

programming to an adult audience. This is the first time MCP has been offered in the UK to adults with life-limiting illness and has evaluated very well with very little if no expense to the hospice. One provider can stream to unlimited patients/locations.

P-212 HOSPICE WALKS FOR HEALTH – INTRODUCING A ‘WALKING FOR HEALTH’ SERVICE AT A PRO-ACTIVE HOSPICE

Nicola MacKinnon, Chris Herman, Diane Baldwin. *Willen Hospice, Milton Keynes, UK*

10.1136/bmjspcare-2018-hospiceabs.237

Background Following a recent relaunch of the user group at the hospice, users requested the opportunity to participate in regular walks linked to the hospice. Armed with this request we designed a service to complement this and three other key considerations:

- i. Increasing evidence that people benefit both physically and psychologically from pursuing as active a lifestyle as possible
- ii. The hospice is located by two beautiful lakes in an area with a network of well-maintained footpaths
- iii. There is an already established national ‘Walking for Health’ (WfH) programme across the city but service users did not have the confidence to use the other walks.

Aims To work in collaboration with our staff, volunteers, local council and users to develop a cost-effective, regular programme to empower service users to be physically active.

Methods Volunteers were recruited, attended training organised by the local Council and were supported by the hospice team to start a weekly WfH program based at the hospice. The walks finish at the main hospice lounge with refreshments and opportunity to socialise. A service user who attends the walks designed a questionnaire to gain qualitative feedback about the walks.

Results Within six weeks, seven patients have regularly attended the weekly walks. Patients describe the benefits of attending the walks as ‘companionship, togetherness, friendships, confidence, fitness, strength and stamina’. One patient said, ‘*I can walk further every week, now I can manage two miles*’.

Conclusions Within six weeks, having worked in collaboration with our local Council to have seen six patients and two volunteers go for an hour long walk every week is something to celebrate and share. The Council are now planning to promote the walk in their WfH publications. We now plan to increase the range of these walks and promote them to all users of our services.

P-213 GROWING FORWARDS

Lucy Heaps. *Garden House Hospice Care, Letchworth, UK*

10.1136/bmjspcare-2018-hospiceabs.238

Background The hospice Occupational Therapist (OT) had read a poster regarding Social Therapeutic Horticulture (STH) within palliative care (Leckie & Pilgrem, 2016). With low level experience of gardening, the OT was given the challenge of starting up STH within day services.

Aims

- To liaise with the fundraising team to access funding for training and equipment needs
- To develop skills and knowledge to lead STH sessions via networking and training
- To run STH sessions with support from the rehab assistant and a volunteer.

Method June 2017 – started researching what was involved in running a weekly STH session. September 2017 – funding gained from Santander. September 2017 – became a member of the STH for palliative care (STH4PC) specialist interest group. October 2017 – attend the Thrive ‘Award Access course’ on STH (endorsed by the Royal College of Occupational Therapists). November 2017 – Attended training day at Phyllis Tuckwell Hospice – setting up a STH session. April 2018 – started weekly STH sessions at the Hawthorne Centre.

Results

- OT has increased knowledge and skills in STH
- Gained fantastic peer support and guidance face to face, attending specialist interest groups and via social media channels
- Weekly STH sessions are in place and patients are giving good feedback. They have a reduction in their anxiety and stress as a result of attending a sessions
- Patients are proud to be growing plants and vegetables to be used by the kitchen, and also sold at our annual hospice open garden event.

Conclusion It has been a rewarding personal development experience to come into a new post and set up a successful STH session to patients. We have future plans ahead to increase the overall access to the garden by patients, families and staff.

P-214 THE TWINING RELATIONSHIP BETWEEN LOROS HOSPICE AND NDI MOYO HOSPICE

Gemma Miller, Agnes Rupango. *LOROS Hospice, Leicester, UK*

10.1136/bmjspcare-2018-hospiceabs.239

Background In 2015 LOROS Hospice was approached by a doctor about a possible twinning with Ndi Moyo Hospice in Malawi. The doctor is a retired GP who had previously witnessed the good work that they were doing and their need for support. The LOROS Ndi Moyo Hospice Steering Group is responsible for fundraising, managing monies and planning visits. A patient legacy has enabled LOROS to set up a bursary fund which enables a limited number of LOROS staff across all services to visit Ndi Moyo Hospice annually.

Aims It has been agreed that LOROS staff will visit Ndi Moyo to:

- Share ideas, innovation, and best working practice
- Enhance and broaden palliative care training for the benefit of patient care and personal development
- To experience palliative care in a different cultural setting
- Support the acquisition of medical supplies for Ndi Moyo
- Provide opportunities for staff to experience palliative care in diverse environments.

Methods LOROS staff spent seven days visiting Ndi Moyo getting actively involved with daily tasks. They provided