Abstracts

At the end of every single session the animal handler had to fill in three evaluation sheets:

- one for patients
- one for their relatives (if present)
- one for healthcare professionals.

P-48  "SINGING IN THE CHOIR WOULDN’T DO US ANY HARM": EXPLORING A UNIQUE PARTNERSHIP BETWEEN A FREELANCE MUSIC THERAPIST, A LEADING NATIONAL LUNG CHARITY AND AN ADULT HOSPICE

Anna Ludwig, Harperhall Music Therapy, Biggar, UK; Kilbryde Hospice, East Kilbride; Team Jak Foundation, Livingston; Lady Home Hospital, Douglas

In 2015 a national lung charity funded a 12-week pilot project in 10 UK locations called “Singing for Lung Health”. Giving a brief introduction to music therapy in an adult hospice setting, this paper will then explore how the music therapist worked in collaboration with the lung charity and the hospice to develop and run the choir after the initial 12 weeks of funding and will include what the potential benefits of singing in a choir can be.

Aims of the choir

- To evaluate and monitor changes in breathing, confidence and general health and well-being using questionnaires provided initially by the lung charity and now in development with the hospice and the music therapist.
- To use and develop vocal and breathing techniques, originally geared towards those with lung conditions, for use with a wider client group including those with life-limiting conditions.
- To maintain and develop the choir to include hospice patients, carers, staff, volunteers and members of the public.

This work in progress is

- Bringing people together at the hospice from all walks of life with or without a life-limiting condition.
- A partnership with the choir, the hospice and the music therapist which includes writing and performing a song together to promote the work of the hospice (this will be shared during the presentation).
- Highlighting the potential health and well-being benefits of singing in a choir (including physical, mental, emotional and social benefits).
- Promoting the work of the hospice to the wider community.

To conclude, the author aims to share this creative work in progress in order to highlight the benefits of singing in a choir, the unique collaboration between the music therapist, hospice and lung charity and thoughts around how this work may be evaluated in the future to ensure its success and continuation.

P-49  POPPIES

Nici Williamson, Karen McPhail, Stuart Cartlidge. Macmillan Hospice, Stoke-on-Trent, UK

Diversional therapy is a tool used to help patients express emotions in a different way. Activities are devised with a worthwhile outcome and all patients, of all abilities, can participate. It encourages communication, expression, comradeship and reminiscence thus giving purpose and meaning for patients in our care.

One such project was to create our own ‘Tower of London’ display of poppies, but on a smaller scale. Poppies were to be made out of plastic bottle bottoms, painted by hand in red and black.

As the idea took hold, so the project grew. Patients formed their own ‘industrial line’ with some cutting, others painting and the rest assembling. The goal was for 3500 poppies. The design was drawn by an ex-draughtsman patient using his professional skills. It involved an 8 foot cross covered in poppies with a cascade of flowers to two giant poppies on the ground. The whole display measured approximately 50 metres in length and five metres in width and ran from the Spiritual Space to the Day Therapy Unit.

Patients, carers, visitors, staff and local schools ‘worked’ to create poppies. A growth chart recorded the number of poppies made with the target being 3500.

Local radio and newspapers appealed for bottles and the project took on a life of its own. It culminated in a service of Remembrance on the 11 November 2015 at the hospice. The service was attended by patients, carers, visitors, staff, local schools, dignitaries from the local community and British Legion. An ex-serviceman patient read the ‘Ode of Remembrance’. A young schoolboy played the bugle ‘Last Post’ to finish.

Patients participated with enthusiasm and motivation, staff felt the strength of working as a team. Collaborative working took the hospice into the local community. The Hospice profile was raised in the media. Conversation and laughter flowed and continues to this day.

P-50  ROYAL TRINITY HOSPICE ‘WELCOMES’ THE WELLBEING PROGRAMME WITH SUCCESS

Moira O’Connell, Sian Evans. Royal Trinity Hospice, London, UK; Macmillan Cancer Support

Background Prior to the launch of the Wellbeing Programme an outpatient service evaluation was completed in 2014, with the following needs identified:

- Peer support for patients, carers and families
- Earlier intervention for patients/carers and the wider health economy for people with palliative care conditions
- A model for day/outpatient services, based on a therapeutic approach to rehabilitation and critically, self-management.

Aim

- To widen the breadth of support and care we provide to our patients to include Wellbeing Programmes through the introduction of peer and carer support sessions.
- Ensure patients, families and carers feel supported in relation to their anxieties and practical matters about their palliative journey.
- To start the new programme within six months of posts being in place.
- To build partnerships with other organisations collaborating and practicing seamless communication links to ensure patient needs are addressed in a timely manner.
- To further embed Royal Trinity Hospice as a provider of specialist palliative care services within its community.