for hospice beds, support groups, therapies and activities. They are also able to provide feedback and get news on upcoming events. The interactive nature of the portal provides a platform for two way communication enabling families to send vital bits of information directly to the hospice team where they can be attached to the child’s record, while hospice staff can upload photographs, videos and drawings enabling the family to log-on offering them reassurance and ongoing involvement even when their child is on a short break. A blog-type diary is also available for each user. They can upload media content, create scrapbooks and express their feelings in pictorial as well as written format, thus enabling staff to exploit creativity as a tool in managing the condition and to understand the thoughts and feelings of the child and family over a period of time. There is also the ability to develop secure chat facility and professional one-to-one support on line. The portal’s user interface resembles the standard social media concepts of today’s IT-driven world, thus minimising the need for any user training. IT professionals, Acorns staff and ambassadors have all been involved in the portal’s design and content.

Communities

P-37 LIVING RIGHT UP TO THE END’ WHAT DO PEOPLE WANT TO SUPPORT THEM TO MAKE PLANS FOR END OF LIFE?

Susan High, Sally Boa, Marjory Mackay. Strathcarron Hospice, Denny, UK

Background National policy encourages people with Long Term Conditions (LTCs) to plan for end of life (Scottish Government, 2015; Henry, 2015). However, people can be reluctant to engage in conversations and as a result miss out on opportunities to make plans for the future whilst getting on with living (Detering et al., 2010).

Aim To identify what’s important to people in the last year of life in relation to planning ahead and what would support them to do this.

Methods 18 community engagement events were held in local venues. People with LTCs and carers were invited to discuss: What matters to you when you are living with declining health? What prevents you making plans for the future? What would help you to plan for the future and what support do you need to do this? Direct quotes from each session were analysed thematically using Framework analysis. The findings were verified at two further engagement events.

Results What matters to people: Maintaining independence and control, having a plan, important conversations, social support, and access to the right information. Barriers to planning were: Cost concerns, not knowing what to do or say. Lack of social support and dealing with uncertainty. What would help? People wanted to maintain control and have a choice about accessing relevant and appropriate information. They wanted to know where to go and who to ask for help with planning for the future and saw their local communities as part of the solution.

Conclusion People with LTCs in the last year of life want to plan for the future but want to do this in their own way when they are ready. Engaging with this group has shown that services should be developed in partnership with the people who use them.

P-38 MORECAMBE BAY TO BEIJING – A HOSPICE JOURNEY FROM TRAGEDY TO FRIENDSHIP

Sue McGraw, St John’s Hospice, Lancaster and South Lakes, UK

10.1136/bmjspcare-2017-hospice.66

As part of our 30th anniversary celebrations in 2016 we organised our first overseas challenge to the Great Wall of China. Morecambe has a tragic history with the Chinese community because of the Morecambe Bay cockling disaster in 2004. Working with the local Chinese community we launched the trek and persuaded 31 people to make the journey. The Chinese community wholeheartedly supported our ambition to do something positive to bring the two parts of the world together in a constructive way. After a year of fundraising, the campaign raised almost £100 k net. On the last day of the trek a small group visited the Hospice in Beijing. We were welcomed by the Hospice President, shown around the ward, attended a ‘Day Hospice’ session and exchanged gifts. Although the Beijing hospice was full to capacity and felt chaotic at times, the professionals caring for the patients had the same unique ethos that we do in our hospice. Indeed, their values of Care, Compassion and Collaboration mirror our own hospice values. We discussed views of death and dying with our Chinese hosts. Their approach to spiritual care was different as patients were mainly Buddhists and were quite happy to discuss their ‘next life’ plans with us. One woman told us she was definitely coming back as a man! A group of Buddhist monks lived in the courtyard of the hospice and were always on hand to help the transition from one life to the next. Since our return, we have continued to work closely with the Chinese community via a network group called ‘Communities Together’. We are planning a ‘Faith at the end of Life’ workshop in November where representatives from all the major faith groups and communities in our area will discuss attitudes, customs and beliefs around death and dying.

P-39 MOUNTBATTEN MEMORIES

Emma Topping, Nigel Hartley. Earl Mountbatten Hospice, Newport, Isle of Wight, UK

10.1136/bmjspcare-2017-hospice.66

Background A few plastic boxes containing old photos and typed notes tucked away in an office were all that existed to share the story of our hospice’s 35 years. Thanks to a successful National Lottery bid, we set about bringing our story to life, through the recording of people’s memories to form an oral history project called ‘Mountbatten Memories.’

