Discussion Expected and unexpected are words that relate to this project. Expected redactions in anxiety where met. One of the most surprising things (needing further research) is where participants reported improvements in physical awareness and health as a result of meditation practice.

Conclusion Meditation (mindfulness) offers a model of how certain hospice skills are evidently transferable to different settings enhancing the hospices model of care, community engagement and profile.

Education, training and research

At a time when hospice care is being scrutinised by commissioners this small study evaluates the implementation of an education programme in a Day Hospice and the impact this had on patients living with life limiting illness.

Education for patients near end of life appears to have received minimal research attention. Wider investigation of the needs of these patients reveals that the impact of illness robs them of their sense of self and autonomy (Johnston 2004), and opportunities to self-care and self-manage can be limited by paternalism (Cottrell 2008, Jackson 2006).

This programme offered patients the opportunity to attend facilitated educational discussion groups such as medicine management, coping with anxiety and breathlessness, and planning ahead for death and to participate in group relaxation and exercise sessions

A case study methodology allowed the use of mixed methods to collect data from three sources; patients, using diaries and transcribed interviews; staff delivering the programme using a focus group; and professionals referring to the service using a questionnaire.

Findings revealed that patients had motivation and capacity to participate and learn however ill they were, demonstrating their desire to be acknowledged as ‘active and participating citizens’ (Kendall et al 2007:524). Patients also experienced an increase in self-esteem and confidence resulting from the programme.

Staff delivering the programme reported an increase in their confidence through facilitating discussion groups and were challenged in relation to their preconceived ideas about what individual patients may want to learn.

Other findings related to the ability to promote the service to a wider group of potential patients.

This small study demonstrates the potential for increased ‘self-care’ when an education programme is introduced within a Day Hospice setting. This may positively influence potential commissioners to the service and raise the profile of Day Services as part of Hospice Care.

Abstracts

P43 THE USE OF SOCIAL MEDIA BY UK HOSPICES: REVIEW AND DISCUSSION

Eleanor Kleszcz,1,2Carolyn Campbell,1Cornwall Hospice Care, St Austell, UK,2Peninsula College of Medicine and Dentistry, Plymouth, UK

Background With more than 65% of adults actively using social media each week it is important to ensure that hospices are developing new ways to engage with this population group to encourage fundraising and provide support to patients and carers. Social media provide exciting opportunities for hospices to widen their influence and activity, but also raise practical and ethical issues which must be addressed.

Methods This research appraised 150 hospice websites in England and Wales to determine the prevalence of social media and how it is being used to engage, educate and support hospice users, volunteers and staff. Numbers of users and type of use (fundraising, support, awareness raising) were recorded and factors such as prominence on website explored. Social media sites were also searched for links to hospice and palliative care issues.

Results In total, 35% of hospice websites used Facebook and 33% used Twitter to communicate with the public, 28% of websites accessed did not use any form of social media. The majority of social media sites were used to encourage and provide information regarding fundraising. Very few websites used a forum, an opportunity for hospices to provide support to hospice users whilst also educating and encouraging fundraising in a more secure environment. The extended search of social media sites highlighted areas of discussion, support and awareness raising distinct from and not tapped into by hospice sites.

Discussion The rewards and disadvantages of forum use for hospices are explored alongside recommendations for improving public awareness of the hospice social media sites. To date, UK hospices are underusing social media both in volume of traffic behind.

P44 THE INTRODUCTION OF A PATIENT EDUCATION PROGRAMME INTO A HOSPICE DAY SERVICE

Chris Benson. St. Peter’s Hospice, Bristol, UK

At a time when hospice care is being scrutinised by commissioners this small study evaluates the implementation of an education programme in a Day Hospice and the impact this had on patients living with life limiting illness.
which fits well with portfolio learning/evidence for all professionals including General practitioners.

Outcomes The evaluations have been excellent from all professionals in all clinical arenas. Funding has been secured for further education and collaboration in education is essential to future delivery. The practical element of ensuring information follows the patient, and how to start, support and close conversations were particularly appreciated.

Application to hospice practice Exciting innovative education can embrace key contemporary issues and develop and inspire a workforce. Clinical education in the 21st Century must be in partnership and make the complex simple. Negotiated learning can embrace key contemporary issues and develop and inspire a generation of staff to meet the increasing need.

Background Palliative care patients can have complex multidimensional needs. A cohesive multidisciplinary team is vital in the provision of quality care. To achieve this, healthcare professionals need to work alongside and respect each other’s professional roles. The use of interprofessional practice placement (IPP) for under graduates has been found to increase understanding of their own role and that of their team colleagues1.

Princess Alice Hospice has been supporting IPP placements since 2008. Final year mixed professional students undergo an induction programme and work together on an in-patient palliative care unit.

Aims To explore
• how working together challenges stereotypical views and the impact of this on communication
• the influence of IPP on students ability to communicate with patients and carers
• if IPP equips healthcare students through reflective practice
• observations of team dynamic, confidence and behaviour

Methods The triangulation of course evaluations facilitator feedback and coordinator reflection.

Results As professionals setting out on their career, the students acknowledged their need to appreciate and respect what each profession brings and team working. They found a hospice a challenging place in which to learn but equally learned the value of good communication and psychosocial support for their patients. Students also appreciated the need to be able to communicate effectively with other professions in order to provide patient centred multidisciplinary care.

Conclusion If we are to produce healthcare professionals who will provide a quality health service, they need to speak together and function well as a team. IPP provides the forum for experience and emotional intelligence to be nurtured. Supportive quality healthcare is not just knowing the facts but hinges on effective communication when compassion can be expressed.

Application to hospice practice IPP in a hospice setting is an appropriate place to support novice healthcare professionals in multidisciplinary working and quality care.