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 commis-
sioned, but has had a strong start up with a high number of vol-
unteers 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
10.1136/bmjspcare-2013-000591.62

Introduction This innovative piece of Hospice Chaplaincy out-
reach 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 lead-
ers 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 pro-
gramme 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 sec-
ond 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 possibili-
ties 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, work-
ing away at their craft creating some truly stunning pieces. These
artists will often say that their work is good for the soul, work-
ing with their hands and heart with stunning results. At the Hos-
pice 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, knowl-
edge 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 thera-
peutic 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 in its fourth pro-
gramme, 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.