

P-187

'THIS IS ME: LIVING WELL' – A COMPREHENSIVE DAY THERAPY UNIT PATIENT EDUCATION PROGRAMMEDebbie Bolton. *St Catherine's Hospice, Preston, UK*

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Background 'Patient education is the process by which others impart information to patients and carers that will alter their health behaviours' (Doak, Doak, & Root, 1996). The results of a quality improvement project highlighted that patients wanted more learning opportunities whilst attending the unit. We explored and instigated a comprehensive patient and carers' education programme.

Aims To increase the physical and mental health, wellbeing and safety of patients and carers who attend the hospice day therapy unit (DTU) by providing a continually evaluated 12 week education programme.

Methods August to December 2016 – bid submitted to United Utilities for funding. Confirmed. January to May 2017- project management group recruited. Review of the quality improvement project and literature. Education programme outline produced. Educators approached. Designed and printed project literature and take home information. Project named – 'This is Me: Living Well' programme. May 2017- programme one commenced with 12 diverse topics. Post-session evaluations measuring validity via a side by side matrix (Rankin, Stallings & London, 2005).

Results May 2017 to April 2018: Programmes 1–4. 165 sessions delivered. 963 total patient attendance. (44 from the In-Patient Unit/Clinical Nurse Specialist team) 304 total carer attendance.

User feedback 86.9% scored 5/6 (very good/excellent) for the sessions. 83% agreed/strongly agreed the programme has improved their confidence and self-esteem. 92% would recommend this programme to others. An external volunteer researcher is independently evaluating the programme. Preliminary analysis completed.

Conclusion The evaluation evidence highlights the positive contribution that the programme has made to patients' lives; increasing valuable knowledge and enabling a more confident approach to their palliative journey. Other issues: restricted times to assess patients during the day, no alternative option for those not well enough to be active in the teaching; and emotive topics being discussed when some patients were feeling vulnerable. Links were also strengthened with external organisation educators enabling collaboration on additional patient focused projects.

P-188

CHANGES AND NEW INITIATIVES IN DAY THERAPY, OFFERING PATIENT CHOICE AND PERSONALISED SESSIONSJanet Manuel, Josephine Potts. *LOROS Hospice, Leicester, UK*

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Background LOROS Day Therapy has recently extended the services that it offers to patients. This paper will outline the three services that Day Therapy is offering, including examples of the wellbeing sessions being offered at each service.

Aim To showcase Day therapy and the additional services now being offered and how this has helped to transformed care.

Method By offering three different branches to the Day Therapy service:

1. 'Traditional' Day Therapy days currently being offered four days per week. Clinical referrals accepted for symptom control, social isolation following diagnosis and a day's respite for carers.
 - o Holistic nurse assessment by a Registered Nurse
 - o Support and the giving of information through a programme of wellbeing sessions (e.g. managing fatigue, falls prevention, mindfulness)
 - o Clinical procedures
 - o Creative work
 - o Complementary therapy
 - o Occupational therapy and physiotherapy
 - o Social interaction.
2. 10 session 'Therapeutic programme' currently offered one day a fortnight aimed for those patients that need support emotionally and psychologically as a result of their diagnosis.
 - o psychological support with a Registered nurse
 - o Specifically tailored wellbeing programme aimed at supporting these patients emotionally and psychologically. (e.g.: advance care planning, anxiety/mood management)
 - o Holistic nurse assessment
 - o Chaplaincy
 - o Complementary therapy
 - o Relaxation.
3. 'Drop in' Day Therapy sessions running one day a fortnight. No clinical referral required, patients and carers can 'drop in'. This is a social model, run by volunteers with no clinical input.
 - o A programme of wellbeing sessions i.e. flower arranging, cake decorating, visualisation sessions
 - o Creative and craft work
 - o Complementary therapy
 - o Supported by volunteer bereavement support worker
 - o Group and peer support.

Outcomes All referrals made into Day Therapy are triaged to ensure a bespoke service is offered according to each patient's needs, thus transforming care by providing services tailored for each person's requirements. Feedback and patient evaluation will be quoted on the finished poster.

P-189

MAKING CONNECTIONS: THE SHARED BENEFITS OF PARTICIPATING IN THERAPY-LED WELLBEING GROUPSKate Jackson, Helen Robson-Swift, Tina Naismith. *LOROS, Leicester, UK*

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Background LOROS Hospice provides a day therapy service to 150 patients who attend fortnightly, with access to many services. Within the developing day therapy provision, the occupational therapists, physiotherapists and therapy assistants facilitate 'Wellbeing sessions' designed to deliver education on a range of topics. Whilst the content of the sessions is informative and educational for patients, the therapists have noticed a growth in the sharing of patient experiences and the positive effect this has on self-esteem, confidence and a sense of cohesiveness. Following a literature search, it is apparent that evidence demonstrating the benefits of therapy-led wellbeing groups in hospices is limited.