers were inducted and trained. During this time, staff engagement sessions were carried out and a clinical Volunteering Steering Group was set up to review and evaluate the project.

Results: Over 40 new volunteers recruited, with 20-30 currently volunteering in the service. Other benefits have included: meaningful collaboration between a lymphoedema service and volunteering department, funding sourced for a volunteer coordinator for lymphoedema service to continue to build on this success, and reaching new volunteer audiences as the role engaged a much younger cohort of volunteers than traditional volunteers.

Conclusion: The rapid flexing of the service supported by the Volunteering Department allowed services to be maintained, patients continued to receive assessment and treatment at home, which many prefer. In addition an unseen benefit has been volunteer enjoyment and a reporting that the experience of volunteering has been beneficial in particular in seeking university and other employment placements.

Transformation of the Complementary Therapy Service

Liesl Hopkins. St Richard’s Hospice, Worcester, UK
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Abstract

Background: With a long waiting list and staff therapists working from home, we came up with very creative ideas to continue to provide therapeutic support during the pandemic. Complementary therapies to help improve energy levels, support with breathlessness, reduce anxiety and stress, help with medication, help with relaxation, improve mood and aid sleep.

Aim(s): To continue to provide complementary therapies to patients on the Therapeutic Programme, Outpatients, Carers and Bereaved, Inpatients.

Methods: We continue to provide one-to-one complementary therapies to people on our caseload including teaching carers, self-massage, Indian Head Massage, Relaxation Therapy and HEARTS Therapy. All treatments are carried out virtually under the guidance of a qualified complementary therapist. Feedback cards are completed and returned to us; reporting high quality therapy treatments have continued throughout the pandemic.

Results: Pre-pandemic 2019; 133 aromatherapy massages and 270 reflexology treatments were given. Pandemic, 2020-2021; 43 HEARTS treatments, 77 massage therapy and 87 relaxation therapy treatments were given, indicating a positive shift away from hands-on to talking therapies.

Jan. 2019 to May 2019 – 321 treatments were given; Jan. 2020 to May 2020 – 139 treatments were given; Jan. 2021 to May 2021 – 243 treatments were given.

Conclusions: The complementary therapy team intend to provide a hybrid model of care in the future with virtual therapy treatments alongside face-to-face for patients, carers and bereaved. This will enable us to support a wider spectrum of people in South Worcestershire.