Aims To share our history with a wider population, therefore inspiring others to be involved in our future. To consolidate our place in the Island’s health and social care environment, and in the hearts and minds of our community. To provide opportunities to reconnect people through their past involvement and to build new and diverse skills in volunteers, for example, audio editing and interviewing.

Methods We based a series of reminiscence events in our hospice shops, ensuring our wider community’s involvement in,
A MATTER OF LIFE AND DEATH: LEADING CONVERSATIONS FROM THE FRINGE

Sharon Hudson. Birmingham St Mary’s Hospice, Birmingham, UK

What’s it all about? BrumYODO is a collaborative of citizens from across the arts, health, death industry and much more. Above all we are citizens of Birmingham who create opportunities to bring conversations about death and dying out into public spaces.

Our evolution We began from a small conversation in a pub (all the best conversations are) about a Death Café three years ago. This year we ran a festival – ‘A Matter of Life and Death’ in Dying Matters Week. It was a vibrant, multi-focused event in the heart of Birmingham, composed of creative arts, films, photography, theatre and talks tackling difficult topics. We are all volunteers and this year received funding from the Arts Council. Evaluation is still in process but footfall, engagement and attendance were extraordinary. Many conversations were had about life, death, hope and creativity.

So how is this leadership? Free from the boundaries of organisations and systems our little team are free to create. It has brought together new networks, connecting those who worked in parallel. It has freed the creative aspects of ourselves and in doing so stretched ‘What is possible’. It has generated something which feels owned by Birmingham and its citizens.

So what now? We believe we have a social commitment. The need for meaningful conversation and action for end of life care is real and now. We wish to create bigger networks of communities who return the focus of end of life care back to people.

P-41 A COMMUNITY ENGAGEMENT APPROACH TO TALKING ABOUT DEATH, DYING, BEREAVEMENT AND MAKING PLANS FOR THE END OF LIFE

Margaret Brown. St Giles Hospice, Lichfield, UK

Pop Up Shop held during Dying matters Week 2017 ‘Our lack of openness has affected the quality and range of support and care services available to patients and families.’ Dying Matters website.

Aim To engage with the local community in conversations relating to death, dying, bereavement and end of life plans, using a Pop Up shop in the centre of town on the three main market days.

What We did
• We partnered with our local Co-operative Funeral Services, who had premises we could use, and invited a number of relevant local organisations to join us in reaching out to our local community.
• Offered café style space with free tea, coffee, cakes etc.
• Provided wide range of local information relating to death, dying, bereavement and advance care planning.
• Offered complementary therapy taster sessions.
• The Co-op provided a white coffin for people to decorate with pictures, messages etc.

What We Learnt
• People highly valued our time in listening to them.
• People sometimes need ‘permission’ to talk about things that concern them.
• The public value seeing local organisations working together.
• The importance of using local people to engage with local people.
• As a hospice we couldn’t have done it on our own.

Unexpected Outcomes
• Recruitment of new volunteers and interest in joining the wider health and social care workforce.
• Quality and depth of conversations that took place both inside and outside the shop.
• Enhanced our partnership working; strengthened relationships, increased knowledge and understanding of each other’s services.
• People said they valued seeing us model that it’s possible to approach difficult subjects without causing offence.
• Support from other departments within the hospice which has helped us in reaching our internal community with the key messages from the Dying Matters agenda.
• Income generation – people insisting on giving us money despite us being clear in not asking for donations.

P-42 THE MILL AT ST CATHERINE’S PARK, CAFÉ AND COMMUNITY HUB – THE FIRST THREE YEARS

Lynn Kelly. St Catherine’s Hospice, Lancashire, UK

Background The Mill opened on 24 November 2014 as a café and community hub providing a reassuring and welcoming space for families and patients, an information and signposting service through volunteers, opportunities for income generation through room hire plus diversional activities such as light exercise classes, crafts and talking therapies.

Aims To serve the whole population by encouraging and empowering people to help each other. To demystify hospice care. To develop sustainable income streams through commercial and community involvement.

Methods New volunteer positions: Café Assistant table service and Advisor Service for signposting, information and basic